



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



JENNIFER M. GRANHOLM
GOVERNOR

MARIANNE UDOW
DIRECTOR

September 18, 2006

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

RE: Application #: AS630282992
Somerset Home
29434 Somerset
Southfield, MI 48076

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 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 (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 #:	AS630282992
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:	Somerset Home
Facility Address:	29434 Somerset Southfield, MI 48076
Facility Telephone #:	(248) 350-0357 04/10/2006
Application Date:	
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODOLOGY

04/10/2006	Enrollment
04/14/2006	Comment File rec'd via ID mail
04/18/2006	Application Incomplete Letter Sent
08/08/2006	Inspection Completed On-site
08/30/2006	Inspection Completed-BFS Full Compliance
09/11/2006	SC- Application Received-Original

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The following findings are based upon P.A. 218 of the Michigan Public Acts of 1979, as amended, and the administrative rules governing operation of AFC small group homes.

A. Physical Description of Facility

The facility is a two-story structure located in the city of Southfield in an area of similar existing single-family dwellings. Recreational, medical and educational resources are available in the surrounding communities of Birmingham and West Bloomfield. The first floor contains a living room, family room, office area, kitchen/dining area, laundry room and half bath. The second floor contains four bathrooms and two full baths. There is a basement and an attached double car garage.

The basement is not approved for resident use and the home cannot accommodate wheelchairs.

The owner of the property is Kyle Ford.

The following are the living space measurements:

<u>ROOM/LOCATION</u>	<u>DIMENSIONS</u>	<u>AREA/SQ. FT.</u>
Living room	13'8" x 17'2"	227.5
Family room	12'5" x 12	<u>149</u> 376.5

An adult foster care family home must minimally afford 35 square feet of indoor living area per occupant. Living space must measure at least 210 square feet. Based on the above-referenced measurements, there is 62.8 square feet per resident, which is more than adequate living space.

The following are the proposed bedroom measurements:

<u>ROOM/LOC.</u>	<u>DIMENSIONS</u>	<u>AREA/SQ. FT.</u>	<u>CAPACITY</u>
B #1	14'7" x 13'6"	196.8	2
B #2	12'10" x 13'6" -2'7" x 5'8"	173.2 <u>14.6</u> 158.6	2
B #3	13'7" x 9	122.2	1
B #4	10'9" x 10'7"	113.7	<u>1</u> 6

NOT TO EXCEED: **6**

The facility has municipal water and sewage systems. The housekeeping standards were more than adequate on the day of the final inspection. The kitchen was properly equipped in terms of appliances, cookware and dishware.

A hard wired, interconnected, automatic alarm system has been installed, fire extinguishers mounted on each level and evacuation routes posted. A floor separation was created between the first floor and the basement by the installation of a 13/4 solid wood core door with an automatic, self-closing device.

B. Program Description

1. Population to be Served & Admission Criteria

The applicant submitted a detailed program statement and admission policy that met licensing requirements. The applicant has indicated that services will be provided to adults from 18-60 who may have a history of mental illness or be developmentally disabled.

The Somerset program statement reflects the applicant's goal to prepare residents to transition into independent living. Therefore, programmatic elements include development of skills needed for daily living in the personal, educational and occupational areas of each individual's life. There will be emphasis and assistance in budgeting and money management, job seeking and employment, housekeeping and appropriate social behavior.

The applicant has not identified the agency or agencies that will be placing in the home. Whatever agency or agencies will be one of Oakland Community Mental Health Authority's core providers.

2. Applicant

The applicant is Taylor's 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 Sherman Taylor, the president, licensee designee and administrator. The applicant oversees one adult foster care facility and several Supported Independent Programs (SIP) all contracted with OCCMH core provider agencies.

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

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

Sherman Taylor is the licensee designee and administrator. He and his wife operated an adult foster care family home from 1999 through August 2006. Mr. Taylor has been involved for the last three years providing services to young adults who are transitioning from children's programs. He has extensive experience with community residential care for the mentally ill and developmentally disabled.

In regards to training, Mr. Taylor obtained direct care worker training in 1999 followed by recent updated training through Training & Treatment Innovations Inc in CPR, First Aid, Recipient Rights, medication administration and nutrition.

Medical and licensing records 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 on a shift rotation basis with three shifts. The staffing ratio will be 2:6. Mr. Taylor was apprised that staffing ratios are dependent upon resident supervision needs.

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

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

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

IV. RECOMMENDATION

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



Genevieve Lopez
Licensing Consultant

Date: 9/18/2006

Approved By:



Barbara Smalley
Area Manager

09/19/2006
Date