



JOHN ENGLER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF CONSUMER & INDUSTRY SERVICES
LANSING

NOELLE A. CLARK
DIRECTOR

January 9, 2003

Lidra Walker
24200 Gardner
Oak Park, MI 48237

RE: Application #: AF630249565
Lidra Walker AFC
24200 Gardner
Oak Park, MI 48237

Dear Ms. Walker:

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, please feel free to contact Barbara Smalley, Area Manager, at (248) 975-5080.

Sincerely,

Ruth McMahon, Licensing Consultant
Bureau of Regulatory Services
41000 Woodward, Suite 358
Bloomfield Hills, MI 48304
(248) 975-5084

Enclosure

**MICHIGAN DEPT. OF CONSUMER & INDUSTRY SERVICES
BUREAU OF REGULATORY SERVICES
ADULT FOSTER CARE LICENSING DIVISION
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #: AF630249565

Applicant Name: Lidra Walker

Applicant Address: 24200 Gardner
Oak Park, MI 48237

Applicant Telephone #: (248) 543-0086

Administrator/Licensee Designee: Lidra Walker

Name of Facility: Lidra Walker AFC

Facility Address: 24200 Gardner
Oak Park, MI 48237

Facility Telephone #: (248) 543-0086

Application Date: 06/24/2002

Capacity: 5

Program Type: MENTALLY ILL

II. METHODOLOGY

06/24/2002	Enrollment
06/24/2002	Contact - Document Sent Record clearance request sent for applicant and responsible person.
06/24/2002	Contact - Document Sent Reference request forms sent out
07/13/2002	Inspection Completed On-site Initial inspection

08/02/2002	Contact - Document Sent Initial inspection findings letter
09/10/2002	Final inspection by Tom Bauer
12/19/2002	Case assigned to Ruth McMahon
12/30/2002	Second Final Inspection
01/06/2003	Corrective Action Plan received and approved.
01/06/2003	Full Compliance
01/06/2003	Recommend Temporary License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

1. Environmental

The Lidra Walker AFC is a two bedroom ranch home located in Oak Park, Michigan. The home is located in a well-established neighborhood approximately a half-mile east of Greenfield and two blocks south of 10-mile road. The exterior of the home is brick with wood trim. The home is situated on a corner lot across the street from a city park. The home has a paved parking area for several cars on side as well as the front of the yard. The home has a public water and sewer system. The home has a fenced backyard area with a deck.

The interior of the home consists of the following:

The front entrance of the home leads into a small entrance foyer. The living room/ dining area is located across the front of the house to the right of the front door. There is a small hallway area on the north side of the house outside the bedroom area. The two bedrooms and the bathroom are located off the hallway area. The kitchen and dining nook are located in the rear of the house and can be accessed from the living room as well as from the hallway area off the bedrooms. The rear exit is accessed from the dining nook area and goes out the south side of the home. The home has a full basement, which is not approved for regular resident use. The furnace and the hot water heater are located in the basement as well as the laundry facilities. As part of the licensing process, Ms. Walker submitted a floor plan for inclusion in the home file.

Rule R400.1427, regarding living space, requires that each occupant shall not have less than 35 square feet of living space. At the preliminary inspection, indoor living areas were measured, and found to be of the following dimensions:

ROOM/LOCATION	DIMENSIONS	AREA/SQ. FT.
Living Room/Dining	24' X 11'4"	272
Breakfast nook	9' X 9'	81
		====
	Total:	353

Based upon the above information, and the proposed accommodation of 6 occupants, the home would afford 58.8 square feet of indoor living area per occupant. The home is in compliance with the requirements of Rule 400.1427(1)

At the initial inspection of 7/31/2002, the bedroom areas were measured, and were found to provide the following dimensions:

ROOM/LOC.	DIMENSIONS	AREA/SQ. FT.	CAPACITY
Southwest Bedroom	20'8"X 13'8"	282.2	4
Southeast Bedroom	9'6" X 10'8"	101.2	1
			==
		Total:	5

Based upon the above information, I conclude that this facility has the square footage necessary to accommodate five (5) residents, as requested by the applicant. At final inspection, the resident bedrooms were equipped with the required furnishings and linens. I also observed at the time of final inspection that all the bedrooms and bathrooms were equipped with the proper type of hardware as required by rules R400.1430 and R400.1431.

At the final inspection, as mentioned above, the house was fully equipped with all required furnishings, linens, cooking, and eating utensils, in accordance with Rules R400.1425, R400.1433, and R400.1434. At the time of final inspection, I also judged the home to be in compliance with Rule R400.1426 regarding the maintenance of the premises.

2. Sanitation

The Lidra Walker home has public water and sewer services through the city of Oak Park. At the time of final inspection, kitchen and bathroom areas were noted to be clean and well maintained. The bathrooms were also noted to be equipped with non-skid surfacing and handrails, in the tub and shower areas. Poisonous and caustic materials were not stored in areas used by the resident, or used for food preparation or storage.

Ms. Walker understands that all garbage and rubbish will be kept in leak-proof, nonabsorbent containers, and will be removed from the facility at least weekly, and more often if necessary. Ms. Walker has also indicated that there are presently no problems with the home's plumbing system. I inspected the refrigerator and found it to be working properly and there was a temperature gauge in the refrigerator that indicated that the food storage area maintained a temperature in the safe food storage range.

At the time of final inspection, the facility was determined to be in compliance with departmental requirements relating to environmental health, except for Rule 400.1426(9) The front porch did not have handrails on the open sides and handrails on the steps.

On January 6, 2003 a fax was received stating the handrails were now in place.

3. Fire Safety

At the time of the preliminary inspection on 7/31/2002, I conducted a fire safety inspection in accordance with Part II of the family home administrative rules, which are the fire safety regulations for family homes licensed or proposed to be licensed after March 27, 1980. I conducted a final fire safety inspection on 9/10/2002.

Rules R400.1435 & R400.1436 Concerning interior finish:

At the time of my initial inspection, I observed that the Southeast bedroom did not conform to the interior finish requirements because the room had non-conforming paneling and corkboard. At the time of the final inspection, the non-conforming paneling and corkboard had been removed. At the time of the final inspection, all the living areas of the house conformed to the requirements of rules R400.1435 and rule R400.1436 relating to interior finish.

Rule R400.1437 Smoke detection equipment

At the initial inspection, I also observed that smoke detectors were not installed in all the required areas. I discussed the requirement of the rule and indicated to the applicant where additional smoke detectors needed to be installed. At the final inspection, I observed that the smoke detectors had been installed to conform to the requirements of the rule. Although not required, the applicant has installed fire extinguishers in the kitchen and basement. The home was in compliance with Rule R400.1437 at the time of the final inspection.

Rule R400.1438 Emergency preparedness

At the time of final inspection, I observed that an evacuation plan and written procedures to be followed in case of fire, medical, and severe weather emergency were posted as required. Ms. Walker indicated it is her intent to conduct a minimum of four fire drills per year, with two of the required drills being conducted during sleeping hours. A

record of fire drills conducted will be kept in the home. At the time of final inspection, I found the licensee to be in compliance with Rule R400.1438.

Rule R400.1440 Heat producing equipment

As noted above a gas forced air furnace, located in the basement of the house, heats the home. The licensee provided the department with a copy of a recent furnace inspection as part of the licensing process. The licensee was advised to have the furnace cleaned and inspected on a yearly basis. Laundry facilities are also located in the basement. At the time of initial inspection, I observed that the dryer had a non-conforming exhaust vent. At the time of final inspection a conforming exhaust vent was replaced with a conforming vent. The licensee is in compliance with rule R400.1440.

Rule R400.1441 Electrical service

At the time of my preliminary inspection, I observed the electrical panel, which is located in the basement. I observed that the home's electrical system did not appear to need any additional inspection. I find that the home is in compliance with rule R400.1446 regarding electrical service.

Based upon the above findings, the home was found to be in compliance with all Department fire safety requirements.

B: Program Description

1. Quality of Care:

On 5/21/2002, the Department received a license application from Ms. Walker, to operate an Adult Foster Care Family Home at the above referenced address in Oak Park, Michigan. The applicant is seeking to operate a program for five (5) ambulatory mentally ill adults. The applicant has indicated that she intends to provide a safe, loving, homelike environment for her residents. The applicant understands her responsibility to provide personal care, supervision, and protection as defined by Public Act 218 of the Public Acts of 1979, as amended. She also intends to engage her residents in community activities as tolerated.

A review of adult foster care licensing records indicates that Ms. Walker does not presently operate an adult foster care program nor has she operated a program in the past. Ms. Walker currently holds a land contract for the property, and has provided the department with a copy of the land contract.

2. Family Home Structure, Applicant's Capability, and Qualifications:

At the time of final inspection, Ms. Walker indicated that it is her intent to reside in the facility, as the live-in licensee, as required by department rules. Ms. Walker indicated that it is her intent to assume primary responsibility for the provision of adult foster care and the maintenance of all facility records. In her application letter, Ms. Walker asserts that she has over 12 years experience working with the mentally ill.

References are contained in the licensing file for Ms. Walker. All reference sources indicate she possesses the moral character, maturity, judgment, and capability to provide adult foster care. Also, all references indicate that they do not know of any reason why Ms. Walker should not be approved to provide adult foster care. The good moral character of Ms. Walker has also been verified by the processing of BRS 1326, Records Clearance Request form, which does not indicate a problem with regard to suitability or good moral character.

In accordance with Rule 4 (8), Ms. Walker has submitted the name of Barbara Clark as her responsible person. The licensing file contains current Medical Clearance for Ms. Clark, which indicate that she is in good mental and physical health, free from communicable disease, and does not have any limitations for work around dependent adults. A Record Clearance Request is also contained in the file for Ms. Clark. The record clearances showed no lien activity. Based upon this information, the department is satisfied that both individuals meet the good moral character requirements of the law and rules.

3. Program - Information:

Ms. Walker has submitted a completed Medical Records Clearance, certifying her to be in good physical and mental health, and having no limitations for work with or around adult foster care residents. Negative tuberculin test results have also been submitted for the applicant. At the time of the final inspection, Rule 5 was discussed with the licensee who understands that it is the responsibility of the licensee to assure that all responsible members of the household, employees, and volunteers are free from communicable disease and that documentation of current test results shall be provided to the department every three years. Ms. Walker does not currently have any employees, but she understands the requirements of the rules for employees should she decide to hire some additional help in the future.

At the time of final inspection, the facility was determined to be in compliance with departmental requirements relating to the health of the licensee, responsible person, and members of the household as well as the ratio of responsible persons to residents as stated in Rule 6.

In accordance with Rule 400.1404(4), Ms. Walker has completed item #46 on the BRS-569 form, The Adult foster Care Individual Application. By completing item #46, Ms.

Walker attests to the fact that she has sufficient resources available to meet the requirements of Rule 400.1404(4).

4. Facility Records:

As part of the licensing process, department requirements for record keeping were discussed with the applicant. Ms. Walker indicated that she understands the department requirements for record keeping and assures the department that she will maintain records in accordance with administrative rules. Supplies of the required forms were dropped off at the house at the time of initial inspection and were reviewed at the time of final inspection. Additional copies of required forms were sent to Ms. Walker following the final inspection.

Ms. Walker does not employ any individuals to assist her at this time. Ms. Walker was advised that if he were to employ any staff to assist in the operation of the home, she must assure the following before employment: That the individual is 1) certified to be free from communicable disease, 2) certified by a physician to be emotionally and physically capable of working around dependent adults, and 3) has successfully been trained by the licensee regarding personal care, protection, supervision, medication administration, mandatory reporting, record keeping, recipient rights, and handling of emergency situations.

5. Resident care, services, admission and discharge, assessment plan, resident care agreement, fee schedule, physicians instructions, and health care appraisal and records

The facility will provide adult foster care services to five (5) ambulatory male and/or female individuals. The fee for services rendered will be determined by the licensee in accordance with the fee policy, which will be covered through the use of the department's Resident Care Agreement as part of the admission process. As indicated above, at the time of initial inspection, I delivered copies of the required forms to Ms. Walker. The purpose and use of the various forms was discussed and reviewed with Ms. Walker at the time of final inspection. Ms. Walker is aware that a resident care agreement must be completed for each resident in the home and reviewed annually. Ms. Walker is aware that the Resident Care agreement comprises the homes admission and discharge policy in accordance with Rule 7. In addition Ms. Walker understands the use of the assessment form, health care appraisal are also essential parts on the admission process as well as ongoing record keeping for each resident. Ms. Walker also understands that the establishment of house guidelines is optional, but that any house guidelines that may be established must be posted, a copy provided to each resident and guardian, if applicable, and must not conflict with any administrative rule. Persons interested in exploring services at the Lidra Walker AFC should contact Ms. Walker directly at the Lidra Walker AFC.

Ms. Walker, throughout the licensing process has demonstrated knowledge of the requirements of the rules regarding resident care, licensee responsibilities, resident rights, protection, behavior management and prohibitions, and health care. Ms. Walker also showed me her locked medicine cabinet along with her proposed method of supervising resident medications.

Based upon discussion at the final inspection and throughout the licensing process, the licensee demonstrated her understanding of her responsibilities as well as her intention to comply with department rules for resident care, resident rights and protection, behavior management, health care, medications, nutrition, hygiene, resident records, and the handling of resident funds and valuables.

The home was determined to be in compliance with departmental requirements relating to Rules 8 through 23. On December 30, 2002 technical assistance was provided to Ms. Walker in completing the required licensing forms. A more complete evaluation of these rules will take place at the time of the 90-day inspection and at the renewal inspection prior to the expiration of the temporary license. Ms. Walker also understands that technical assistance and/or consultation will be available throughout the term of the temporary license

IV. RECOMMENDATION

I recommend the issuance of a temporary license.

Ruth McMahon
Licensing Consultant

Date

Approved By:

Barbara Smalley
Area Manager

Date