



JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF CONSUMER & INDUSTRY SERVICES
LANSING

DAVID C. HOLLISTER
DIRECTOR

December 2, 2003

Showanesh Mebratu
Helen AFC Home Inc
237 Charles Lane
Pontiac, MI 48341

RE: Application #: AS630259628
Helen AFC Home III
51 & 53 Oriley
Pontiac, MI 48342

Dear Ms. Mebratu:

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 (248) 975-5053.

Sincerely,

Ruth McMahon, Licensing Consultant
Bureau of Family Services
Suite 358
41000 Woodward
Bloomfield Hills, MI 48304
(248) 975-5084

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630259628
Applicant Name:	Helen AFC Home Inc
Applicant Address:	237 Charles Lane Pontiac, MI 48341
Applicant Telephone #:	(248) 332-8161
Administrator/Licensee Designee:	Showanesh Mebratu, Designee
Name of Facility:	Helen AFC Home III
Facility Address:	51 & 53 Oriley Pontiac, MI 48342
Facility Telephone #:	(248) 333-1697
Application Date:	06/19/2003
Capacity:	6
Program Type:	MENTALLY ILL DEVELOPMENTALLY DISABLED

II METHODOLOGY

06/19/2003	Enrollment
08/19/2003	Comment orig app pkt received from Lansing
10/17/2003	Inspection Completed On-site
11/06/2003	Inspection Completed-BFS Full Compliance final inspection

III DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

1) Environmental Conditions

The Helen AFC Home III is located at 51 & 53 O'Riley Pontiac Mi. located near downtown Pontiac. This facility is a two-story home, which once was two separate residences. The separate quarters have been renovated and joined to provide residence for six adult males There are two common areas, living room and family room. The living room will also serve as the office. The home has a fenced yard. There are five bedrooms, two bedrooms are on the first floor and three bedrooms are on the second floor. An enclosed porch is located at the front of the home. Laundry and storage are located in a storage are off the kitchen. The home has a full bath on each floor for residents use. The home was previously licensed under a different licensee. The owner of record is Showanesh Mebratu.

The home has a basement, which contains the furnace and hot water heater. The basement is not approved for regular resident use.

Resident bedrooms were measured at the time of final inspection and were found to be of the following dimensions and accommodation capability:

BEDROOM	SQ. FOOTAGE	OCCUPANCY
1 st Floor front.....	150 square feet .	2 residents.....
1 st floor rear	99.6 square feet	1 resident
2 nd floor		
Southeast ...	93.2 square feet	1 resident
Northeast	106 square feet. ...	1 resident.....
Southwest ..	83.7 square feet	1 resident

Please, note part of the upstairs bedrooms under the ceiling does not meet the criteria for usable floor space as required by rule 14409. (1) and were not counted in the square footage.

Based upon the above information, this facility has the square footage necessary to accommodate up to 6 adults, as requested in the application.

The living space for the home was measured and is listed below:

The home has a living room that measures 12'10 x 11'3", a dining area that measures 7'7" x 7'9" and a family room that measures 12'x8'3". The proposed capacity for the home is six. The home has a total of 302 sq. feet of living space. Based upon the above measurements, there will be more than the required 35 square feet per resident minimal living space available for the residents of the home.

The bedrooms were properly furnished, clean, and neat. Each bedroom has an easily operable window with screen, a mirror for grooming and a chair. The bedrooms all have adequate closet space for the storage of clothing and personal belongings. The bedrooms also have adequate lighting to provide for the needs of the staff and residents.

The bathroom areas are equipped with required non-skid surfacing and handrails, to assure resident safety in the maintenance of personal hygiene. The bathrooms were equipped with soap and paper towels for hand washing. I also observed that the facility was equipped with all required furnishings, linens, cooking and eating utensils.

Based on the above information and observations, I found the facility to be in substantial compliance with Bureau requirements regarding environmental conditions.

The Helen AFC Home III has public water and sewage services. As part of the licensing process, the licensing consultant conducted an environmental inspection and deems the facility to be in substantial compliance with applicable rules. The kitchen and bathroom areas were evaluated, and were found to be adequately equipped and in clean condition. Poisons and caustics will be stored in a secured area not used for food storage or preparation. The home has adequate food storage capacity. The refrigerator was equipped with thermometers to monitor the temperature of food storage. Water temperature was tested at the time of final inspection and found to be within the acceptable range as defined by rule R 40014401(2). The home also met the minimum requirements regarding food service (R 400.14402) and maintenance of premises (R 400.14403). Laundry facilities are located in a separate room right off the kitchen. The washer and dryer were properly installed and the dryer vent was made of acceptable non-combustible material.

2. Fire Safety

The building has a smoke detection system to meet the requirements of R 400.14505. The home also has fire extinguishers located on the first floor, second floor, and in the basement, which meet the requirements of R 400.14506. The home has two means of egress from the main floor and the exit doors all meet the requirements of rules R 400.14507 and R 400.14509. The bedrooms of the home also have the proper means of egress as required by R 400.14508. The interior of the home is of standard lathe and plaster finish or equivalent in all occupied areas. The home meets the environmental and interior finish requirements of rules R 400.14502, R 400.14503, and R400.14504.

The home has two separate and independent means of egress to the outside as required by R400.14507. The means of egress were measured at the time of final inspection and meet the 30-inch minimum width requirement of the rule. The required exit doors are equipped with positive latching non-locking against egress hardware. All the bedroom doors have conforming hardware and proper door width.

The furnace and the gas hot water heater are located in the basement. The Applicant is aware that water temperature should be monitored on a regular basis. I also found the electrical service to be adequate and in safe condition at the time of final inspection. The home was found to be in compliance with rules relating to interior finish, smoke detection equipment, fire extinguishers, means of egress, both generally and for bedrooms, heating equipment, flame producing equipment; enclosures, and electrical service.

I reviewed the facility's emergency procedures, which contain written instructions to be followed in case of fire, and medical emergency. Evacuation routes were also posted in the facility, with emergency telephone numbers posted in proximity to the telephone. The home had its emergency preparedness plans posted as required. The home has emergency medical services available through the city of Pontiac. The Applicant understands the Bureau requirements relating to the maintenance of fire drill records with the Applicant. The Applicant has indicated that it is the corporation's intent to conduct fire drills during the day, afternoon, and sleep hours on a quarterly basis, as well as to maintain a record of these fire drills, and resident performance during such drills.

Based upon the above observations and information, I found this facility to be in substantial compliance with administrative rules pertaining to emergency preparedness and fire safety.

B. Program Description

1) Program Statement

The Applicant submitted a copy of the program statement to the Bureau for review and inclusion in the licensing record. The document is acceptable as written. The facility will

offer a program for mentally ill male adults who are 25 years or older. The home is not equipped to serve people who require wheelchair use. According to the program statement, the program and support services provided to the residents of Helen AFC Home III will assist the residents to develop the skills and knowledge to possibly move to a lesser restrictive environment. Facility objectives are listed as:

- a) Establish and maintain a safe, humane living condition for all residents.
- b) Provide support and training services that encourage personal growth.
- c) Provide community exposure with the purpose of increasing personal mobility in the community.
- d) Provide recreational and social contacts that meet individual needs and foster growth.

While meeting those objectives the home will provide 24-hour room, board, supervision, personal care, protection, transportation, training, guidance, recreation, and social skill development.

2) Required Information

On 6-19-2003, the Bureau received a license application and application fee from Ms. Showanesh Mebratu, on behalf on the corporation to operate a small group AFC facility at the above referenced address in Pontiac, Michigan. The applicant corporation is a domestic non-profit corporation. The applicant corporation is seeking to operate a program for adult men who are mentally ill or developmentally disabled

As part of the application processes the applicant submitted admissions, discharge policies for the corporation. The documents are acceptable as written. A floor plan with room use and current financial documents were submitted. As part of the licensing process, the Applicant presented the corporate personnel policies, routine procedures, and job descriptions for review. The documents are kept in the home and are available for review.

A copy of the Board of Directors is on file with the department.

A Records Clearance Request has been processed for Ms. Showanesh Mebratu. Based upon her background, experience, and the Record Clearance Report, I find that she is of good moral character, sound judgment, and is suitable to provide care to dependent adults. A current Licensing Medical Clearance form for Ms. Showanesh Mebratu is contained in the record. The form indicates that she is in good physical and emotional health, and there is no reason why she should not be involved in the operation of this facility, and the provision of adult foster care. A current negative TB test is also on file with the Bureau.

As referenced above Ms. Showanesh Mebratu submitted, on behalf of Helen's AFC Home III financial information as part of the new application process. The applicant submitted a current budget for the home and a bank statement for the corporation. Based on the information presented, I have determined that the applicant corporation

has demonstrated a stable financial position and possesses the financial capability to operate an adult foster care facility at the above referenced location.

3) Qualifications and Competencies

The licensee designee, Ms. Showanesh Mebratu, has been involved in providing Adult Foster Care services for years. The corporation currently holds licenses for two Adult Foster Care facilities in Oakland County . Based on her previous experience, Ms Mebratu has demonstrated that she has the administrative and management expertise to run an Adult Foster Care facility. Based on personal contact and materials submitted I conclude that Ms. St. Louis has demonstrated her competency as required by the rule R 400.14201.

At the time of the final inspection, there were no changes to report in information previously submitted in this application for a license. The Applicant is aware of Bureau requirements relating to changes in information, as outlined under administrative rule R400.14103 (5), and has indicated that it is the intent of the corporation to assure continued compliance with this rule. The Applicant was also reminded of Bureau requirements pertaining to posting of the license as outlined under rule R400.14103 (4), and has indicated that it is the intent of the corporation to maintain compliance with this requirement.

Based on the above information, I have determined that Ms. Showanesh Mebratu is in substantial compliance with rule R400.14103 regarding required information and reporting changes, and rules R400.14201, R400.14202, and R400.14205 regarding qualifications and health of the Applicant

As required by the rule R400.14202,. Showanesh Mebratu will act as administrator for the home. Based on the information submitted, background, and experience, Ms Mebratu meets the requirements of the rule and is qualified to act as administrator for Helen 's AFC Inc.The Applicant understands that in accordance with rules R 400.14307, R 400.14308, and R 400.14309 regarding behavior intervention and crisis intervention, individual intervention programs will only be used at the least restrictive level necessary. Facility staff will not utilize time out or restraints. Documentation of the implementation of any behavior management program will be maintained in the facility and will be available at all times for Bureau review.

As mentioned above, the applicant submitted copies of the proposed admission and discharge policies to the Bureau for review, and inclusion in the licensing record. I have reviewed the documents and determine that they do not conflict in content or intent with current rules and are therefore acceptable as written.

Individuals, who are interested in placement into the Helen AFC Home III, should contact the licensee or Family Independence Agency. The Applicant also understands that the facility will conduct it's own evaluation and written assessment of any individual who is referred for placement. The purpose of this assessment is to judge whether the

individual fits the criteria established in the home's program statement and is compatible with the current residents. A resident care agreement and a current health appraisal are also required at the time of admission. Based upon the above information, the facility is found to be in substantial compliance with requirements of rule R400.14302 pertaining to admission and discharge.

4) Facility and Employee Records

I have reviewed the personnel policies contained in the administrative file at Helen AFC Home III. I have determined that they do not conflict with statutory or administrative rule requirements. The job descriptions for Helen AFC Home III were also reviewed as part of the licensing process. Current employee files were not reviewed at final inspection. The Licensee has ample previous experience in complying with administrative rules governing the hiring, training, and record keeping for employees.

a) Facility Records in General (Rule R400.14209)

The resident care agreement proposed for use in this facility is the current Bureau resident care agreement. The applicant understands Bureau requirements pertaining to maintaining a resident register, as required under rule R400.14210. The applicant understands the Bureau requirements for record keeping.

The Applicant understands the requirements set forth in rule R400.14313; and has indicated that the home will meet the requirement with respect to nutrition and menus as stated in the rule. The Applicant understands that all working menus are to be dated, prepared in advance, and that any changes or substitutions may be reflected on the working menus. Menu records are to be maintained in the facility for a period of one year. The Applicant also understands that a licensed physician must order any special diets implemented in the home,

b) Employee Records (rules R400.14204 and R400.14208)

The Applicant is well aware of the requirements for staff qualifications and training and intends to comply with the rules. The Applicant understands that all employees must submit to a pre-employment physical, which includes a TB tine test. The results of the test are obtained before employment begins. The corporation also verifies age and checks references before a person is offered employment. The Applicant provides an orientation and training of its own relating to reporting requirements, emergency procedures, prohibited practices, resident rights, and personal care, protection, and supervision required in adult foster care. Each employee must complete certified training in First Aid and CPR. Evidence of staff training will be maintained in the employee records for future Bureau review.

5) Resident Care, Services, and Records

The applicant understands Bureau requirements pertaining to resident records as specified in rule R400.14316. The applicant also understands Bureau requirements pertaining to resident rights and prohibited practices as outlined under rules R400.14304 and R400.14308.

The applicant also understands Bureau requirements pertaining to incident and accident reports, as outlined under rule R400.14311 and the requirements for safeguarding and distributing of prescription medication as outlined in rule R400.14312. I determined that the facility was in substantial compliance with Bureau requirements pertaining to investigating and reporting as stipulated in rule R400.14311, resident medication as stipulated in rule R400.14312, and resident rights as outlined in rule R400.14304.

The applicant also understands R400.14317 relating to resident recreation and intends to comply through an activity schedule for the home, which will expose the residents to a variety of community based recreation and leisure time activities.

The applicant is aware of the requirements of rules R400.14318 and R400.14319, regarding emergency and regular transportation.

In conclusion, the applicant and facility, by virtue of observation, interview, and review of program documentation, is found to be in substantial compliance with Bureau requirements relating to resident care, services, and records. A more complete evaluation of resident services will be made at the 90-day interval and again at the time of license renewal.

Based on the information presented above, I conclude that the Applicant, meets the minimum requirements of the pre-licensing administrative rules and statutory requirements for small group adult foster care facilities with an approved capacity of 1-12 residents, licensed or proposed to be licensed after 5/24/94

III. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-6).

Ruth McMahon
Licensing Consultant

Date

Approved By:

Barbara Smalley
Area Manager

Date