



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

March 2, 2018

Victory AFC LLC
5517 Star Flower Drive
Haslett, MI 48840

RE: Application #: AS330389384
Victory AFC
6101 Norburn Way
Lansing, MI 48911

Dear Victory AFC LLC:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 6 is issued.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (517) 284-9720.

Sincerely,

A handwritten signature in cursive script that reads "Derrick L. Britton".

Derrick Britton, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 284-9721

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License Application #:	AS330389384
Licensee Name:	Victory AFC LLC
Licensee Address:	5517 Star Flower Drive Haslett, MI 48840
Licensee Telephone #:	(517) 402-3952
Licensee Designee:	Joy Mbelu
Administrator:	Joy Mbelu
Name of Facility:	Victory AFC
Facility Address:	28 6101 Norburn Way Lansing, MI 48911
Facility Telephone #:	(517) 402-3952 07/17/2017
Application Date:	
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODOLOGY

07/17/2017	On-Line Enrollment
07/20/2017	Contact - Document Sent Rule & Act booklets
07/20/2017	Lic. Unit file referred for background check review Joy - RS
07/20/2017	Application Incomplete Letter Sent App; rec cl for Joy (LD & Admin)
08/14/2017	Contact - Document Received App
09/07/2017	Contact - Document Received RI-030 for Joy
09/11/2017	Contact - Document Received Valid corp
10/05/2017	Application Incomplete Letter Sent
01/11/2018	Application Complete/On-site Needed
01/24/2018	Inspection Completed On-site
01/24/2018	Inspection Completed-BCAL Sub. Compliance
02/06/2018	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Victory AFC is a small, single story ranch style home located in an urban area on the south side of the city of Lansing. The home was previously licensed as an adult foster care facility from January 30, 2008 to August 29, 2017.

The main floor of the home has a living room, kitchen, small dining area, one full bathroom, one half bathroom, four bedrooms, and two exits to the front and rear entrance. The structure has two ramps to accommodate wheelchair users and a finished basement. The home utilizes the public water supply and public sewage disposal system. The gas furnace and water heater are located in the basement of the home and floor separation is created with a 1 ¾ inch solid wood core door with an automatic self-closing device and positive latching hardware.

The facility is equipped with an interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician and is fully operational. Smoke detectors have been installed near sleeping areas, on each occupied floor of the home, in the basement, and near all flame or heat producing equipment.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	11'7" x 12'4"	142.86 square feet	2
2	12'5" x 9'9"	121.06 square feet	1
3	11' x 9'9"	107.25 square feet	1
4	10'3" x 13'3"	135.81 square feet	2
Living Room	14'2" x 13'8"	193.61 square feet	
Dining Room	13'3" x 11'8"	154.58 square feet	

The indoor living and dining areas measure a total of 348.19 square feet of living space. This meets/exceeds the minimum of 35 square feet per occupant requirement.

Bedroom #4 has a sliding glass door that leads to the backyard of the facility. Licensee Joy Mbelu will be mindful of the residents chosen to live in this room due to ease of access to the outdoors. Prior to having a resident move into this resident bedroom, Ms. Mbelu assess previous history of elopement or other risk behaviors that may pose additional safety risk to residents if placed in this resident room. Ms. Mbelu also understands that the sliding glass door cannot be used as a means of egress for other residents.

Based on the above information, this facility can accommodate six residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Ms. Mbelu intends to provide 24-hour supervision, protection and personal care to six male and/or female residents who are aged, physically handicapped, mentally ill, or developmentally disabled. The program will include social interaction, training to develop personal hygiene, personal adjustment, public safety and independent living skill, opportunity for involvement in educational or day programs, employment opportunities and transportation. The applicant intends to accept referrals from Ingham County Department of Health and Human Services, Community Mental Health Authority of Clinton, Eaton, and Ingham Counties, Veterans Administration or residents with private sources for payment.

If needed by residents, behavior interventions and specialized interventions will be identified in the assessment plans or behavior treatment plans. These interventions shall be implemented only by staff trained in the intervention techniques.

In addition to the above program elements, it is the intent of the applicant to utilize local community and recreational resources. These resources include shopping areas, restaurants, banks, a library, senior center, sports complex, and a variety of churches which are available to residents in the immediate vicinity of the facility. These resources provide an environment to enhance the quality of life and increase the independence of residents.

C. Applicant and Administrator Qualifications

The applicant is Victory AFC, L.L.C., a “Domestic Limited Liability Company”, established in Michigan on August 10, 2017. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The members of Victory AFC, L.L.C. have submitted documentation appointing Joy Mbelu as licensee and administrator of the facility.

Criminal history background check of the licensee designee/administrator were completed and Ms. Mbelu was determined to be of good moral character to provide licensed adult foster care. The applicant/administrator submitted statements from a physician documenting their good health and current negative tuberculosis test results.

Ms. Mbelu has provided documentation to satisfy the qualifications and training requirements identified in the group home administrative rules. Joy Mbelu currently operates three licensed adult foster care facilities that are in good standing.

The staffing pattern for the original license of this six bed facility is adequate and includes a minimum of one staff for six residents per shift. The applicant acknowledged that the staff to resident ratio may need to be decreased in order to provide the level of supervision or personal care required by the residents due to changes in their behavioral, physical, or medical needs. The applicant has indicated that direct care staff will not be awake during sleeping hours.

The applicant acknowledged an understanding of the qualifications, suitability, and training requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff to resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees. The applicant acknowledges the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing “direct access” to residents or resident information or both utilizing the Michigan

Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to demonstrate compliance.

The applicant acknowledged an understanding of the administrative rules regarding medication procedures and assured that only those direct care staff that have received medication training and have been determined competent by the licensee will administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The applicant acknowledged the responsibility to obtain all required good moral character, medical, and training documentation and signatures that are to be completed prior to each direct care staff or volunteer working directly with residents. In addition, the applicant acknowledged the responsibility to maintain all required documentation in each employee's record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

The applicant acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the adult foster care home.

The applicant acknowledge the responsibility to obtain the required written assessment plan, resident care agreement, and health care appraisal forms and signatures that are to be completed prior to, or at the time of, each resident's admission to the home as well as updating and completing those forms and obtaining new signatures for each resident on an annual basis.

The applicant acknowledged the responsibility to maintain a current resident record on file in the home for each resident and follow the retention schedule for all of the documents that are required to be maintained within each resident's file.

The applicant acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledged that a separate *Resident Funds Part II BCAL-2319* form will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the resident's personal money transactions that have been agreed to be managed by the applicant.

The applicant acknowledged an understanding of the administrative rules requiring that each resident be informed of their resident rights and provided with a copy of those rights. The applicant indicated the intent to respect and safeguard these resident rights.

The applicant acknowledged an understanding of the administrative rules regarding the requirements for written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause.

The applicant acknowledged the responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

The applicant acknowledged that residents with mobility impairments may only reside on the main floor of the facility.

D. Rule/Statutory Violations

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home with a capacity of six (6) residents.



02/20/2018

Derrick Britton
Licensing Consultant

Date

Approved By:



03/02/2018

Dawn N. Timm
Area Manager

Date