



STATE OF MICHIGAN

JENNIFER M. GRANHOLM
GOVERNOR

DEPARTMENT OF CONSUMER & INDUSTRY SERVICES
LANSING

DAVID C. HOLLISTER
DIRECTOR

November 7, 2003

David Ferry
Baseline Clinical Services, Inc.
38175 32nd St.
Paw Paw, MI 49079

RE: Application #: AS030258948
Baseline Creek AFC
43 30th St.
Allegan, MI 49010

Dear Mr. Ferry:

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 feel free to contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (616) 356-0100.

Sincerely,

Connie Yolles, Licensing Consultant
Bureau of Family Services
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 356-0118

enclosure

**MICHIGAN DEPT. OF CONSUMER & INDUSTRY SERVICES
BUREAU OF FAMILY SERVICES
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #: AS030258948

Applicant Name: Baseline Clinical Services, Inc.

Applicant Address: 38175 32nd St.
Paw Paw, MI 49079

Applicant Telephone #: (269) 657-8324

Administrator/Licensee Designee: David Ferry, Designee

Name of Facility: Baseline Creek AFC

Facility Address: 43 30th St.
Allegan, MI 49010

Facility Telephone #: 269-686-7731

Application Date: 07/23/2003

Capacity: 6

Program Type: MENTALLY ILL
DEVELOPMENTALLY DISABLED
AGED

II. METHODOLOGY

07/23/2003	Enrollment
08/06/2003	Contact - Telephone call made Message left for return call.
08/11/2003	Inspection Report Requested - Health
08/15/2003	Inspection Completed On-site Wanted a preliminary inspection to make a decision on whether to go forward with purchasing the home.
08/21/2003	Inspection Completed-Environmental Health: D New septic system needed.
08/27/2003	Contact - Document Sent Letter sent regarding the preliminary inspection prior to home purchase.
10/02/2003	Inspection Completed-Environmental. Health: A
10/21/2003	Inspection Completed-BFS Sub. Compliance Confirming letter sent. All home documents were reviewed including policies and procedures, staffing patterns, training plans, corporate documents including financial documents, competency requirements and medical information for the licensee/ administrator.
11/07/2003	Inspection Completed On-site
11/07/2003	Inspection Completed-BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The home is located in a rural area of Allegan County on a gravel road.

David and Jill Ferry own the facility and there is documentation in the file to verify the purchase and ownership.

The home is a one-story home with three bedrooms and two distinct living areas. There are two bathrooms in the home. One of the bathrooms is accessible through one of the bedrooms and the other is off a hallway. Each bedroom has two beds and ample storage areas for resident clothing. The kitchen is located in the center of the home and is equipped for food service. The home

and the rooms meet the rule requirements for available space in bedrooms and in living areas.

An environmental health inspection was originally completed on 8-21-2003 and the health department required the home to install a new sewage system. This was done and the Allegan County health department on 10-2-2003 gave a full approval.

At the final inspection this consultant found the home to be in full compliance with the fire safety rules for a small group home. The evacuation plan was reviewed and found to be in compliance with administrative rules.

B. Program Description

The licensee is Baseline Clinical Services, Inc., a Domestic Profit Corporation. The articles of incorporation and by-laws were filed with the State of MI on June 5, 2003 by David Ferry. The board of directors consists of David C. Ferry and Jill A. Ferry. This facility is the only adult foster care facility run by this corporation. Good Moral Character was verified by a criminal background check that was completed on the licensee designee for the corporation and the check was acceptable to the Bureau of Family Services. The corporation is a new corporation so an annual report was not available for review. A balance sheet, cash flow statement and budget were reviewed and the corporation appears to be financially stable.

The licensee designee/ administrator has met the competency requirements as required by the administrative rules. The licensee designee/ administrator has submitted a medical clearance record that indicates that he is in good health and has a current TB test.

The licensee designee has submitted admission and discharge policies that are in accordance with the rules. The program statement has also been reviewed and is in accordance with the administrative rules. These documents will be given to residents or their designees at admission.

The staffing ratio for the home will be one staff to four residents. When the resident population exceeds four individuals the staffing ratio will change from the formerly mentioned ratio to two staff to five or six residents from 9AM to 9PM and a one staff to six residents ratio from 9PM to 9AM.

Transportation will be provided in an eight-passenger van that is available for staff transport of residents . Transportation will be provided for all doctors' appointments and mental health appointments. Residents will also have access to the county transportation system that provides public transportation to the area.

The home will provide weekly outings for the residents. The home has a television, games, cards, and puzzles to provide at home activities. The home also intends to provide a program that will include the teaching of the skills necessary to move toward independent living.

The licensee was informed of the necessity to keep facility records on site for review. Staff records will be kept on all employees of the facility. The licensee designee has submitted training plans, job descriptions, and the personnel policy and employee records for review. The plan is in accordance with the administrative rules.

The licensee designee has been informed of the requirements for resident records. A statement of resident rights will be given to each resident at admission.

C. Rule/Statutory Violations

All rule requirements were met at the final inspection. The license is in full compliance.

IV. RECOMMENDATION

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

Connie Yolles
Licensing Consultant

Date

Approved By:

Yolanda Sims

Date

Area Manager