

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



April 7, 2004

Ms. Rochelle Molyneaux Resident Advancement Inc P.O. Box 555 Fenton, MI 48430

> RE: Application #: AS730263806 Riverfront Home 1070 Front Street Chesaning, MI 48616

Dear Ms. Molyneaux:

Attached is the Original Licensing Study Report for the above referenced facility. You have submitted an acceptable written corrective action plan covering the violations cited in the report. 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 (517) 241-2488.

Sincerely,

James Zalba, Licensing Consultant Office of Children and Adult Licensing (517) 373-8805 FAX: 517-335-6121

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS730263806
Applicant Name:	Resident Advancement Inc
Applicant Address:	411 S Leroy Fenton, MI 48430
Applicant Telephone #:	(810) 750-0382
Administrator/Licensee Designee:	Rochelle Molyneaux, Designee
Name of Facility:	Riverfront Home
Facility Address:	1070 Front Street Chesaning, MI 48616
Facility Telephone #:	(517) 845-4406
Application Date:	12/19/2003
Capacity:	6
Program Type:	OFFICIAL FORMER AIS/MR

II. METHODOLOGY

12/19/2003	Enrollment
01/12/2004	Comment Entire file given to J. Zalba.
01/30/2004	Inspection Completed On-site
01/30/2004	Inspection Completed-BFS Sub. Compliance
02/05/2004	Contact - Document Received BRS-1609 (App. for Cert.)
03/15/2004	Inspection Completed-Fire Safety : B OFS fire inspection completed 02/23/2004. Temporary until 03/30/2004. Battery operated smoke and/or heat detectors are not powered from the building electrical system, are not interconnected, and when activated, will not initiate an alarm that is audible in all habitable areas.
03/15/2004	Contact - Document Sent
03/30/2004	Inspection Completed On-site
03/30/2004	Inspection Completed-BFS Full Compliance
04/02/2004	Inspection Completed-Fire Safety : A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This facility is a single-story dwelling built on a cement slab and is located in a residential neighborhood in the city of Chesaning. It is a former AIS facility. The house consists of:

- 1. A combination family room and dining room (measuring 369 square feet),
- 2. A living room (measuring 227 square feet),
- 3. Three bedrooms:
 - a. Bedroom #1 measured 182 square feet (2 residents),
 - b. Bedroom #2 measured 192 square feet (2 residents),
 - c. Bedroom #3 measured 191 square feet (2 residents),
- 4. A kitchen,
- 5. A laundry room,

- 6. A small office,
- 7. Two full bathrooms, and
- 8. A 2-car garage with storage space.

The total living space measured 596 square feet, which is more than adequate for the six occupants of the facility. The furnace room is located in the back of the facility and contains both the heating plant and the hot water heater. This room is only accessible through an outside door.

This facility was inspected by this consultant on 1/30/2004 and 3/30/2004. The facility was found to be in compliance with a all applicable rules and regulations for health and fire safety under the Adult Foster Care Licensing Act.

The home is owned by Saginaw County Community Mental Health Authority in Saginaw, Michigan, which has a contract for services with Resident Advancement, Inc.

1. Administrative Structure

Resident Advancement, Inc. was incorporated on 8/21/1986 and has facilities In Genesee, Saginaw, Shiawassee, and Sanilac counties.

2. Qualifications and Competencies

The board of Resident Advancement, Inc. has designated Rochelle Molyneaux as the licensee designee. Ms. Moyneaux has extensive credentials in adult foster care and has received an acceptable licensing record clearance, medical certifications, and TB status report.

Gloria Stogsdill is the administrator for this facility. She meets the experience criteria to be an administrator and has an acceptable licensing record clearance, medical certification, and TB status report.

B. Program Description

The facility will provide foster care services to six (6) adults, both male and female, who are developmentally disabled and are medically fragile. There is a contract for support services (nurse, dietitian, physical therapist, psychologist, case manager, etc.) through Saginaw County Community Mental Health Agency. The facility staff will provide basic self-care and reinforcement training in dressing, grooming, eating, bathing, toileting, etc.

Transportation will be provided to all residents in the facility's own van. This includes transport to: medical clinics, hospitals, shopping trips, community outings, and other recreational/social activities.

The provider is well aware of all facility, resident, and employee record-keeping requirements.

C. Rule/Statutory Violations

As of 3/30/2004 this facility was in substantial compliance with all applicable rules and regulations for adult foster care small group homes (12 or less).

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home for a maximum of six (6) residents.

James Zalba Licensing Consultant Date

Approved By:

Kathleen S. Nixon Area Manager Date