



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

May 22, 2026

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

RE: License #: AS120281503  
Investigation #: 2026A1032032  
Cornerstone AFC

Dear Amber Hernandez-Bunce:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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

Sincerely,

A handwritten signature in cursive script, appearing to read "Dwight Forde".

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

enclosure

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

**I. IDENTIFYING INFORMATION**

|                                       |                                                                                                   |
|---------------------------------------|---------------------------------------------------------------------------------------------------|
| <b>License #:</b>                     | AS120281503                                                                                       |
| <b>Investigation #:</b>               | 2026A1032032                                                                                      |
| <b>Complaint Receipt Date:</b>        | 04/27/2026                                                                                        |
| <b>Investigation Initiation Date:</b> | 04/28/2026                                                                                        |
| <b>Report Due Date:</b>               | 06/26/2026                                                                                        |
| <b>Licensee Name:</b>                 | Cornerstone AFC, LLC                                                                              |
| <b>Licensee Address:</b>              | P.O. Box 277 Bloomingdale, MI 49026                                                               |
| <b>Licensee Telephone #:</b>          | (269) 628-2100                                                                                    |
| <b>Administrator:</b>                 | Amber Hernandez-Bunce                                                                             |
| <b>Licensee Designee:</b>             | Amber Hernandez-Bunce                                                                             |
| <b>Name of Facility:</b>              | Cornerstone AFC                                                                                   |
| <b>Facility Address:</b>              | 633 N. Fall River Coldwater, MI 49036                                                             |
| <b>Facility Telephone #:</b>          | (517) 278-7887                                                                                    |
| <b>Original Issuance Date:</b>        | 03/08/2006                                                                                        |
| <b>License Status:</b>                | REGULAR                                                                                           |
| <b>Effective Date:</b>                | 10/01/2024                                                                                        |
| <b>Expiration Date:</b>               | 09/30/2026                                                                                        |
| <b>Capacity:</b>                      | 6                                                                                                 |
| <b>Program Type:</b>                  | PHYSICALLY HANDICAPPED<br>DEVELOPMENTALLY DISABLED<br>MENTALLY ILL<br>TRAUMATICALLY BRAIN INJURED |

**II. ALLEGATION(S)**

|                                                                                     | <b>Violation<br/>Established?</b> |
|-------------------------------------------------------------------------------------|-----------------------------------|
| The facility did not seek medical care to address a decline in Resident A's health. | No                                |

**III. METHODOLOGY**

|            |                                                                                               |
|------------|-----------------------------------------------------------------------------------------------|
| 04/27/2026 | Special Investigation Intake<br>2026A1032032                                                  |
| 04/28/2026 | Special Investigation Initiated - Letter<br>Email exchange with APS Specialist Richard Jacoby |
| 05/11/2026 | Inspection Completed On-site<br>Interview with home manager Melissa Hill and Resident A       |
| 05/22/2026 | Exit Conference<br>with licensee designee Amber Bunce                                         |

**ALLEGATION:**

**The facility did not seek medical care to address a decline in Resident A's health.**

**INVESTIGATION:**

On 4/28/26, I corresponded with Adult Protective Services Specialist Richard Jacoby by email. Mr. Jacoby stated that Resident A's guardian was retiring and had not properly transferred responsibilities to another person or agency. This complicated Resident A's insurance status, making it difficult to make appointments for medical care.

On 5/11/26 I interviewed home manager Melissa Hill in the facility. Ms. Hill advised that a dentist appointment was secured on August 15<sup>th</sup> at the University of Michigan. She stated that a new guardian, Guardianship Finances, will be assuming responsibilities. She acknowledged that Resident A had been losing weight but in reporting the issue to her doctor, the doctor did not seem too concerned. She stated that she provides Resident A with soft foods and shakes.

I attempted to interview Resident A, however, due to a mental condition, I was unable to do so.

| <b>APPLICABLE RULE</b> |                                                                                                                                                                                                                                                                                                                                                                                                                               |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>R 400.689</b>       | <b>Resident health care.</b>                                                                                                                                                                                                                                                                                                                                                                                                  |
|                        | <b>(3) In case of an accident or sudden adverse change in a resident's health condition, a facility shall obtain needed health care immediately.</b>                                                                                                                                                                                                                                                                          |
| <b>ANALYSIS:</b>       | Case coordination with Adult Protective Services revealed that Resident A's guardian did not enroll Resident A in an appropriate insurance plan. During my onsite inspection, I was advised that Resident A has a confirmed dental appointment and that the facility was providing Resident A's physician with updates on her weight and other conditions. Therefore there is insufficient evidence to establish a violation. |
| <b>CONCLUSION:</b>     | <b>VIOLATION NOT ESTABLISHED</b>                                                                                                                                                                                                                                                                                                                                                                                              |

On 5/22/26, I conducted an exit conference with licensee designee Amber Bunce, where I shared my findings. Mrs. Bunce agreed with the conclusions reached.

**IV. RECOMMENDATION**

I recommend no change to the status of this license.

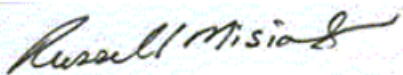


5/22/26

Dwight Forde  
Licensing Consultant

Date

Approved By:



6/16/26

Russell B. Misiak  
Area Manager

Date