



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON BROWN  
ACTING DIRECTOR

August 17, 2023

Amber Hernandez-Bunce  
Cornerstone AFC, LLC  
P.O. Box 277  
Bloomington, MI 49026

RE: License #: AS800413641  
Investigation #: 2023A1031054  
North Lake Home

Dear Licensee:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames for each violation as to when the correction will be completed or implemented.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

Please review the enclosed documentation for accuracy and contact me with any questions. If I am not available and you need to speak to someone immediately, please contact the local office at (616) 356-0183.

Sincerely,

A handwritten signature in blue ink that reads "KDuda".

Kristy Duda, Licensing Consultant  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
SPECIAL INVESTIGATION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS800413641
<b>Investigation #:</b>	2023A1031054
<b>Complaint Receipt Date:</b>	07/03/2023
<b>Investigation Initiation Date:</b>	07/05/2023
<b>Report Due Date:</b>	09/01/2023
<b>Licensee Name:</b>	Cornerstone AFC, LLC
<b>Licensee Address:</b>	P.O. Box 277 Bloomingtondale, MI 49026
<b>Licensee Telephone #:</b>	(269) 628-2100
<b>Administrator/Licensee Designee:</b>	Amber Hernandez-Bunce
<b>Name of Facility:</b>	North Lake Home
<b>Facility Address:</b>	12201 56th Street Grand Junction, MI 49056
<b>Facility Telephone #:</b>	(269) 762-2969
<b>Original Issuance Date:</b>	01/31/2023
<b>License Status:</b>	TEMPORARY
<b>Effective Date:</b>	01/31/2023
<b>Expiration Date:</b>	07/30/2023
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL TRAUMATICALLY BRAIN INJURED

## II. ALLEGATION(S)

	<b>Violation Established?</b>
Residents are not receiving nutritious meals and the home runs out of food.	Yes
There are not enough staff in the home.	No
Residents are not going on outings.	No
Residents do not receive hygiene products.	No
Residents' money was stolen.	No
Additional Findings	Yes

## III. METHODOLOGY

07/03/2023	Special Investigation Intake 2023A1031054
07/05/2023	Special Investigation Initiated – Telephone Interview with Candice Kinzler.
07/10/2023	Inspection Completed On-site
07/10/2023	Contact - Face to Face Interviews held with Damien Ibarra, LaSamuella Simpson, Resident A, Resident B, Resident C, Resident D, Resident E, and Resident F.
07/10/2023	Contact - Document Received
07/12/2023	Inspection Completed On-site
07/31/2023	Inspection Completed On-site
07/31/2023	Contact - Face to Face Interviews completed with Epiphany Parker, Resident A, Resident B, Resident C, Resident D, And Resident F.
08/01/2023	APS Referral
08/01/2023	Contact – Documents Requested.
08/02/2023	Contact - Documents Reviewed.

08/02/2023	Contact – Telephone Interview with Damien Ibarra.
08/03/2023	Contact – Face to Face interview with Tyler Moffatt.
08/04/2023	Contact – Telephone Interview with Amber Hernandez-Bunce.
08/17/2023	Exit Conference held with Amber Hernandez-Bunce.

**ALLEGATION:**

**Residents are not receiving nutritious meals and the home runs out of food.**

**INVESTIGATION:**

On 7/10/23, Van Buren Recipient Rights Director Candice Kinzler and I interviewed direct care worker (DCW) Damien Ibarra in the home. Mr. Ibarra reported he works full-time in the home and mainly works day shifts from 7am to 7pm. Mr. Ibarra reported he prepares meals for the residents in the home when he is working. Mr. Ibarra reported the home is often low on groceries which makes it difficult to make the meals on the menu. Mr. Ibarra reported he does not follow the menu because there is not the necessary ingredients or food available to make what is on the menu. Mr. Ibarra reported he will make meals with what is available in the home for the residents despite not following the menu.

On 7/10/23, Ms. Kinzler and I interviewed the home manager LaSamuella Simpson in the home. Ms. Simpson reported the residents receive a nutritious breakfast, lunch, dinner, and snacks throughout the day. Ms. Simpson reported the home has groceries delivered every Tuesday and she feels there is adequate food in the home for the residents. Ms. Simpson reported the residents are provided with necessary proteins, fruits, and vegetables daily. Ms. Simpson reported the residents can get a snack when they would like. Ms. Simpson reported she informs the residents when meals are prepared and ready to eat. Ms. Simpson reported Resident B often sleeps through breakfast as he likes to sleep in.

On 7/10/23, Ms. Kinzler and I interviewed Residents A, B, C, D, E, and F in the home.

Resident A reported the food served in the home “is ok”. Resident A reported he had waffles for lunch and did not eat breakfast. Resident A reported he chose not to eat breakfast due to having stomach issues. Resident A reported he is provided with meals throughout the day but sometimes he does not like what is served.

Resident B reported the staff serve eggs for breakfast. Resident B reported it would be nice to have sausage, bacon, or toast with breakfast instead of just eggs.

Resident B reported they eat hot dogs for lunch “a lot” and he would like other meals for lunch. Resident B reported the home serves “a lot of noodles and gravy or spaghetti for dinner”. Resident B reported it “gets old” eating the same “stuff over and over again”.

Resident C reported the home does not serve meals consistently. Resident C reported “we are lucky if we get lunch”. Resident C reported dinners at the home included noodles and gravy or spaghetti noodles without sauce. Resident C reported it would be nice to have other options served for dinner instead of just noodles. Resident C reported the home does not provide coffee which he would like to have as an option available. Resident C reported staff do not inform him when meals are ready to eat.

Resident D was not able to engage in the interview process. During the home visit on 7/10/23, Resident D was observed to say “lunch” multiple times while sitting in the living room and staff were not attentive to his request.

Resident E reported there is not enough food in the home. Resident E reported staff do not announce when food is ready for the residents to eat. Resident E reported he has requested for the home to make coffee on multiple occasions, but they have refused to make coffee. Resident E reported he believes that food is being hidden from the residents.

Resident F reported scrambled eggs are served for breakfast or cereal. Resident F reported the home runs out of groceries quick and there is often minimal food in the home. Resident F reported when meals are prepared, staff does not inform the residents that the food is ready. Resident F reported the food sits on the stove and residents are expected to ask for food. Resident F reported the staff do not “provide much of anything”. Resident F reported he often buys his own food because he does not like the dinners that are made for dinner. Resident F reported the staff do not know how to cook and they will make “something easy”. Resident F reported he would like to provide input on what meals are provided in the home.

On 7/10/23, I arrived at the home at approximately 1:30pm. Multiple residents reported they had not yet received lunch. Resident D had requested lunch multiple times and was not provided with a lunch option when requested. Mr. Ibarra reported Ms. Simpson was bringing tacos from a restaurant back to the home for lunch. At approximately 2:30pm, Ms. Simpson arrived at the home and provided the individuals with two tacos for lunch. The home was observed to have minimal groceries in the refrigerator, freezer, and cupboards. The snack options shown to be available included a small bag of chips, peanut butter, and oranges. I reviewed the home’s menus for April through July 2023. The menu read that three full nutritious meals are being provided daily and no substitutions were documented on the menu.

On 7/31/23, I interviewed DCW Epiphany Parker in the home. Ms. Parker reported she prepares healthy meals for the residents when she is working. Ms. Parker

reported the residents will help themselves to food in the home which requires her to alter meals at times if there are not available ingredients. Ms. Parker reported residents are more than welcome to provide themselves to snacks. Ms. Parker reported she informs the residents when meals are prepared and ready to eat. Ms. Parker reported the residents receive protein, fruits, and vegetables daily.

On 7/12/23, I conducted an announced visit to the home. When I arrived at the home at approximately 10:55am, Resident D was observed to be eating a pork chop, baked potato, and green beans. The refrigerator and cupboards were observed to have adequate food.

On 7/31/23, I conducted an unannounced visit to the home at approximately 12:30pm. Ms. Parker had lunch prepared which consisted of tuna lettuce wraps and a side of cooked spinach and tomatoes. Resident C reported he was allergic to fish and requested an alternative meal. Ms. Parker then provided Resident C with a turkey sandwich and spinach and tomatoes. Resident B was sleeping when I arrived at the home. Ms. Parker was observed to provide lunch to Resident B in his bedroom when he woke up. Ms. Parker also directed Resident C to the dining room table and provided him with lunch.

On 7/31/23, I interviewed Residents A, B, C, and F in the home. Resident A reported he is receiving "good" meals in the home. Resident B reported staff have "gotten better" with letting him know when food is ready to eat. Resident C reported staff will serve breakfast and lunch at the same time and he must wait until dinner for his next meal. Resident C reported he would like two separate meals for breakfast and lunch. Resident F reported staff still do not let him know when food is ready. Resident F reported staff do not know how to cook and the food provided is not good. Resident F reported the female staff do a better job with providing meals than the male staff. Resident F reported he feels the home runs out of food fast because staff eat their food too.

On 8/2/23, I interviewed Mr. Ibarra via telephone. Mr. Ibarra reported again that he does not follow the menu due to limited groceries for the identified meals being available in the home. Mr. Ibarra reported some of the recipes are complicated and the home does not provide a recipe on how to cook more intricate meals.

On 8/3/23, I interviewed DCW Tyler Moffatt in the home. Mr. Moffatt reported he works the overnight shift and does not prepare any meals. Mr. Moffatt reported he has noticed the home to have a minimal amount of food available at times. Mr. Moffatt reported he does not feel that there are enough groceries available in the home at times. Mr. Moffatt reported the same groceries are delivered on a weekly basis and there is not a variety of food available for the meals listed on the menus.

On 8/4/23, I interviewed the licensee designee Amber Hernandez-Bunce via telephone. Ms. Hernandez-Bunce acknowledged that meals on the menu may be difficult for staff to cook without a recipe or directions on how to cook identified

meals. Ms. Hernandez-Bunce reported she was not aware that staff had difficulty preparing meals identified on the menu. Ms. Hernandez-Bunce reported groceries are delivered to the home every Tuesday and the home utilizes a software system to order groceries.

<b>APPLICABLE RULE</b>	
R 400.14201	<b>Qualifications of administrator, direct care staff, licensee, and members of household;</b>
	<b>(9) A licensee and the administrator shall possess all of the following qualifications:</b>  <b>(c) Be capable of assuring program planning, development, and implementation of services to residents consistent with the home's program statement and in accordance with the resident's assessment plan and care agreement.</b>
<b>ANALYSIS:</b>	Based on interviews held with staff and residents, it is unclear if residents are receiving nutritious meals. However, Residents interviewed generally were not satisfied with the totality of the meal program at the home. One resident claimed that common side items such as bacon, sausage, or toast were not provided with an egg breakfast. While the menu revealed a variety of meals throughout the week, residents claimed redundancy in hotdogs for lunch and frequent noodle dishes with or without sauces. I witnessed a resident eating breakfast at 10:30 am which consisted of a previous day's dinner meal. Mr. Ibarra confided that he does not follow the scheduled meal simply because the items to prepare the meal are not usually available. Residents claimed no notification of mealtimes, as evidenced by a recent lunch that was brought into the home for a mealtime at 2:30 PM. Seemingly the home appears to lack the capacity to manage a food program.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ALLEGATION:**

**There are not enough staff in the home.**

**INVESTIGATION:**

On 7/10/23, Recipient Rights Officer Candice Kinzler and I conducted an unannounced visit to the home and there were two staff scheduled to be working in the home with six residents.

Ms. Kinzler and I interviewed direct care workers (DCW) Damien Ibarra and LaSamuella Simpson in the home. They both reported they feel the home has adequate staff to meet the needs of the residents in the home.

Ms. Kinzler and I interviewed Residents A, B, C, E, and F. The residents felt there was adequate staff available in the home to meet their needs. Resident D was not able to be interviewed due to being nonverbal.

On 7/31/23, I conducted an unannounced visit to the home and there were two staff scheduled to be working in the home with six residents.

Ms. Parker reported she felt there was adequate staffing to meet the residents needs in the home.

On 8/2/23, I reviewed the *Assessment Plan for AFC Residents* for all residents in the home. All the residents in the home aside from Resident D are mobile and require minimal physical assistance with activities of daily living. There was not an assessed need for additional staffing.

On 8/2/23, I reviewed the staff schedules for June and July 2023. The home had one to two staff scheduled during the day shift from 7am to 7pm and one staff scheduled for sleeping hours between 7pm and 7am.

Mr. Moffatt reported he feels there is adequate staffing available in the home to meet the resident's needs.

<b>APPLICABLE RULE</b>	
<b>R 400.14206</b>	<b>Staffing Requirements</b>
	<b>(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident's resident care agreement and assessment plan.</b>



<b>ANALYSIS:</b>	Based on interviews and the review of supporting documentation, there is no evidence to support the home does not have enough staff to meet the resident's needs as identified within their assessment plan. Residents in the home are independent and require minimal physical assistance from staff. Staff schedules reflect that there is either a 6:1 or 6:2 resident to staff ratio.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:**

**Residents are not going on outings.**

**INVESTIGATION:**

Residents A, B, C, E, and F reported they go on outings weekly which includes the store, movie theatres, restaurants, church, and walks.

Mr. Ibarra, Ms. Simpson, and Ms. Parker all reported the residents go on outings weekly that do not include doctors' appointments. They reported they take residents out to dinner, movie theatres, community events, and community stores.

During visits to the home, residents returned to the home from outings that included the store and restaurant.

<b>APPLICABLE RULE</b>	
<b>R 400.14303</b>	<b>Resident care; licensee responsibilities.</b>
	<b>(4) A licensee shall provide all of the following: (c) An opportunity for community-based recreational activities.</b>
<b>ANALYSIS:</b>	Based on interviews held with staff and residents, there is no indication that the home is not allowing the resident an opportunity for community-based recreational activities. The residents consistently reported they go on outings with staff.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:**

**Residents do not receive hygiene products.**

**INVESTIGATION:**

Resident A, B, C, and F reported they have adequate hygiene products. They reported they receive tokens in the home for completing chores which they redeem for personal hygiene products. The residents reported they like to receive tokens because they can get items from the Cornerstone Store when they do not have any cash available.

Resident E reported he does not feel he has enough hygiene products. Resident E reported he does not like to use his tokens or money on hygiene products and feels this should be provided by the home.

I observed the residents to have adequate hygiene products when I visited the home. Residents also have a self-care bin located in a closet to store their hygiene products if they choose to do so.

<b>APPLICABLE RULE</b>	
<b>R 400.14314</b>	<b>Resident hygiene.</b>
	<b>(1) A licensee shall afford a resident the opportunity, and instructions when necessary, for daily bathing and oral and personal hygiene. A licensee shall ensure that a resident bathes at least weekly and more often if necessary.</b>
<b>ANALYSIS:</b>	The home provides residents the opportunity for daily bathing and personal hygiene. The home utilizes a token program where residents can earn tokens by completing chores in the home to purchase additional personal items. The token program allows for residents to purchase items from the Cornerstone Store.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:**

**Residents' money was stolen.**

**INVESTIGATION:**

Residents A, B, C, E, and F reported no issues regarding their personal funds.

I reviewed all the resident's *Funds II* forms and there was no indication of stolen funds.

Mr. Ibarra, Ms. Simpson, and Ms. Parker reported there have not been any reported concerns by residents that their money is being stolen.

<b>APPLICABLE RULE</b>	
<b>R 400.14315</b>	<b>Handling of resident funds and valuables.</b>
	<b>(10) A licensee, administrator, direct care staff, other employees, volunteers under the direction of the licensee, and members of their families shall not accept, take, or borrow money or valuables from a resident, even with the consent of the resident.</b>
<b>ANALYSIS:</b>	Interviews and the review of resident funds forms determined there was no evidence found to support that resident’s money or valuables are being taken.
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:**

On 7/10/23, I reviewed the menus in the home from April to July 2023. The stove was observed to have scrambled eggs in a pan which staff reported was made for breakfast. The menu item listed for breakfast on 7/10/23 included orange juice, cereal, French toast, turkey bacon and milk. This meal on the menu was not made for the residents. The menu did not have any changes documented to reflect substitutions from April to July 2023. Mr. Ibarra informed me that he does not make the meals listed on the menu. Mr. Ibarra reported the home does not have adequate groceries at times to make the identified meals that are on the menu. Ms. Simpson reported she does make all the meals listed on the menu. Ms. Simpson reported she writes changes on the menu if there is a meal substitution.

On 7/12/23, I observed Resident D to be eating a “leftover meal” at approximately 10:55am which included a pork chop, baked potato, and green beans. I reviewed the menu for 7/12/23 and breakfast was supposedly orange juice, cereal, scrambled eggs, toast and milk and lunch was stuffed cantaloupe chicken with sliced tomato, pasta salad, a peach, and beverage. The last known meal to contain pork according to the menu was on 7/2/23.

On 7/31/23, Ms. Parker reported she makes the meals that are on the menu. Ms. Parker reported residents help themselves to food in the home which causes a shortage of ingredients at times for some meals.

I interviewed Mr. Ibarra via telephone. Mr. Ibarra reported again that he does not follow the menu due to limited groceries for the identified meals being available in the home. Mr. Ibarra reported some of the recipes are complicated and the home does not provide a recipe on how to cook more intricate meals. Mr. Ibarra reported it would be helpful for him to have a recipe for meals that are more difficult to prepare and make.

On 8/2/23, I interviewed Ms. Parker via telephone. Ms. Parker reported that some meals on the menu could be difficult for other staff to make. Ms. Parker reported she enjoys cooking and can figure out most meals on the menu. Ms. Parker reported she feels it would be helpful to have recipes provided for meals on the menu to ensure they are cooking the identified meals.

Mr. Moffatt reported he does not feel that there are enough groceries available in the home at times. Mr. Moffatt reported the same groceries are delivered on a weekly basis and there is not a variety of food available for the meals listed on the menus.

Ms. Hernandez-Bunce reported that the home has not provided recipes for the meals listed on the menu. Ms. Hernandez-Bunce acknowledged that providing staff with recipes for the meals would be beneficial to ensure they are following the menu in the home.

<b>APPLICABLE RULE</b>	
<b>R 400.14313</b>	<b>Resident nutrition.</b>
	<b>(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.</b>
<b>ANALYSIS:</b>	Menus were observed to be available in the home. However, staff reported they do not follow the menu posted in the home due to lack of groceries or the inability to cook a more difficult meal. Staff reported it would be helpful for recipes to be provided to ensure they are cooking the meals identified on the menu. The menu was also not updated to reflect meal substitutions made.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 8/17/23, I completed an exit conference with licensee designee Amber Hernandez-Bunce via telephone. Ms. Hernandez-Bunce acknowledged that changes needed to be made for their meal planning program and felt it would be helpful to provide the staff with recipes to prepare meals identified on the menu. Ms. Hernandez-Bunce reported she will be reviewing and updating their meal planning and/or nutritional policies implemented in the home.

**IV. RECOMMENDATION**

Upon receipt of an acceptable corrective action plan, it is recommended that the status of the license remain unchanged.



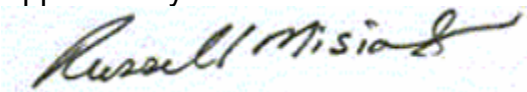
8/17/23

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Kristy Duda  
Licensing Consultant

Date

Approved By:



8/17/23

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Russell B. Misiak  
Area Manager

Date