



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

November 25, 2025
Janice Parmeter
52410 Lewis Lake Rd
Marcellus, MI 49067

RE: License #: AF750005795
Parmeter AFC Home
52710 Lewis Lake Rd
Marcellus, MI 49067

Dear Ms. Parmeter:

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.

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 (517) 335-5985.

Sincerely,

Nile Khabeiry, 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
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #: AF750005795

Licensee Name: Janice Parmeter

Licensee Address: 52410 Lewis Lake Rd
Marcellus, MI 49067

Licensee Telephone #: (269) 646-9251

Licensee/Licensee Designee: Janice Parmeter

Administrator: Janice Parmeter

Name of Facility: Parmeter AFC Home

Facility Address: 52710 Lewis Lake Rd
Marcellus, MI 49067

Facility Telephone #: (269) 646-9251

Original Issuance Date: 09/19/1985

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED

II. METHODS OF INSPECTION

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

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

Date of Health Authority Inspection if applicable: Several inspections.

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 1

No. of others interviewed 0 Role: N/A

- 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.
- 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 found to be in non-compliance with the following rules:

R 400.645

Environmental health.

(2) A facility that does not have access to an approved community water system shall comply with the safe drinking water act, 1976 PA 399, MCL 325.1001 to 325.1023. A facility not on an approved community water system, or a facility on an approved community water system but that installs water treatment equipment, shall provide a total coliform, nitrate, and arsenic report documenting satisfactory water quality with the initial application and with all renewal applications. Satisfactory samples mean concentrations that do not exceed the primary maximum contaminant levels or action level. The department may require increased monitoring parameters and increased frequency based on local site conditions or other pertinent factors.

FINDINGS: Bacteria was found in the facilities water system.

IV. RECOMMENDATION

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

OR

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.

Nile Khabeiry, LMSW

Nile Khabeiry
Licensing Consultant

Date

