



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

August 7, 2023

Rebecca DeHaan
County of Barry d/b/a Thornapple Manor
2700 Nashville Road
Hastings, MI 49058

RE: License #: AH080407228
Harvest Pointe at Thornapple Manor
2950 McKeown Road
Hastings, MI 49058

Dear Rebecca DeHaan:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. Your license is renewed until 8/12/2024. It is valid only at your present address and is nontransferable.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (616) 356-0100.

Sincerely,

A handwritten signature in cursive script, appearing to read "Julie Viviano".

Julie Viviano, Licensing Staff
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
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

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|---|---|
| License #: | AH080407228 |
| Licensee Name: | County of Barry d/b/a Thornapple Manor |
| Licensee Address: | 2700 Nashville Road Hastings, MI 49058 |
| Licensee Telephone #: | (269) 945-2407 |
| Authorized Representative: | Rebecca DeHaan |
| Administrator/Licensee Designee: | Sara Tobias |
| Name of Facility: | Harvest Pointe at Thornapple Manor |
| Facility Address: | 2950 McKeown Road Hastings, MI 49058 |
| Facility Telephone #: | (269) 945-2408 |
| Original Issuance Date: | 02/13/2023 |
| Capacity: | 70 |
| Program Type: | AGED |

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/27/2023

Date of Bureau of Fire Services Inspection if applicable: BFS – A; 11/28/2022

Inspection Type: ☐ Interview and Observation ☒ Worksheet
☐ Combination

Date of Exit Conference: 7/27/2023

No. of staff interviewed and/or observed 9
No. of residents interviewed and/or observed 14
No. of others interviewed 0 Role N/A

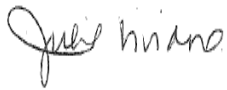
- Medication pass / simulated pass observed? Yes ☒ No ☐ If no, explain.
- Medication(s) and medication records(s) reviewed? Yes ☒ No ☐ If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes ☐ No ☒ If no, explain. The home does not keep resident funds in trust.
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.
- Fire drills reviewed? Yes ☐ No ☒ If no, explain.
Reviewed disaster plans along with interviewed staff on policies and procedures.
- Water temperatures checked? Yes ☒ No ☐ If no, explain.
- Incident report follow-up? Yes ☐ IR date/s: N/A ☒
- Corrective action plan compliance verified? Yes ☐ CAP date/s and rule/s: N/A
- Number of excluded employees followed up? 0 N/A ☒

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility is in compliance with all applicable rules and statutes.

IV. RECOMMENDATION

Renewal of the license is recommended.



8/7/2023

Date

Licensing Consultant