

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



ISMAEL AHMED DIRECTOR

JENNIFER M. GRANHOLM GOVERNOR

November 28, 2007

Brenda White 21180 Gentner Warren, MI 48089

> RE: Application #: AF500286756 White-CTH 21180 Gentner Warren, MI 48089

Dear Ms. White:

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) 975-5053.

Sincerely,

Michael Sugim

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

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF500286756	
Applicant Name:	Brenda White	
Applicant Address:	21180 Gentner Warren, MI 48089	
Applicant Telephone #:	(810) 774-9559	
Administrator/Licensee Designee:	N/A	
Name of Facility:	White-CTH	
Facility Address:	21180 Gentner Warren, MI 48089	
Facility Telephone #:	(586) 774-9559 10/19/2006	
Application Date:	10/19/2008	
Capacity:	4	
Program Type:	DEVELOPMENTALLY DISABLED PHYSICALLY HANDICAPPED	

II. METHODOLOGY

10/19/2006	Enrollment
10/25/2006	Application Incomplete Letter Sent 1326 for Brenda
11/06/2006	Contact - Document Received 1326 for Brenda
11/09/2006	Application Complete/On-site Needed
11/29/2006	Inspection Completed On-site
11/29/2006	Inspection Completed-BFS Sub. Non-Compliance
11/29/2006	Application Incomplete Letter Sent Confirming preliminary inspection.
10/25/2007	Inspection Completed On-site
10/26/2007	Inspection Completed-BFS Sub. Compliance
11/28/2007	Inspection Completed On-site
11/28/2007	Inspection Completed-BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The White-CTH facility is a one-story ranch style home with basement and attached garage located in a residential area of Warren Michigan. The facility will utilize the City of Warren's public water and sewage systems. The first floor consists of two resident bedrooms, licensee's bedroom, living room, dinette, kitchen, and two bathrooms. Mrs. White has been advised in correspondence to her dated October 11, 2007, that it is permissible for the residents to occasionally utilize the basement area due to the presence of an emergency escape window. The applicant was also advised that due to the presence of an electric ramp on the basement area, it was the fire marshals request to include in the emergency evacuation procedures what steps will be taken by the applicant and employees, in case of a power failure, and the use of the ramp is not available to evacuate residents from this area.

The first floor Middle East Bedroom measures 12'10"" X 10'3" and contains 131.50 square feet and can house two ambulatory adults. The first floor North East bedroom measures 12'10" X 11' 7" and can house two ambulatory adults.

The first floor living room and dinette contain 404.22 square feet of indoor living space. The applicant will reside in the facility with a maximum of four residents requiring 140 square feet of indoor living space. Compliance to the requirements of Rule 27.1 has been determined. It is also noted all violations cited in correspondence to the applicant dated 11/29/06, and 10,26,07, were noted to be corrected at final inspections on 10/26/07 and 11/28/07.

B. Program Description

The White CTH facility was originally licensed as a licensed children's a home by the Macomb Oakland Regional Center on April 4, 1986, license number CF500214625. On October 20, 2006, Mrs. White filed an application for an adult foster care family home license. Licensing record clearance requests have been received and processed for Mrs. White verifying her good moral character. In addition a medical release and request for information form and negative tuberculin test results have been received and processed and processed verifying her physical and mental health.

At final inspection Mrs. White indicated it continues to be her intent to reside in the facility and be the primary caregiver and be responsible for the maintenance of all facility and resident files. This facility will provide adult foster care services to ambulatory adults only. The applicant has provided evidence that the two individuals residing in the facility are able to ambulate therefore wheelchair ramp construction is not currently required. This evidence was provided via a letter dated 10/16/07 from Robin Ceane, MORC Support Coordinator, and observations of the consultant at an onsite inspection on 10/25/07. Mrs. White has been advised if residents are admitted to the facility they must be ambulatory and if residents, in the future, regularly require a wheelchair or are non-ambulatory a ramp must be constructed to accommodate these residents. Mrs. White indicated she understood this.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult family home (capacity 1-4).

Michael Sugin

Michael Swajanen Licensing Consultant

November 28, 2007 Date

Approved By:

Barbara Smalley Area Manager

11/28/2007 Date