



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



JENNIFER M. GRANHOLM  
GOVERNOR

MARIANNE UDOW  
DIRECTOR

September 10, 2007

Denise Foote  
Impact Inc  
1001 Military St  
Port Huron, MI 48060

RE: Application #: AS740289969  
Belle River Home  
2876 Belle River Rd.  
East China, MI 48054

Dear Ms. Foote:

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 and special certification for individuals with developmental disabilities 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) 975-5053.

Sincerely,

Michael Swajanen, Licensing Consultant  
Office of Children and Adult Licensing  
39531 Garfield  
Clinton Township, MI 48038  
(586) 228-3934

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS740289969
<b>Applicant Name:</b>	Impact Inc
<b>Applicant Address:</b>	1001 Military St Port Huron, MI 48060
<b>Applicant Telephone #:</b>	(810) 985-5437
<b>Administrator/Licensee Designee:</b>	Denise Foote, Designee
<b>Name of Facility:</b>	Belle River Home
<b>Facility Address:</b>	2876 Belle River Rd. East China, MI 48054
<b>Facility Telephone #:</b>	(810) 765-3562 04/27/2007
<b>Application Date:</b>	
<b>Capacity:</b>	6
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED

## II. METHODOLOGY

04/27/2007	Enrollment
05/01/2007	File Transferred To Field Office CT
05/03/2007	Contact - Document Received Licensing file received from Central Office on 5/3/2007.
05/14/2007	Inspection Report Requested - Health
05/22/2007	Application Incomplete Letter Sent Discussion of floor plan and required exits with administrator
08/09/2007	SC-Application Received - Original
08/09/2007	Inspection Completed-Env. Health: A
08/17/2007	Application Complete/On-site Needed Final scheduled for 8/23/07.
08/28/2007	Inspection Completed On-site
08/28/2007	Inspection Completed-BFS Full Compliance
08/29/2007	SC-Recommend DD

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

The Belle River Home is a replacement facility for the residents currently residing at the Meisner Road home, license # AS740072403.

The Belle River facility is a one-story home with basement and attached garage located in a rural area of East China Michigan. The first floor consists of an entry foyer, living room, dinette, kitchen, six resident bedrooms, two full bathrooms, and first floor laundry. The basement does not have the two required exits and is not approved for resident use and/or occupancy. An addition has been built and the applicant has provided the department with a certificate of occupancy dated July 30, 2007, from the Charter Township of East China. The facility will utilize a public water system and private sewage disposal system. Gary Brown, Sanitarian, St. Clair County Health Department conducted an environmental health inspection on the private sewage system on August 9, 2007. Mr. Brown granted full approval to this system. Bedroom #1 contains 158.34 square feet and will house one adult. Bedroom #2 contains 145.60 square feet and will house one adult. Bedroom #3 contains 133.12 square feet and will house one adult. Bedroom #4 contains 101.03 square feet and will house one adult. Bedroom #5

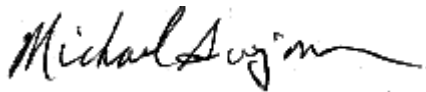
contains 116.21 square feet and will house one adult. Bedroom #6 contains 145.35 square feet and will house one adult. The living room and dinette contain 414.50 square feet. The facility will provide adult foster care services to six ambulatory adults requiring 210 square feet of indoor living space. Compliance to the requirements of rule 405.1 has been determined. At final inspection the facility was determined to be in full compliance with fire safety requirements. The living and bedroom furnishings will be moved from the Meisner Road facility when this license application is approved.

## **B. Program Description**

The applicant currently operates nine adult foster care facilities in St. Clair County. All of the facilities are currently operating under the terms of a regular license. The licensee designee and administrator have submitted licensing record clearance requests and their good moral character has been verified by the processing of these documents. In addition both individuals have been determined to be competent for the population identified in the facilities admission policy and program statement. They also have both submitted current medical release and request for information forms and negative tuberculin test results verifying they are in good physical and mental health and have no limitation for work with or around adult foster care residents. Competent staff will transfer to this home from the Meisner Road facility. In addition the licensee has submitted documentation verifying they will have the funding required to provide the program as stipulated. At final inspection the licensee was advised of administrative rule requirements relating to facility, resident, and employee files, and indicated they will comply with these requirements. As previously indicated the facility will only consider ambulatory adults for admission.

## **IV. RECOMMENDATION**

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



August 29, 2007

Michael Swajanen  
Licensing Consultant

Date

Approved By:



September 10, 2007

Barbara Smalley  
Area Manager

Date