

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



ISMAEL AHMED DIRECTOR

JENNIFER M. GRANHOLM GOVERNOR

August 5, 2008

Alfred Marshall 204 E. High St. Union City, MI 49094

> RE: Application #: AF130296208 Marshall's AFC 17526 P Drive South Tekonsha, MI 49092

Dear Mr. Marshall:

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 3 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 (269) 337-5066.

Sincerely,

Kennett Tindal

Kenneth Tindall, Licensing Consultant Bureau of Children and Adult Licensing 322 E. Stockbridge Ave Kalamazoo, MI 49001 (269) 337-5264

enclosure

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

# I. IDENTIFYING INFORMATION

License #:	AF130296208
Applicant Name:	Alfred Marshall
Applicant Address:	204 E. High St. Union City, MI 49094
Applicant Telephone #:	(517) 741-7569
Administrator/Licensee Designee:	N/A
Name of Facility:	Marshall's AFC
Facility Address:	17526 P Drive South Tekonsha, MI 49092
Facility Telephone #:	(517) 767-4749 05/20/2008
Application Date:	03/20/2000
Capacity:	3
Program Type:	MENTALLY ILL DEVELOPMENTALLY DISABLED AGED

# II. METHODOLOGY

05/20/2008	Enrollment
05/22/2008	Application Incomplete Letter Sent 1326 for Alfred & Barbara
05/22/2008	Inspection Report Requested - Health
05/22/2008	Application Incomplete Letter Sent waiting EHI
05/30/2008	Contact - Document Received 1326 for Alfred & Barbara
06/04/2008	Inspection Completed-Env. Health : A
06/30/2008	Inspection Completed On-site
06/30/2008	Inspection Completed-BFS Sub. Compliance
08/01/2008	Inspection Completed On-site
08/01/2008	Corrective Action Plan Approved

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

## A. Physical Description of Facility

This one-story wood frame house with walk-out basement and attached 3-car garage is located in a rural area north of Tekonsha, MI. The applicant and his wife will occupy the basement area and residents will occupy the 1<sup>st</sup> floor only. The 1<sup>st</sup> floor includes one full bathroom, 3 private resident bedrooms, living room, dining room, and kitchen. The basement has a gas-fired furnace and water heater, and clothes washer/dryer. The home is not wheelchair accessible. It is in compliance with space requirements.

The home has private water and sewer and on file is a recent report approving both from the Calhoun County Health Department. It is also in compliance with rules pertaining to environmental health and sanitation.

I conducted fire safety inspections and found the home to be in compliance with rules relating to fire safety. On file is documentation that the furnace and water heater were recently inspected by a qualified service and found to be in safe working order. There are battery operated smoke detectors in areas required by rule.

The applicant and his wife own the home. On file is proof of ownership and written permission from the wife for it to be used for adult foster care.

#### **B.** Program Description

On file are the applicant's and his wife's medical, TB, and criminal record clearances.

The applicant is approved to provide care for the aged, mentally ill, and developmentally disabled populations. Both genders are accepted. The applicant's admission and discharge procedures will be consistent with AFC Family Home rules. Transportation services will be specified in the resident care agreements. Emergency medical transportation is available by dialing 911.

The applicant will issue and review a copy of resident rights with each admission. The applicant was previously licensed to operate an AFC Family Home and is therefore familiar with rule requirements relating to home, resident care, and employee/resident record keeping, including the handling and accounting of resident funds and criminal background check requirements for employees (Act 29).

The applicant will have at least one direct care staff on duty, 24 hours/day while residents are in the home. A review of the application indicates substantial compliance with rules relating to financial capability of the applicant.

#### C. Conclusion

This study is based upon Act No. 218 of the Public Act of 1979, as amended, and the administrative rules governing the operation of AFC Family Homes. Included in the inspections were review of policies and practices regarding residential care, administrative management, as well as Fire Safety and Environmental Health and Sanitation. The findings indicate this applicant is in substantial compliance with Act No. 218 and the applicable rules.

#### IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult family home (capacity 3).

8.4.08

Kennett Tindal

Kenneth Tindall Licensing Consultant Date

Approved By: Gregory V. Corrigan

08/05/2008

Gregory V. Corrigan Area Manager Date