



JENNIFER M. GRANHOLM
GOVERNOR

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

MARIANNE UDOW
DIRECTOR

August 30, 2005

Josephine Akunne
Kamman Adult Foster Care Hm Inc
Ste 180
3820 Packard Road
Ann Arbor, MI 48185

RE: Application #: AS820277452
Mother Cabrini #4
7875 Pelham Rd.
Allen Park, MI 48101

Dear Ms. Akunne:

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 (734) 665-4740.

Sincerely,

A handwritten signature in blue ink that reads "Jeffrey J. Bozsik".

Jeff Bozsik, Licensing Consultant
Office of Children and Adult Licensing
2121 W. Stadium
Ann Arbor, MI 48103
(734) 665-4741

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

I. IDENTIFYING INFORMATION

License #: AS820277452

Applicant Name: Kamman Adult Foster Care Hm Inc

Applicant Address: Ste 180
3820 Packard Road
Ann Arbor, MI 48185

Applicant Telephone #: (734) 973-7764

Administrator/Licensee Designee: Josephine Akunne, Designee

Name of Facility: Mother Cabrini #4

Facility Address: 7875 Pelham Rd.
Allen Park, MI 48101

Facility Telephone #:

Application Date: 07/18/2005

Capacity: 6

Program Type: MENTALLY ILL
DEVELOPMENTALLY DISABLED
AGED
PHYSICALLY HANDICAPPED

II. METHODOLOGY

07/18/2005	Enrollment
07/22/2005	Application Incomplete Letter Sent
08/19/2005	Inspection Completed On-site
08/26/2005	Inspection Completed On-site
08/30/2005	Inspection Completed On-site
08/30/2005	Inspection Completed-BFS Sub. Compliance
08/30/2005	Corrective Action Plan Received
08/30/2005	Corrective Action Plan Approved

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is a ranch home with a full basement in a residential neighborhood. The facility has both public water and public sewer. The facility is not wheelchair accessible. The living room has 239 s.f. of living space. There are 4 bedrooms and their sizes are as follows: 1) E: 126 s.f.- 1 resident; 2) NE: 146 s.f.- 2 residents; 3) NW: 130 s.f.- 2 residents; and 4) W: 130 s.f.- 2 residents.

B. Program Description

The licensee will provide services to the following program types: MI, DD, Aged, and PH. See enclosed program statement for further details.

C. Rule/Statutory Violations

R 400.14403 Maintenance of premises.

(12) Sidewalks, fire escape routes, and entrances shall be kept reasonably free of hazards, such as ice, snow, and debris.

The cement front porch has cracked and is in the process of being replaced.

R 400.14407

Bathrooms.

(3) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

The master bathroom door has a pocket door which needs to be replaced with a 30 inch wide door with positive latching, non-locking against egress hardware.

IV. RECOMMENDATION

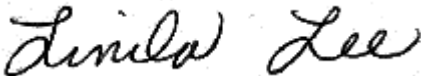
I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-6).



Jeff Bozsik
Licensing Consultant

August 29, 2005
Date

Approved By:



Linda Lee
Area Manager

August 30, 2005
Date