



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



JENNIFER M. GRANHOLM  
GOVERNOR

ISMAEL AHMED  
DIRECTOR

June 2, 2008

Willard Carter  
Carters Care Network  
7000 South Central Park  
Shelby Twp, MI 48317

RE: Application #: AS500290574  
The House of David  
24820 Roxana  
Eastpointe, MI 48021

Dear Mr. Carter:

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 5 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**

<b>License #:</b>	AS500290574
<b>Applicant Name:</b>	Carters Care Network
<b>Applicant Address:</b>	7000 South Central Park Shelby Twp, MI 48317
<b>Applicant Telephone #:</b>	(586) 739-4403
<b>Administrator/Licensee Designee:</b>	Willard Carter, Designee
<b>Name of Facility:</b>	The House of David
<b>Facility Address:</b>	24820 Roxana Eastpointe, MI 48021
<b>Facility Telephone #:</b>	(586) 739-4403
<b>Application Date:</b>	04/30/2007
<b>Capacity:</b>	5
<b>Program Type:</b>	MENTALLY ILL

## **II. METHODOLOGY**

04/30/2007	Enrollment
05/08/2007	Application Incomplete Letter Sent
06/08/2007	Application Complete/On-site Needed
06/08/2007	File Transferred To Field Office CT
06/12/2007	Contact - Document Received Licensing file received from Central Office on 6/12/2007.
06/13/2007	Application Incomplete Letter Sent
08/14/2007	Contact - Telephone call made
09/10/2007	Contact - Document Received Proof of ownership received; onsite scheduled for preliminary inspection.
09/20/2007	Inspection Completed On-site Preliminary inspection.
12/07/2007	Application Incomplete Letter Sent Submitted documents incomplete
03/10/2008	Contact - Document Received Partial set of requested documents received.
03/13/2008	Application Incomplete Letter Sent
03/31/2008	Application Incomplete Letter Sent
05/28/2008	Inspection Completed On-site Documents incomplete.
6/2/2008	Documentation complete. Full compliance.

## **III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

### **A. Physical Description of Facility**

The House of David facility is located within a residential home in the suburban city of Eastpointe, northeast of Detroit. The brick and aluminum-trimmed structure is a three-bedroom, single story home with a full basement. A detached two-car garage is located

in the fenced rear yard of the property. The interior of the home is not wheelchair accessible.

The home and surrounding community are serviced by public water and sewage systems. A gas, forced air heating system, heats the home; the applicant has submitted documentation indicating he has had the system evaluated by a qualified heating and cooling specialist and the system was found to be in good working order. The applicant has also submitted documentation indicating the home's electrical system has been inspected by a qualified electrical contractor and the system found to be safe and in good working order.

The home features an interconnected smoke detection system powered by the home's electrical system with an alarm audible throughout the home. Fire extinguishers have been installed per R 400.14506(1).

The community space within the home includes a living room (that includes a fireplace that is sealed), dining room, and a sitting room. The measurements of the community space are as follow:

Living room	12'10" x 17'6"	224.5 square feet
Dining room	11' x 7'10"	86.1 square feet
Sitting room	9'2" x 9'4"	85.6 square feet

The community space totaling 396.2 square feet is sufficient for the proposed capacity of the facility in accordance with R 400.14405(1).

Bedroom space and capacity are as follow:

Northwest bedroom	13'3" x 8'	106 square feet, capacity 1
Southwest bedroom	12' x 11'2"	134 square feet, capacity 2
East bedroom	12'1" x 12'2"	147 square feet, capacity 2

Bedroom space is sufficient for the proposed facility capacity of five residents per R 400.14409.

## **B. Program Description**

The House of David facility has been established to service male and female adult mentally handicapped individuals. The applicant has not submitted application for specialized certification at this time. The applicant, Carters Care Network, was established as a provider of adult foster care services, incorporated May 8, 2006. The licensee designee, Willard Carter, is also affiliated with Carters Care Network LLC and as licensee with his spouse, Alesia Carter who is named as administrator for this facility, as administrator for facilities currently and previously licensed in Wayne County. Willard and Alesia Carter have provided documentation verifying that they meet the educational and training requirements specified by rule. Licensing Clearance Requests and Medical

Clearance requests have been received and approved as to both individuals. The applicant has submitted financial documentation assuring the financial capability and stability of the applicant.

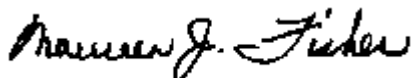
I have reviewed the personnel policies, job descriptions, staffing plan, and house rules submitted by the applicant and found that they meet all requirements. The applicant was provided technical assistance on the statutory requirements (Section 400.734b of PA 218) pertaining to the hiring or contracting of persons who provide direct service to residents. Technical assistance was provided to the applicant on Act and administrative rule requirements related to home, resident, and employee record keeping, including the handling and accounting of resident funds.

### **C. Rule/Statutory Violations**

The facility 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 small group home (capacity 5).

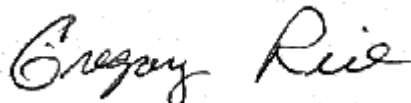


6/2/2008

Maureen J. Fisher  
Licensing Consultant

Date

Approved By:



6/2/2008

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Gregory Rice  
Area Manager

Date