



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

January 27, 2025

Shaniya Cason  
A Second Home AFC, LLC  
18051 Empire Ave  
Eastpointe, MI 48021

RE: Application #: AS500418767  
**A Second Home AFC**  
**18501 Empire Ave**  
**Eastpointe, MI 48021**

Dear Ms. Cason:

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 4 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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Kristine Cilluffo".

Kristine Cilluffo, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place  
3026 West Grand Blvd Ste 9-100  
Detroit, MI 48202  
(248) 285-1703

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS500418767
<b>Applicant Name:</b>	A Second Home AFC, LLC
<b>Applicant Address:</b>	18051 Empire Ave Eastpointe, MI 48021
<b>Applicant Telephone #:</b>	(313) 681-0776
<b>Administrator/Licensee Designee:</b>	Shaniya Cason
<b>Name of Facility:</b>	A Second Home AFC
<b>Facility Address:</b>	18501 Empire Ave Eastpointe, MI 48021
<b>Facility Telephone #:</b>	(313) 529-0016
<b>Application Date:</b>	08/23/2024
<b>Capacity:</b>	4
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODOLOGY

08/23/2024	Enrollment
08/23/2024	PSOR on Address Completed
08/23/2024	Application Incomplete Letter Sent 1326/RI-030 (Possibly updated application I did send an email to the licensee)
08/27/2024	Contact - Document Sent Application incomplete sent
09/10/2024	Contact - Document Received 1326/RI030
09/17/2024	Application Incomplete Letter Sent
09/17/2024	Contact - Document Received Email from Shaniya Cason
09/18/2024	Contact - Telephone call received Received text message from Shaniya Cason. Sent return message.
09/19/2024	Contact - Telephone call made Text message from Shaniya Cason re: training. Sent return text message.
09/20/2024	Contact - Telephone call received Received text messages from Ms. Cason. Sent return messages
09/24/2024	Contact - Document Received Received licensing documents by email from Shaniya Cason
09/25/2024	Contact - Document Sent Email to Shaniya Cason
11/15/2024	Contact - Telephone call received Text message from Ms. Cason. Returned message.
11/15/2024	Contact - Document Sent Email to Ms. Cason with possible inspection dates
12/02/2024	Contact - Document Received Received updated polices by email from Ms. Cason

12/03/2024	Inspection Completed On-site
12/05/2024	Contact - Document Received Received work history by email from Shaniya Cason
12/05/2024	Contact - Telephone call received Received text messages from Ms. Cason with home correction pictures
12/19/2024	Contact- Document Sent Email to Shaniya Cason
01/05/2025	Contact- Document Received Email from Shaniya Cason
01/09/2025	Contact- Document Sent Email to Shaniya Cason. Received return email
01/10/2025	Contact- Telephone call received TC from Shaniya Cason
01/10/2025	Contact- Document Sent Email to Shaniya Cason. Received return email

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The evaluation is based upon the requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules and Regulations applicable to the license of small group facilities (1-6), licensed or proposed to be licensed after 05/24/1924.

#### A. Physical Description of Facility

A Second Home AFC is a one-story small adult foster care home located in Eastpointe, MI. The licensee for the home is A Second Home AFC, LLC. Shaniya Cason will act as the licensee designee and administrator for the home. The home is owned by Shaniya Cason and a copy of the warranty deed was provided. The home has city water and sewer.

A Second Home AFC has a living room, kitchen and dining area, sunroom, three bedrooms, one resident bathroom and basement. The living room offers a total of 218 square feet which meets the required 35 square feet per person for four residents.

The three bedrooms in the facility are sized as follows:

<b>Bedroom #</b>	<b>Room Dimensions</b>	<b>Total Square Footage</b>	<b>Total Resident Beds</b>
1	9'6" x 12'2"	115	1
2	11'6" x 13'1"	150	2
3	11'2" x 9'0"	100	1

**Total capacity: 4**

All three bedrooms have adequate space, bedding and storage. All the bedrooms have a chair, mirror and window that opens. During the onsite inspection, I observed that the home was found to be in substantial compliance with rules pertaining to maintenance and sanitation.

The home has interconnected smoke detectors. The smoke detectors were inspected by Lamar Electric on 12/02/2024. There is a fire extinguisher on each floor of the home. The furnace is in the basement and there is a fire door located at top of stairs between kitchen and basement. A furnace and water heater inspection were completed by InsideOut Inspections Plus, LLC on 02/15/2024. The bathroom, bedroom and exit doors have non-locking against egress hardware. The water temperature was found to be between 105-120 degrees Fahrenheit. The home has a locked cabinet for medication to be stored.

## **B. Program Description**

A Second Home AFC will provide care to residents who are aged, have a mental illness, and/or Alzheimer's/Dementia. Residents must be fully ambulatory as the home does not have ramps and is not wheelchair accessible. The home will provide 24-hour care and supervision. Services available in the home include assistance with bathing, grooming and hygiene care, mobility and transfer assistance, housekeeping and laundry services, arranged transportation services, meals and snacks, medication administration, incontinence care and assistance with orientation and communication. Activities in the home will include music therapy, reminiscence activities, sensory engagement and physical exercises. The home will have door alarms to guarantee resident safety.

Shaniya Cason will act as the licensee designee and administrator for the home. Ms. Cason has been fingerprinted. She provided a medical statement dated 09/19/2024 which indicates that she has no physical/mental condition or health problems that would limit her ability to work with or around dependent adults. She had a negative TB test on 10/17/2023. Ms. Cason received her bachelor's degree from Michigan State University

in Supply Chain Management in May 2021. She was employed as a Direct Care Staff Member at Precious AFC Home from January 2015 to February 2016. She returned to employment at the Precious AFC Home in May 2024 and is currently employed at the home. Her responsibilities as a Direct Care Staff Member include assisting residents with activities of daily living such as bathing, grooming, dressing, and toileting, monitoring hygiene, administering and documenting prescribed medications and maintaining resident care records. Ms. Cason was also employed as an Implementation Manager for Cardinal Health from April 2023- May 2024.

Shaniya Cason 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.

Ms. Cason has acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, or direct access to residents or 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.

Ms. Cason acknowledged 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 designee can administer medication to residents. In addition, Ms. Cason acknowledged that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Ms. Cason acknowledged her responsibility to obtain all required 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, Ms. Cason acknowledged her responsibility to maintain all required documentation in each employee's record for each licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

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

Ms. Cason acknowledged her 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. Ms. Cason will update and complete those forms and obtain new signatures for each resident on an annual basis.

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

Ms. Cason acknowledged an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. 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 licensee designee.

Ms. Cason acknowledged an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights.

Ms. Cason acknowledged 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.

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

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

Ms. Cason acknowledged she has a copy of the licensing rules for adult foster care small group homes.

### **C. Rule/Statutory Violations**

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

**IV. RECOMMENDATION**

I recommend that the department issue a temporary license to this small group adult foster care home, A Second Home, with a capacity of four (4) residents.



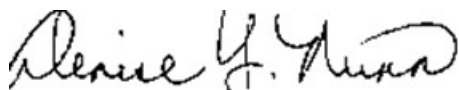
01/15/2025

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Kristine Cilluffo  
Licensing Consultant

Date

Approved By:



01/27/2025

Denise Y. Nunn  
Area Manager

Date