



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



JENNIFER M. GRANHOLM  
GOVERNOR

ISMAEL AHMED  
DIRECTOR

October 13, 2008

Lena Sutton  
W17629 S Curtis Rd  
Germfask, MI 49836

RE: Application #: AM490290970  
Lakeview AFC  
W17345 Main St  
Curtis, MI 49820

Dear Ms. Sutton:

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 10 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 Deborah L. Clark, Area Manager, at (906) 228-0780.

Sincerely,

Mark Muscoe, Licensing Consultant  
Bureau of Children and Adult Licensing  
234 W. Baraga Ave.  
Marquette, MI 49855  
(906) 228-0784

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM490290970
<b>Applicant Name:</b>	Lena Sutton
<b>Applicant Address:</b>	W17629 S Curtis Rd Germfask, MI 49836
<b>Applicant Telephone #:</b>	(906) 586-3016
<b>Administrator/Licensee Designee:</b>	N/A
<b>Name of Facility:</b>	Lakeview AFC
<b>Facility Address:</b>	W17345 Main St Curtis, MI 49820
<b>Facility Telephone #:</b>	(906) 586-6934 06/05/2007
<b>Application Date:</b>	
<b>Capacity:</b>	10
<b>Program Type:</b>	MENTALLY ILL DEVELOPMENTALLY DISABLED AGED

## II. METHODOLOGY

06/05/2007	Enrollment
06/18/2007	Application Incomplete Letter Sent / Licensing Unit.
07/02/2007	Contact - Document Received. DHS -1326.
07/26/2007	Contact – Document sent/ application to Consultant.
07/27/2007	Application Incomplete Letter Sent. Contact - Telephone call made/Lena Sutton. Contact - Telephone call made/Lena Sutton.
07/30/2007	Inspection Completed-Env. Health : A.
08/22/2007	Contact - Telephone call made/ Lena Sutton.
10/05/2007	Contact – Telephone call made/ Former licensee.
10/29/2007	Application Incomplete Letter Sent/ - Fire Safety Requirements/ Plan Review incomplete.
11/07/2007	Inspection Completed-BFS Sub. Compliance
11/26/2007	Comment/ written corrective action plan received and approved for 11-7-08 inspection.
11/29/2007	Contact – Ms Sutton. Re: Fire safety requirements.
12/11/2007	Contact - Telephone call received/ update.
01/09/2008	Contact - Document Received/ Letter –re: variance.
01/11/2008	Contact - Telephone call made/ Ms. Sutton.
01/22/2008	Contact - Document Received/ Ms. Sutton’s variance request.
03/06/2008	Contact - Telephone call received/ Ms. Sutton. Contact - Document Received/ Letter/ Ms. Sutton.
04/25/2008	Contact – Document sent / Variance request – Central Office.
06/23/2008	Contact – Telephone call received – Ms. Sutton.
06/24/2008	Contact – Document received/ Variance.
06/26/2008	Contact – Document sent/ Approval letter –revised.
07/02/2008	Contact – Telephone call made/ Ms. Sutton.
07/03/2008	Contact – Telephone call made/ Ms. Sutton. Contact – Document sent/ Recipient Rights Approval request.
08/12/2008	Inspection completed – On site.
10/13/2008	Contact – Document received/ variance approval letter.

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

**A. Physical Description of Facility** Lakeview AFC is a ten bed small group adult foster care facility. Ms. Lena Sutton is purchasing an existing facility on a land contract from the former licensee. Ms. Sutton will operate Lakeview AFC under a contractual agreement with Hiawatha Behavioral Health to provide specialized contract services to developmentally disabled and mentally ill adults.

The facility is located in Curtis, a small town on Manistique Lake in the Eastern Upper Peninsula. The facility is reasonably close to case management agencies, medical, dental, psychological and psychiatric services in Manistique, Newberry or Sault Ste. Marie.

The facility is frame construction, and it has been an adult foster care facility since approximately 1961. The front of the facility faces to Main Street in Curtis. There is a large commons and dining area on the main level of the facility.

The facility is clean and appropriately decorated. The facility has ample general use areas for resident use. The dining room on the main level measures 13' x 12' 2", or 158 sq. ft. The living room on the main level measures 22'2" x 14'3", or 316 sq. ft.

There are currently seven bedrooms in the facility. All bedrooms are on the second level of the facility:

Bedroom #1: (southwest corner-upstairs) 7'4"x 8'3", or 60 sq. ft., single occupancy (variance requested/ granted to allow current resident to use room).

Bedroom #2: (middle/ south side - upstairs) 14'4"x 8'9", or 125.38 sq. ft., double occupancy (variance requested/ granted).

Bedroom #3: (southeast corner-upstairs) 13'5" x 8'9", or 117 sq. ft., single occupancy.

Bedroom #4: (northeast corner - upstairs) 17'1" x 8'8", 148 sq. ft., approved double occupancy.

Bedroom #5 (adjoins Bedroom #4/northside - upstairs), 8'10"x 8'8", or 77 sq. ft., single occupancy (variance requested/ granted).

Bedroom #6 (adjoins Bedroom #5/ northside - upstairs) 8'2" x 8'8", 71 sq. ft., single occupancy (variance requested/ granted to allow current resident to use room).

Bedroom #7 (northwest corner - upstairs) 15'3" x 8'11", or 136 sq. ft., approved double occupancy.

The facility has a large bathroom near the bedrooms on the upper level. Additional bathing facilities are also available on the first level.

The facility is heated by a fuel oil forced air furnace that was installed by Colburn Plumbing and Heating, a licensed plumbing and heating firm, in 2006.

The Mackinac County Health Department inspected the septic system and the water supply of the home on 07-30-07. No rule violations were found with the septic system or the water supply.

Lon Kolage, a Mackinac Co. electrical inspector, inspected the electrical system of the home. Minor repairs to the electrical system were completed in March 2008. Full electrical approval was received by the Bureau of Fire Safety in June 2008. A full fire safety approval was received from the Bureau of Fire Safety on 06-26-2008.

**B. Program Description** As requested in her application, Ms. Sutton will provide personal care, supervision and protection to ten developmentally and/ or mentally ill individuals. The home is not barrier free, and all adult foster care residents must be ambulatory.

Staff trained by Ms. Sutton will provide direct care services. Hiawatha Behavioral Health will provide case management services. Lena Sutton will provide individualized programming through the person centered planning process to individuals receiving contract services.

Ms. Sutton has a well-defined process for determining good moral character. This responsibility has been discussed with her. Ms. Sutton, is aware of licensee responsibility to safeguard resident funds and valuables. Ms. Sutton is aware of R400.14315, and has agreed to comply with the administrative rules in this section of the licensing rules for Small Group Homes.

**C. Rule/Statutory Violations.** There were quality of care rule violations during an inspection of the facility that occurred on 11-07-08 relating to recordkeeping, but an acceptable corrective action plan was initiated by Ms. Sutton on 11-26-07. Further, an on-site inspection on 08-12-08 noted full compliance.

#### IV. RECOMMENDATION

Issuance of a temporary adult foster care license and certification, capacity ten (10) ambulatory adults, effective 10-13-08 .



10-13-08

---

Mark Muscoe/ Licensing Consultant                      Date

Approved By:



10/20/08

---

Deborah Clark/ Area Manager                              Date