

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



October 15, 2004

Jerry's Dreams 742 Worden S.E. Grand Rapids, MI 49507

RE: Application #: AS410269763

Jerry's Dream #2 1124 W. Leonard Ct. Walker, MI 49544

Dear Jerry's Dreams:

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 (616) 356-0100.

Sincerely,

Grant Sutton, Licensing Consultant
Office of Children and Adult Licensing
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 356-0117

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS410269763

Applicant Name: Jerry's Dreams

Applicant Address: 742 Worden S.E.

Grand Rapids, MI 49507

Applicant Telephone #: (616) 248-8847

Administrator/Licensee Designee: Vickie Runyon, Licensee Designee

Paris Manuel, Administrator

Name of Facility: Jerry's Dream #2

Facility Address: 1124 W. Leonard Ct.

Walker, MI 49544

Facility Telephone #: (616) 248-8847

Application Date: 09/07/2004

Capacity: 6

Program Type: MENTALLY ILL

DEVELOPMENTALLY DISABLED

AGED

II. METHODOLOGY

09/07/2004	Enrollment
10/11/2004	Inspection Completed On-site
10/11/2004	Inspection Completed-BFS Sub. Compliance
10/11/2004	Corrective Action Plan Received
10/11/2004	Corrective Action Plan Approved
10/15/2004	Inspection Completed On-site
10/15/2004	Inspection Completed-BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is located in suburban Walker, on a cul de sac of similarly constructed homes. The facility is one half of a raised ranch style duplex. The main floor consists of a living room, kitchen and dining area, two bedrooms, and a full bathroom. The lower, walk out level has a sitting area, one bedroom, a full bathroom, a furnace/hot water heater room, and a staff office.

B. Program Description

The licensees plan to work with women, ages 18 to older age. Populations identified are individuals with a mental illness and/or a developmental disability and the aged. The licensees have experience and applicable training for working with these populations. Admission and discharge criteria as well as a program statement outlining the program have been developed by the licensees. There are also house rules in place.

Transportation to and from appointments is not currently provided and the facility is more than half a mile from a city bus stop. Should it be available and the resident be eligible for Go!bus, the licensees will assist in scheduling this transportation.

C. Rule/Statutory Violations

The facility is in compliance with applicable rules and statutes for small adult foster care group home.

IV. RECOMMENDATION

I recommend issuance of a to (capacity 6).	emporary license to this AFC adult small group	home
Grant Sutton Licensing Consultant	Date	
Approved By:		
Yolanda Sims Area Manager	Date	