



JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF HUMAN SERVICES
OFFICE OF CHILDREN AND ADULT LICENSING

MARIANNE UDOW
DIRECTOR

August 29, 2005

Thomas and Audrey Youngblood
5152 Riverview Dr. N.
Parchment, MI 49004

RE: Application #: AF390273822
Homestead South
5152 Riverview Dr. N.
Parchment, MI 49004

Dear Mr. & Mrs. Youngblood:

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) 337-5066.

Sincerely,

Monte Bender, Licensing Consultant
Office of Children and Adult Licensing
322 E. Stockbridge Avenue
Kalamazoo, MI 49001
(269) 337-5285

Enclosure.

**MICHIGAN DEPARTMENT OF HUMAN SERVICES
OFFICE OF CHILDREN AND ADULT LICENSING
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #: AF390273822

Applicant Name: Audrey Youngblood & Thomas Youngblood

Applicant Address: 5152 Riverview Dr. N.
Parchment, MI 49004

Applicant Telephone #: (269) 344-5292

Administrator/Licensee Designee: N/A

Name of Facility: Homestead South

Facility Address: 5152 Riverview Dr. N.
Parchment, MI 49004

Facility Telephone #: (269) 344-5292

Application Date: 02/17/2005

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

Directions to the Home:

From the Stockbridge Avenue, travel north on Riverview Drive to Parchment;
Stay on Riverview Drive past G Avenue intersection on the north edge of
Parchment;
The facility is located on the right side a short distance north of G Avenue. Entrance
is on the dirt road to the right just before the facility.

II. METHODOLOGY

02/07/2005	Inspection Completed-Env. Health : A
02/17/2005	Enrollment
02/22/2005	Comment Septic inspection was already requested on 01/26/05 on this same enrolled facility under licensee Julie Kortz (AS390273290).
02/22/2005	File Transferred To Field Office Kalamazoo
03/18/2005	Inspection Completed On-site
03/18/2005	Contact - Face to Face Licensee Thomas Youngblood.
03/18/2005	Contact - Face to Face Licensee Audrey Youngblood.
03/21/2005	Inspection Report Requested - Health Septic System (private).
04/22/2005	Contact - Document Sent Ltr. re: basement door.
08/17/2005	Final Inspection. Medicals received and inspected fire door to basement.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

- Property Ownership – A document contained in the licensing record indicates that Thomas and Audrey Youngblood have purchased the home located at 5152 N. Riverview Drive in Kalamazoo.
- Description of the Structure – This is a two story brick home located on the north edge of Parchment. There are four resident bedrooms all located on the second story. Included on the second floor is a full bath to accommodate the residents. The main floor houses the licensee’s family. The main floor consists of three bedrooms, a full bath, kitchen, dining room large enough to accommodate all occupants of the facility, and a large living room, as well as the laundry room. The basement houses a recreational area, the natural gas fired boiler for a hot water heating system and a natural gas fired hot water heater. There is a 1 ¾ “

solid wood core door at the top of the basement stairs with a functional automatic closure.

- Square Footage of Bedrooms and Living Space –

Bedroom #1	(12' 06" x 09' 07")	=	119 sq. ft.
Bedroom #2	(13' 04" x 13' 05")	=	178 sq. ft.
Bedroom #3	(14' 08" x 11' 03")	=	164 sq. ft.
Bedroom #4	(10' 02" x 07' 05")	=	075 sq. ft.
Master Bedroom	(11' 03" x 11' 08")	=	131 sq. ft.
Family Bedroom (son)	(08' 10" x 07' 04")	=	064 sq. ft.
Family Bedroom (girls)	(10' 08" x 08' 08")	=	092 sq. ft.
Living Room	(13' 05" x 18' 06")	=	248 sq. ft.
Dining Room	(11' 11" x 08' 08")	=	103 sq. ft.

The total living space available (living room and dining room = 351 sq. ft.) exceeds the minimum requirements for a six-bed family home. There are four identified resident bedrooms, two of which exceed the minimum requirements for two beds in each.

- Sanitation – The facility is connected to the municipal water supply system. However, the sewage disposal system is a private septic system. Municipal sewage system is not available. The facility was inspected by the Kalamazoo County Environmental Health Office inspector and found to be in substantial compliance with applicable rules.
- Fire Safety – A fire safety inspection was conducted by this consultant on two different occasions. The facility is equipped with fire extinguishers on each floor, including the basement. An interconnected smoke alarm system is in place that is powered by the facility's electrical system with battery back-up. Emergency procedures including evacuation plans are in place on each floor. Emergency telephone numbers are available by the telephone. The facility was found to be in substantial compliance with applicable rules.

B. Program Description

Administrative Structure.

- Description of the Organizational Structure – Audrey Youngblood and Thomas Youngblood are the licensees. A responsible person has been identified to act as a responsible person when the Youngblood's are gone from the home.
- Good Moral Character – Licensing Record Clearance Request forms are contained in the licensing record indicating good moral character for both Mr. and Mrs. Youngblood. Substantial compliance is achieved.

- Financial Stability and Capability – A review of the application indicates compliance with applicable rules regarding financial capability of the licensee.
- Disclosure of Ownership Interest – Mr. and Mrs. Youngblood are the only persons with sole ownership in the business. The facility has been purchased by Thomas and Audrey Youngblood. The previous owner has provided acknowledgement for an adult foster care facility to be operated on the premises.

Qualifications and Competencies.

- Training – The licensees have had recent experience in providing care to residents while the facility was licensed to the previous owner. No training requirement exists for a family home.
- Health – The licensees have submitted recently completed medical evaluation and TB test results which indicate both are in good physical condition with no limitations.

Program Information.

- Admission/Discharge – No admission policy or discharge policy are required for a family home. The licensees have indicated their desire to care for female residents suffering from Developmental Disabilities. Smokers will not be accepted. Wheelchair bound residents cannot be accommodated. Private pay or public supported residents will be accepted.
- Transportation – The facility is able to provide transportation for residents to local appointments within the Kalamazoo area if relatives or responsible persons are unable to transport. County wide public transportation is also available to residents for a fee.
- Recreation – Residential social/recreational activities include television, radio, and stereo. Shopping is available in the local area as well as city parks for outdoor activities. Other recreational activities are frequently planned with other friends with similar likes and interests.

Facility and Employee Records.

- Facility Records – A review of the application, emergency procedures, fee policy and house rules/guidelines indicate substantial compliance with the applicable rules.

- Staff Records – There are no staff records at the time of licensure. The licensees have identified a responsible person and have developed a file containing the required documents. A file is required for each responsible person. Substantial compliance has been achieved.

C. Rule/Statutory Violations

None.

IV. RECOMMENDATION

I recommend a temporary license be issued with a capacity of 6 beds.

Monte Bender
Licensing Consultant

Date

Approved By:

Gregory V. Corrigan
Area Manager

Date