



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

April 22, 2022

Jennifer Zandstra
Rehoboth AFC, Inc.
9505 Homerich Ave. SW
Byron Center, MI 49315

RE: License #: AS410314215
Rehoboth AFC
10785 Burlingame Ave SW
Byron Center, MI 49315

Dear Mrs. Zandstra:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- You are to submit documentation of compliance.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (616) 356-0183.

Sincerely,

A handwritten signature in cursive script, appearing to read "Toya Zylstra".

Toya Zylstra, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 333-9702

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

I. IDENTIFYING INFORMATION

License #: AS410314215

Licensee Name: Rehoboth AFC, Inc.

Licensee Address: 9505 Homerich Ave. SW
Byron Center, MI 49315

Licensee Telephone #: (616) 610-4097

Licensee/Licensee Designee: Jennifer Zandstra, Designee

Administrator: Jennifer Zandstra

Name of Facility: Rehoboth AFC

Facility Address: 10785 Burlingame Ave SW
Byron Center, MI 49315

Facility Telephone #: (616) 610-4097

Original Issuance Date: 09/30/2011

Capacity: 6

Program Type: ALZHEIMERS
AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/06/2022

Date of Bureau of Fire Services Inspection if applicable: 04/06/2022

Date of Health Authority Inspection if applicable: 12/14/2021

Inspection Type: Interview and Observation Worksheet
 Combination Full Fire Safety

No. of staff interviewed and/or observed 3
No. of residents interviewed and/or observed 5
No. of others interviewed N/A Role: [REDACTED]

- Medication pass / simulated pass observed? Yes No If no, explain. Medications passed prior to inspection.
- 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.
- 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.
- 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 determined to be in substantial compliance with rules and requirements.

This facility was found to be in non-compliance with the following rules:

R 400.14507

Means of egress generally.

(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.

Finding: While onsite, I observed the front door handle did not contain non-locking against egress hardware.

Exit Conference: While onsite, Licensee Jennifer Zandstra stated she understood the findings and would submit an acceptable Corrective Action Plan. As of the writing of this report, Ms. Zandstra has submitted an acceptable Corrective Action plan.

A corrective action plan was requested and approved on 04/22/2022. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.



04/25/2022

Toya Zylstra
Licensing Consultant

Date