



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



JENNIFER M. GRANHOLM
GOVERNOR

ISMAEL AHMED
DIRECTOR

September 18, 2007

Nenita Tio
175 Margaret St
Sandusky, MI 48471

RE: Application #: AF760291782
All Stars Home Care DM
175 Margaret St
Sandusky, MI 48471

Dear Mrs. Tio:

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 (586) 228-2093.

Sincerely,

Maureen J. Fisher, Licensing Consultant
Bureau of Children and Adult Licensing
39531 Garfield
Clinton Township, MI 48038
(586) 228-2368

enclosure

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

I. IDENTIFYING INFORMATION

License #: AF760291782

Applicant Name: Nenita Tio

Applicant Address: 175 Margaret St
Sandusky, MI 48471

Applicant Telephone #: (248) 539-4861

Administrator/Licensee Designee: N/A

Name of Facility: All Stars Home Care DM

Facility Address: 175 Margaret St
Sandusky, MI 48471

Facility Telephone #: (810) 648-0088
07/18/2007

Application Date:

Capacity: 6

Program Type: MENTALLY ILL
DEVELOPMENTALLY DISABLED
AGED
PHYSICALLY HANDICAPPED

II. METHODOLOGY

07/18/2007	Enrollment
07/19/2007	Application Incomplete Letter Sent
07/30/2007	Application Complete
07/30/2007	File Transferred To Field Office CT
08/02/2007	Contact - Document Received Licensing file received from Central Office on 8/2/2007.
08/03/2007	Application Incomplete Letter Sent
08/03/2007	Contact - Document Received Permission to inspect letter received from current owner. Onsite scheduled for preliminary inspection.
08/16/2007	Inspection Completed On-site Preliminary inspection. Present owner and applicant present for inspection.
09/18/2007	Contact - Telephone call made PC to applicant; has mailed final documentation. Licensee living in home pending approval of this application. Applicant in process of moving into facility.
09/18/2007	Contact - Document Received

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This application for licensure reflects a change in ownership of an existing facility; the facility has been licensed as R & C Adult Foster Home. The residents of the existing facility will be remaining in the facility.

All Stars Home Care DM is located within a two-story of frame construction with a basement that is finished with vinyl siding. A wheelchair ramp and deck are attached to the home on the north side of the structure; an additional deck is located at the rear of the home. Although the facility features an exterior wheelchair ramp, the interior of the home is not considered wheelchair accessible and the applicant has not requested that the home be licensed as wheelchair accessible. The front of the home features an enclosed, unheated front porch.

A 3 ½ car detached garage and storage sheds are situated on the unfenced 2 ½ acre lot along the home is a residential community within City of Sandusky, Michigan. The home is serviced by municipal water and sewage systems and is located in near proximity to community resources for medical care, social and recreational needs, and other community resources.

The home includes a living room, dining room, kitchen, four bedrooms on the first floor and three bedrooms on the second floor, and two full bathrooms as well as a first floor utility room that contains the furnace, water heater, and laundry equipment. All bedrooms located on the second floor of the home and one bedroom located on the first floor at the front of the home are reserved for use by the applicant and her husband; therefore, these rooms are not measured nor included in square footage requirements. The square footage of resident bedrooms and community space are as follow:

Living room	15' x 11'	165 square feet
Dining room	15' x 11'	165 square feet
Family room	23'6" x 13'	305.5 square feet

Total community space: 635.5 square feet, sufficient for the maximum of six residents and two family members permitted by Adult Foster Care Family Homes rule.

West bedroom	9' x 12'	108 square feet	Capacity: 1
Southwest bedroom	14'10" x 13'6"	200.2 square feet	Capacity: 3
Northwest bedroom	13'4" x 15'	200 square feet	Capacity: 3
Northeast bedroom	13'4" x 8'	106.6 square feet	Capacity: 1

The maximum occupancy of residents permitted by Adult Foster Care Family Homes is six. As detailed in the applicant's evacuation floor plan, a maximum of two residents will be located in the larger bedrooms.

The home features the required interconnected smoke detection system and does not have any interior finish materials prohibited by Rule 400.1435. The heat and electrical systems were inspected during the home sale process and found to have been installed in compliance with local codes and ordinances and to be in good operating condition. Required separations for heat producing equipment include standard floor separation and a solid wood door with self-closing device detailed in Rule 400.1440(6).

B. Program Description

Nenita Tio has applied for licensure to provide care for a maximum of six adults of either sex who are mentally ill, developmentally disabled, aged, or physically handicapped. An AFC Licensing Record Clearance Request has been completed as to Mrs. Tio and her husband. Mrs. Tio and her husband have submitted Medical Clearance Requests from their physician who has documented that neither has a physical or mental condition or health problem that would limit the ability to work with or around dependent

adults. Both were tested for communicable tuberculosis and the results were reported as negative.

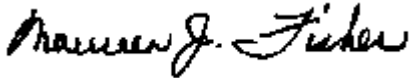
Technical assistance has been provided to Mrs. Tio to assist her in complying with statutory and rule requirements for the maintenance of the facility and resident records, including the handling and accounting of resident funds. Technical assistance as to compliance with statutory requirements (Section 400.734b of PA 218) pertaining to the hiring or contracting of persons who provide direct service to residents was also provided.

C. Rule/Statutory Violations

The applicant was 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 family home (capacity 6).



9/18/2007

Maureen J. Fisher
Licensing Consultant

Date

Approved By:



09/18/2007

Barbara Smalley
Area Manager

Date