



JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
FAMILY INDEPENDENCE AGENCY
OFFICE OF CHILDREN AND ADULT LICENSING



MARIANNE UDOW
DIRECTOR

February 23, 2004

Angela Herman
629 Meachem Rd
Battle Creek, MI 49017

RE: Application #: AF130263873
Boschway AFC Home
629 Meachem Rd
Battle Creek, MI 49017

Dear Ms. Herman:

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 (269) 544-4445.

Sincerely,

Kenneth Tindall, Licensing Consultant
Office of Children and Adult Licensing
2nd Floor
890 North 10th Street
Kalamazoo, MI 49009
(269) 544-1275

enclosure

**MICHIGAN FAMILY INDEPENDENCE AGENCY
OFFICE OF CHILDREN AND ADULT LICENSING
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AF130263873
Applicant Name:	Angela Herman
Applicant Address:	629 Meachem Rd Battle Creek, MI 49017
Applicant Telephone #:	(269) 969-9708
Administrator/Licensee Designee:	N/A
Name of Facility:	Boschway AFC Home
Facility Address:	629 Meachem Rd Battle Creek, MI 49017
Facility Telephone #:	(269) 969-9708 01/14/2004
Application Date:	
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED AGED PHYSICALLY HANDICAPPED ALZHEIMERS

II. METHODOLOGY

01/14/2004	Enrollment
01/20/2004	Inspection Report Requested - Health
01/28/2004	Inspection Completed On-site
01/28/2004	Inspection Completed-BFS Sub. Compliance
01/28/2004	Inspection Completed-Env. Health : A
02/18/2004	Inspection Completed On-site
02/18/2004	Corrective Action Plan Approved
02/19/2004	Inspection Completed-BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This home was previously licensed as an Adult Foster Care (AFC) Family Home (license #AF130016267).

This is a one story wood frame house with a full walk out basement. The licensee and her fiancé occupy the basement. Residents occupy the 1st floor only. On the 1st floor there are 4 resident bedrooms, 2 full bathrooms, kitchen, living room, and dining room. This home is in compliance with space requirements for bedrooms and common area living space. The basement has a gas fired water heater and furnace.

This home has a private well and sewer system. On file is a report from the Calhoun County Health Department dated 1/28/2004 that indicates the home's private well and sewer is in compliance with applicable rules.

This home is in substantial compliance with those rules pertaining to Fire Safety.

On file is verification (mortgage statement) that the licensee's fiancé Raymond Mowinski owns this home. He has a mortgage with Countrywide, and on file is a written statement from him giving permission to use this facility as an Adult Foster Care Home. Also on file is a written agreement with the licensee and Mr. Mowinski stating that if the AFC business dissolves, the residents will be given a 30-day notice to relocate elsewhere.

B. Program Description

The licensee will provide care for aged, alzheimers, developmentally disabled, and physically handicapped adults. Women only will be accepted and residents must be at least 18 years old. Residents confined to wheelchairs can be accommodated. The licensee prefers private pay residents. Smokers will not be accepted. Short-term care may be available. Discharge criteria are consistent with AFC Family Home rules.

Transportation services will be specified in the resident care agreements. Emergency transportation is available by dialing 911. Programming will include television, arts and crafts, baking, and occasional community outings.

The licensee will be issuing and reviewing resident rights with each admission. The licensee was provided with all necessary Resident Record forms to permit rule compliance. The licensee was provided with an orientation of quality of care rule requirements for AFC Family Homes.

There will be at least one direct care staff on duty, 24 hours every day (unless there are no residents in the home). The licensee, her fiancée, and one other responsible person will provide resident care. A criminal background check for the licensee is on file and indicates rule compliance. Medical information on file for the licensee and responsible persons indicates rule compliance.

The licensee was informed of the requirement that she is responsible for assessing the suitability/moral character of any person who provides direct care to residents. Her method includes doing past employment and personal reference checks on responsible persons.

A review of the application indicates substantial compliance with the applicable rules regarding financial capability of the licensee.

C. Conclusion

This study is based upon Act No. 218 of the Public Acts of 1979, as amended, and the Administrative Rules governing the operation of AFC Family Homes. Included in the inspection was a review of policies and practices regarding residential care, resident programming, and administrative management as well as Fire and Environmental Safety. The findings indicate this home is in substantial compliance with Act No. 218 and the Administrative Rules for AFC Family Homes.

