

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



April 11, 2006

Louis Hill Hill's Support Services, Inc. 16629 Jessica Ln. Romulus, MI 48174

RE: Application #: AS820281136

Kean Home 26645 Kean St. Inkster, MI 48141

Dear Mr. Hill:

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 (734) 665-4740.

Sincerely,

Jeff Bozsik, Licensing Consultant Office of Children and Adult Licensing

frey Jr. Bozaik

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 #**: AS820281136

**Applicant Name:** Hill's Support Services, Inc.

**Applicant Address:** 16629 Jessica Ln.

Romulus, MI 48174

**Applicant Telephone #:** 

Administrator/Licensee Designee: Louis Hill, Designee

Name of Facility: Kean Home

Facility Address: 26645 Kean St.

Inkster, MI 48141

**Facility Telephone #:** (313) 562-6361

12/13/2005

**Application Date:** 

Capacity: 6

Program Type: MENTALLY ILL

**DEVELOPMENTALLY DISABLED** 

#### II. METHODOLOGY

12/13/2005	Enrollment
12/14/2005	SC-Application Received - Original
12/15/2005	File Transferred To Field Office Ann Arbor
01/03/2006	Application Incomplete Letter Sent
03/31/2006	Inspection Completed On-site
04/10/2006	Inspection Completed On-site
04/11/2006	Inspection Completed-BFS Full Compliance
04/11/2006	SC-ORR Response Received-Approval
04/11/2006	SC-Recommend MI and DD
04/11/2006	SC-Certification issued MI and DD

#### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

The facility is a modular ranch home. It is wheelchair accessible and has both public water and public sewer. The bedroom sizes are as follows: 1) SE: 117 s.f.- 1 resident; 2) S: 143 s.f.- 2 residents; 3) SW: 119 s.f.- 1 resident; and 4) NW: 198 s.f.- 2 residents. The living room space measures 450 s.f.. The maximum capacity is 6 residents.

#### **B. Program Description**

The licensee provides residential services to MI, DD, and Physically Handicapped adult men and women. See enclosed program statement for further details.

#### C. Rule/Statutory Violations

There are no rule/statutory violations. The tree limbs near the property line will be removed within 1 week.

### IV. RECOMMENDATION

Area Manager

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

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Jeff Bozsik Licensing Consultant	Date: 4/11/06
Approved By:	
Linda Lee	April 13, 2006
Linda Lee	Date