



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



JENNIFER M. GRANHOLM  
GOVERNOR

ISMAEL AHMED  
DIRECTOR

December 6, 2007

Ms. Fidelia Okwereogu  
4321 Aztec Way  
Okemos, MI 48864

RE: License #: AS330075971  
OCE II AFC Home  
3431 Radford Drive  
Lansing, MI 48911

Dear Ms. Okwereogu:

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility.

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 (517) 241-2585.

Sincerely,

James Zalba, Licensing Consultant  
Bureau of Children and Adult Licensing  
P.O. Box 30650  
Lansing, MI 48909  
(517) 373-8805

enclosure

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

**I. IDENTIFYING INFORMATION**

|                              |   |
|------------------------------|---|
| <b>License #:</b>            | AS330075971                             |
| <b>Licensee Name:</b>        | Fidelia Okwereogu                       |
| <b>Licensee Address:</b>     | 4321 Aztec Way<br>Okemos, MI 48864      |
| <b>Licensee Telephone #:</b> | (517) 333-3150                          |
| <b>Administrator:</b>        | Fidelia Okwereogu                       |
| <b>Name of Facility:</b>     | OCE II AFC Home                         |
| <b>Facility Address:</b>     | 3431 Radford Drive<br>Lansing, MI 48911 |
| <b>Facility Telephone #:</b> | (517) 393-5393                          |
| <b>Capacity:</b>             | 6                                       |
| <b>Program Type:</b>         | MENTALLY ILL<br>AGED                    |

## **II. Purpose of Addendum**

The purpose of this Addendum is to change the capacity of the facility from four to six residents.

## **III. Methodology**

This consultant has written several letters and made several on-site inspections of the facility and on 4/30/2007 measured the rooms.

## **IV. Description of Findings and Conclusions**

Ms. Okwereogu, the licensee, sent me a letter dated 1/16/2007, in which she requested the following:

- a) Change the exiting name of the facility.
- b) Change the interior to accommodate six clients.
- c) Change the caregiver.


After removing the then-present residents and the caregiver in January and February of 2007, Ms. Okwereogu hired someone to refurbish the bedroom area that was being used by the caregiver. By doing so, Ms. Okwereogu added another bedroom for two residents and increased the size of the dining room.

The measurements of the new bedroom totals 154 square feet, which is adequate for two residents. The dining room measured 84 square feet and the living room measured 178 square feet. The total area of living space is 262 square feet, which is adequate for the facility's seven occupants.

The name change has already been made from Fountace AFC Home to OCE II AFC Home.

## **V. Recommendation**

I recommend that the license be changed so that the maximum capacity of six residents.



December 6, 2007

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James Zalba  
Licensing Consultant

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Date