



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

September 12, 2023

Ayodele Ayanwale
2231 Douglas Joel Drive
Flint, MI 48505

RE: Application #: AF250411113
Joyous Home AFC
2231 Douglas Joel Drive
Flint, MI 48505

Dear Ayodele Ayanwale:

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 3 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) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Christopher A. Holvey".

Christopher Holvey, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 899-5659

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF250411113
Applicant Name:	Ayodele Ayanwale
Applicant Address:	2231 Douglas Joel Drive Flint, MI 48505
Applicant Telephone #:	(810) 341-2050
Administrator/Licensee Designee:	N/A
Name of Facility:	Joyous Home AFC
Facility Address:	2231 Douglas Joel Drive Flint, MI 48505
Facility Telephone #:	(810) 341-2050
Application Date:	11/16/2021
Capacity:	3
Program Type:	AGED DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODOLOGY

11/16/2021	Enrollment
12/08/2021	Inspection Report Requested - Health 1032229
12/08/2021	Application Incomplete Letter Sent Add'l \$20, 1326/Fingerprint/RI030 for Licensee and AFC 100 for Responsible Person
12/28/2021	Contact - Document Received \$20 ck# 0023 & AFC 100.
01/12/2022	PSOR on Address Completed
01/24/2022	Contact - Document Received 1326/RI 030 for Ayodele Ayanwale
01/24/2022	File Transferred To Field Office Flint via SharePoint
02/09/2022	Application Incomplete Letter Sent
03/28/2023	Application Complete/On-site Needed
04/04/2023	Inspection Completed-BCAL Sub. Compliance
04/04/2023	Application Incomplete Letter Sent
08/23/2023	Inspection Completed- Env. Health: A
08/23/2023	Inspection Completed-BCAL Full Compliance
09/11/2023	Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Joyous Home AFC is located on Douglas Joel Dr. in Mt. Morris Township, MI. It is a single-story home that sits on a standard city lot. The home has a paved driveway with parking space for visitors. The home has a small cement porch attached to the front entrance/exit of the home. There is a 2-car detached garage located on the property. Licensee, Ayodele Ayanwale, is the property owner.

The main level of the home consists of a living room, dining area, kitchen, one full bathroom, two (2) resident bedrooms and one (1) bedroom for the applicant/licensee. There are two exit/entrances from the main level that lead directly to the outside.

The home's hot water heater and furnace are located in the basement level of the home. Floor separation from the residents is provided by a solid wood core fire door that is equipped with positive-latching hardware and an automatic self-closing device. The furnace was last inspected by a certified HVAC technician on 1/30/2023 and found in both good and safe operating order. Laundry services are also located in the basement level, as well as an ample storage area. The smoke detectors in the home are battery operated and are located in all sleeping areas, kitchen, and living areas.

The resident bedrooms and all living areas provide ample space for up to three (3) residents and measured as follows:

Living Room	180 square feet	
Dining area	99 square feet	
Bedroom # 1	85 square feet	1 resident
Bedroom # 2	134 square feet	2 residents
Bedroom # 3	102 square feet	Applicant/licensee

The facility has a public water supply and public sewage disposal system. On 8/23/2023, this facility was inspected for environmental safety, and it was determined to be in full compliance with all applicable licensing rules pertaining to environmental health.

B. Program Description

The facility will provide 24-hour supervision, protection, and personal care for up to three (3) male residents who are over the age of 18 and who may or may not be aged, developmentally disabled and/or mentally ill. The program will provide a comfortable home environment that promotes independence and socialization. Respect and compassion will be upheld for each individual resident, while continuing to provide assistance with activities of daily living. This home is not wheelchair accessible.

C. Applicant and Administrator Qualifications

Ayodele Ayanwale is the applicant/licensee of the home. A criminal history background check was completed for the applicant and their responsible person. They have been determined to be of good moral character. The applicant and responsible persons submitted statements from a physician documenting their good health and current TB-tine negative results.

The applicant has sufficient resources to provide for the adequate care of the residents as evidenced by projected income for AFC residents along with other financial resources.

The applicant acknowledges understanding the requirement for the licensee of an adult foster care family home to reside in the home to maintain this category type of adult foster care license.

The supervision of residents in this family home licensed for three (3) residents will be the responsibility of the family home applicant 24 hours a day / 7 days a week with the responsible persons on call to provide supervision in relief. The applicant has indicated that for the original license of this 3-bed family home, there is adequate supervision with 1 responsible person on-site for three (3) residents. The applicant acknowledges that the number of responsible persons on-site to resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents.

The applicant acknowledges an understanding of the training and qualification requirements for the responsible person or volunteers providing care to residents in the home.

The applicant acknowledges an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents, the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website ([www. Miltcpartnership.org](http://www.Miltcpartnership.org)), and the related documents required to be maintained in each employee's record to demonstrate compliance.

The applicant acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee can 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 acknowledges their responsibility to establish good moral character and suitability, obtain and maintain documentation of good physical and mental health status, maintain documentation of all required trainings, and obtain all required documentation and signatures that are to be completed prior to the responsible person and volunteers or staff working directly with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, responsible person, or volunteer or staff, and the retention schedule for all of the documents contained within each employee's file.

The applicant acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator

and direct care staff or volunteers and the retention schedule for all of the documents contained within the employee's file. The applicant acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

The applicant acknowledges their responsibility to obtain the required written assessment, 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 the required forms and signatures to be completed for each resident on an annual basis.

The applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

The applicant acknowledges an understanding of the administrative rules regarding the discharge criteria and procedural requirements for issuing a 30-day discharge written notice to a resident, as well as, when a resident can be discharged before the issuance of a 30-day discharge written notice.

The applicant acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. The applicant indicated that it is their intent to achieve and maintain compliance with these requirements.

The applicant acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident an accident involving resident, employee, and/or visitor.

The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledges 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.

Ayodele Ayanwale has sufficient experience which adequately satisfies the qualifications and training requirements identified in the administrative group home rules. Ayodele Ayanwale reports that all resident files will be kept on the facility grounds.

D. Rule/Statutory Violations

Compliance with the physical plant rules has been determined. Compliance with Quality-of-Care rules will be assessed during the period of temporary licensing via an on-site inspection.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult family home (capacity 1-3).

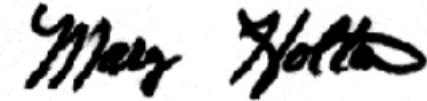


9/11/2023

Christopher Holvey
Licensing Consultant

Date

Approved By:



9/12/2023

Mary E. Holton
Area Manager

Date