



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

September 16, 2021

Jennifer Letcher  
Parkview AFC Home Nonprofit Corp  
Board Agent  
214 E Central Avenue  
Zeeland, MI 49464

RE: License #:	AM700009416 Parkview AFC Home 214 E Central Avenue Zeeland, MI 49464
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Dear Mrs. Letcher:

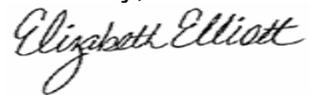
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific dates for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

Please contact me with any questions. If I am not available and you need to speak to someone immediately, you may contact the local office at (616) 356-0100.

Sincerely,

A handwritten signature in cursive script that reads "Elizabeth Elliott".

Elizabeth Elliott, Licensing Consultant  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503  
(616) 901-0585

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM700009416
<b>Licensee Name:</b>	Parkview AFC Home Nonprofit Corp
<b>Licensee Address:</b>	Board Agent 214 E Central Avenue Zeeland, MI 49464
<b>Licensee Telephone #:</b>	(616) 490-0884
<b>Licensee/Licensee Designee:</b>	Jennifer Letcher, Designee
<b>Administrator:</b>	Jennifer Letcher, Administrator
<b>Name of Facility:</b>	Parkview AFC Home
<b>Facility Address:</b>	214 E Central Avenue Zeeland, MI 49464
<b>Facility Telephone #:</b>	(616) 772-4424
<b>Original Issuance Date:</b>	09/26/1986
<b>Capacity:</b>	12
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 09/16/2021

Date of Bureau of Fire Services Inspection if applicable: 07/15/2019, 07/08/2020

Date of Health Authority Inspection if applicable: N/A

Inspection Type:  Interview and Observation  Worksheet  
 Combination  Full Fire Safety

No. of staff interviewed and/or observed 1  
No. of residents interviewed and/or observed 0  
No. of others interviewed 1 Role: LD-J. Lechter

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication record(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain.
- Meal preparation / service observed? Yes  No  If no, explain.  
An inspection of food/food service at the facility was conducted as a meal was not being prepared while the inspection was completed.
- Fire drills reviewed? Yes  No  If no, explain.
- Fire safety equipment and practices observed? Yes  No  If no, explain.
- E-scores reviewed? (Special Certification Only) Yes  No  N/A   
If no, explain.
- Water temperatures checked? Yes  No  If no, explain.  
this renewal was conducted virtually due to COVID19 in the facility and therefore a check of the water temperature was not conducted.
- Incident report follow-up? Yes  No  If no, explain.
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s: N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes  (please explain) No  N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
<b>R 400.14315</b>	<b>Handling of resident funds and valuables.</b>
	(2) The care of any resident funds and valuables that have been accepted by a licensee for safekeeping shall be treated by the licensee as a trust obligation.
Finding: The resident file(s) do not include the Resident Funds I form.  Licensee Response: Ms. Lechter stated she will put the Resident Funds I form in the resident files.	
<b>R 400.14315</b>	<b>Handling of resident funds and valuables.</b>
	(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.
Finding: The resident file(s) do not include the Resident Funds II form.  Licensee Response: Ms. Lechter stated she will put the Resident Funds II form in the resident files.	

On 09/16/2021, an Exit Conference was conducted with Licensee Designee, Jennifer Lechter. Ms. Lechter stated she will include the Resident Funds I&II in resident files and submit an acceptable corrective action plan.

### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

*Elizabeth Elliott*

09/16/2021

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Licensing Consultant Date

