



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



JENNIFER M. GRANHOLM
GOVERNOR

MARIANNE UDOW
DIRECTOR

July 17, 2006

Sherman Taylor
Taylor's Special Care Services, Inc.
23800 West Ten Mile Rd
Southfield, MI 48034

RE: Application #: AS630282991
Taylors AFC-Brandywynne
23345 Brandywynne
Southfield, MI 48034

Dear Mr. Taylor:

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 4 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 (248) 975-5051.

Sincerely,

Genevieve Lopez, Licensing Consultant
Office of Children and Adult Licensing
Suite 358
41000 Woodward
Bloomfield Hills, MI 48304
(248) 975-5069

enclosure

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

I. IDENTIFYING INFORMATION

License #: AS630282991

Applicant Name: Taylor's Special Care Services, Inc.

Applicant Address: 23800 West Ten Mile Rd
Southfield, MI 48034

Applicant Telephone #: (248) 350-0357

Administrator/Licensee Designee: Sherman Taylor, Designee

Name of Facility: Taylors AFC-Brandywynne

Facility Address: 23345 Brandywynne
Southfield, MI 48034

Facility Telephone #: (248) 350-0357
04/10/2006

Application Date:

Capacity: 4

Program Type: MENTALLY ILL
DEVELOPMENTALLY DISABLED

II. METHODOLOGY

03/23/2006	Inspection Completed On-site
03/30/2006	Application Complete/On-site Needed
04/01/2006	Contact - Document Received
04/10/2006	Enrollment
04/14/2006	Comment File rec'd via ID mail
04/16/2006	Comment Reviewed submitted documents, contacted licensee designee and confirmed discussion in writing
04/18/2006	Application Incomplete Letter Sent
04/24/2006	Contact - Document Received Submitted revised paperwork
05/15/2006	Comment Inspection of premises conducted on 3/30/06 under auspices of individual application Mr. Taylor had followed.
07/10/2006	Contact – Document Received Last of required documentation received

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The facility is located in a residential area of the City of Southfield that consists of similar single-family homes. It is a colonial style structure with an attached 2-car garage. The first floor consists of a living room/office, family room, half bath and family room. The lower level contains the heating plant, laundry area, and storage. It is not approved for resident use. The second floor contains the live in staff's bedroom, two double occupancy resident bedrooms and a full bathroom. Educational, medical and recreational needs can be met in the community or the surrounding communities of Birmingham and West Bloomfield.

The following are the living space measurements taken by a previous consultant:

<u>ROOM</u>	<u>DIMENSIONS</u>	<u>AREA/SQ. FT.</u>
Living room	11'5" x 24'3"	279.5

Family room	12'2" x 14'7"	<u>179.3</u> 458.8
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The facility must minimally afford 35 square feet of indoor living area per occupant. The proposed capacity is four with one live in staff. Therefore, the living area must measure at least 175 square feet. There is 91.8 square feet per occupant, which is more than adequate living area.

The resident bedrooms are located on the second floor and therefore, the home cannot accommodate nonambulatory residents. The following are the bedroom measurements obtained by the previous consultant:

<u>ROOM/LOCATION</u>	<u>DIMENSIONS</u>	<u>AREA/SQ.FT</u>	<u>CAPACITY</u>
B #1 (2 nd FI-SW)	11'9" x 14'1"	167.8	2
B #2 (2 nd FI-SE)	10'2" x 12'5"	136.4	2

CAPACITY=4

Although the facility has been a licensed adult foster care family home since 9/2/99, because of the special certification requirements, the home's alarm system is hard wired and was inspected on 3/25/06. It was found to be in working order. There are fire extinguishers mounted on each level. The floor separation between the basement and main level has been maintained with the installation of a 13/4-inch solid wood core door with a proper self-closing device. All locking devices were removed from the doors of egress. Evacuation routes and emergency procedures were posted.

The facility has a public water and sewage system. Housekeeping standards were adequate at the time of the licensing inspections.

B. Program Description

1. Population to be Served & Admission Criteria

The applicant submitted a program statement and admission policy that met licensing requirements. The admission criteria indicated that residents who were developmentally disabled or with a history of mental illness between the ages of 18 to 50 of either gender would be considered for placement. They must be verbal and able to ambulate. Prospective residents must have no serious medical or behavioral problems and be able to care for their own basic needs with verbal prompting if necessary. Residents with substance abuse problems will not be considered for placement.

The family home is converting to a small group home and the current residents will be remaining. There are two females and one male resident who were placed by three

different CMH contracted agencies, MORC Inc, Easter Seals and CNS (Community Network Services).

2. Applicant

The applicant is Taylors Special Care Services Inc (TSCS), a domestic profit corporation incorporated May 25, 2004. The organizational chart was submitted and reflects the flow of authority and responsibility beginning with the president, licensee designee and administrator, Sherman Taylor. At this time, the applicant is operating programs that are not licensed under the auspices of one of Oakland County Community Mental Health Authority's contracted agencies, Community Network Services. One of the programs has been deemed an unlicensed adult foster care facility and the applicant has a pending application for the licensure of the site as an adult foster care small group home.

The applicant submitted the required financial documents to demonstrate financial capability and stability.

3. Licensee Designee, Administrator-Qualifications, Experience, Competency, & Good Moral Character

The licensee designee and administrator is Sherman Taylor. He and his wife operated a licensed adult foster care family home since 1999. Mr. Taylor has been involved for the last three years in providing services to young adults who are transitioning from children's programs under the auspices of Community Network Services. In regards to training, Mr. Taylor obtained direct care worker training in 1999 followed by recent updated training through TTI (Training & Treatment Innovations Inc) in CPR, First Aid, Recipient Rights, medication administration and nutrition.

Medical and licensing record clearances were obtained. The information submitted during the licensing process demonstrated compliance with the licensing requirements related to Mr. Taylor's education, experience with the designated population, competencies and health.

4. Staffing Plan, Proposed Ratios, Staff Training & Competencies

The facility will be operated with a live in staff. Mr. Taylor is aware that any resident placed in this home must not need awake supervision during the night. The licensing requirements in regards to staff training and competencies were reviewed with Mr. Taylor.

The applicant was provided with technical assistance on the statutory requirements, Section 34 (a) and (b) of P.A. 218, as amended as it pertains to the hiring and/or contracting of persons who provide care to residents.

5. Records & Record Keeping

The applicant was provided technical assistance on the statutory requirements (Section 400.734b of PA 218) pertaining to the hiring or contracting of persons who provide direct services to residents.

Technical assistance was provided to the applicant on Act and administrative rule requirements related to home, resident and employee record keeping including the handling and accounting of resident funds.

The applicant is found to be in substantial compliance with the licensing act and applicable administrative rules.

IV. RECOMMENDATION

Based on the findings, it is recommended that a temporary license be issued. The terms of the license will enable the licensee to operate an Adult Foster Care small group home for 4 residents who are developmentally disabled or mentally ill. The term of the license will be for a six-month period effective 7/18/2006.



Genevieve Lopez
Licensing Consultant

Date: 7/17/06

Approved By:



Barbara Smalley
Area Manager

Date: 07/18/2006