



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 8, 2025

Marva Townsend
733 Prince LLC
733 Prince SE
Grand Rapids, MI 49507

RE: License #: AS410362376
Princeton AFC
733 Prince
Grand Rapids, MI 49507

Dear Ms. Townsend:

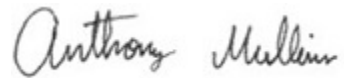
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 and a date.

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

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) 356-0100.

Sincerely,



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

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

I. IDENTIFYING INFORMATION

| | |
|------------------------------------|---|
| License #: | AS410362376 |
| Licensee Name: | 733 Prince LLC |
| Licensee Address: | 733 Prince SE Grand Rapids, MI 49507 |
| Licensee Telephone #: | (616) 635-2957 |
| Licensee/Licensee Designee: | Marva Townsend |
| Administrator: | Marva Townsend |
| Name of Facility: | Princeton AFC |
| Facility Address: | 733 Prince Grand Rapids, MI 49507 |
| Facility Telephone #: | (616) 259-7848 |
| Original Issuance Date: | 11/14/2014 |
| Capacity: | 6 |
| Program Type: | DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED ALZHEIMERS |

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/08/2025

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 0

No. of others interviewed 1 Role: Designee

- Medication pass / simulated pass observed? Yes ☐ No ☒ If no, explain.
No medications were scheduled to be passed during the onsite 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.
N/A
- 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:

R 400.14201

Qualifications of administrator, direct care staff, licensee, and members of household; provision of names of employee, volunteer, or member of household on parole or probation or convicted of felony; food service staff.

(10) All members of the household, employees, and those volunteers who are under the direction of the licensee shall be suitable to assure the welfare of residents.

Ms. Townsend did not have an eligibility letter on file for AFC staff member Michael Townsend Jr.

R 400.14204

Direct care staff; qualifications and training.

(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas:

- (a) Reporting requirements.**
- (b) First aid.**
- (c) Cardiopulmonary resuscitation.**
- (d) Personal care, supervision, and protection.**
- (e) Resident rights.**
- (f) Safety and fire prevention.**
- (g) Prevention and containment of communicable diseases.**

Michael Townsend Jr. and Sherita James did not have CPR/First Aid certifications on file.

R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after

admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

Resident A and Resident D did not have a health care appraisal on file.

R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.

Resident C's assessment plan was last signed on 3/18/24 and needs to be updated.

R 400.14301

Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

Resident B did not have a resident care agreement on file. Resident C's resident care agreement was last signed on 3/8/24 and needs to be updated. Resident D did not have a resident care agreement on file.

R 400.14305

Resident protection.

(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be attended to at all times in accordance with the provisions of the act.

Resident B had a soiled diaper sitting in the trash can in her room, exposing her to a strong urine odor. Ms. Townsend confirmed that staff are responsible for taking the trash out.

R 400.14318 Emergency preparedness; evacuation plan; emergency transportation.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

Ms. Townsend had fire drills available to review for 2025. However, she did not have any for the year 2023 or 2024.

R 400.14403 Maintenance of premises.

(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.

The glass in Resident B's bedroom window is broken and needs to be replaced.

R 400.14403 Maintenance of premises.

(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

The walls leading to the basement of the home are peeling and need to be repaired. The first step leading to the basement is missing 2 tiles and needs to be repaired.

R 400.14408 Bedrooms generally.

(4) Interior doorways of bedrooms that are occupied by residents shall be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, non-locking-against-egress hardware.

Resident B's bedroom doorknob locks against egress. Therefore, this needs to be changed to a non-locking against egress doorknob immediately.

R 400.14408 Bedrooms generally.

(7) Bedrooms shall have at least 1 easily openable window.

Resident B has 2 windows in her bedroom, neither of which are easily openable.

R 400.14511

Flame-producing equipment; enclosures.

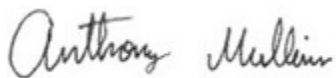
(1) If the heating plant is located in the basement of a small group home, standard building material may be used for the floor separation. Floor separation shall also include at least 1 3/4-inch solid core wood door or equivalent to create a floor separation between the basement and the first floor.

The self-closing device on the basement door that is used for floor separation is inoperable. This will need to be repaired immediately.

While onsite, I conducted an exit conference with the owner/designee, Marva Townsend. She was informed of the findings and aware that a corrective action plan is due by 5/13/25 to prevent the license from expiring.

IV. RECOMMENDATION

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



05/08/2025

Anthony Mullins
Licensing Consultant

Date