



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

February 2, 2026

Jacklyn Stoltzfus
Covenant Enabling Res of MI Inc.
862 Forest Park Road
Muskegon, MI 49441

RE: License #:	AS410339288 Hope House 336 Thornridge Dr. NW Grand Rapids, MI 49504
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Dear Ms. Stoltzfus:

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.

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

Please contact me with any questions. If I am not available and you need to speak to someone immediately, you may contact the local office at (616) 356-0100.

Sincerely,

A handwritten signature in cursive script that reads "Elizabeth Elliott". The signature is written in black ink and is positioned below the word "Sincerely,".

Elizabeth Elliott, Licensing Consultant
Bureau of Community and Health Systems
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 901-0585

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

I. IDENTIFYING INFORMATION

License #:	AS410339288
Licensee Name:	Covenant Enabling Res of MI Inc.
Licensee Address:	862 Forest Park Road Muskegon, MI 49441
Licensee Telephone #:	(231) 288-5697
Licensee/Licensee Designee:	Jacklyn Stoltzfus, Designee
Administrator:	Jacklyn Stoltzfus, Administrator
Name of Facility:	Hope House
Facility Address:	336 Thornridge Dr. NW Grand Rapids, MI 49504
Facility Telephone #:	(161) 655-0164
Original Issuance Date:	08/09/2013
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/29/2026

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

Date of Health Authority Inspection if applicable: 01/29/2026

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 3

No. of others interviewed 2 Role: LD/Admin. J. Stoltzfus

- Medication pass / simulated pass observed? Yes No If no, explain.
At the time of the inspection, resident medications were not being administered to residents. A review of the resident medications and MAR (medication administration record) was conducted.
- 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 400.725	Means of egress.
	(2) Where basements are regularly utilized for resident activities, there must be 2 approved means of egress, 1 of which leads directly outside.
<p>Finding: The basement of the facility is regularly utilized for resident activities and there is not 2 approved means of egress leading directly to the outside.</p> <p>Licensee Response: Jackie Stoltzfus stated they are aware of this means of egress issue and is working on getting quotes to have an exit leading directly to the outside so the lower level can be used for resident activities.</p>	

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended (Capacity 6).



02/02/2026

Elizabeth Elliott
Licensing Consultant

Date