



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 8, 2026

Ranaida Madiam
10014 M 216
Marcellus, MI 49067

RE: License #: AF750379842
Agape AFC Home
10014 M 216
Marcellus, MI 49067

Dear Ms. Madiam:

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. 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,

A handwritten signature in black ink that reads "Nile Khabeiry, LMSW". The signature is written in a cursive, flowing style.

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 #:	AF750379842
Licensee Name:	Ranaida Madiam
Licensee Address:	10014 M 216 Marcellus, MI 49067
Licensee Telephone #:	(269) 646-0870
Licensee/Licensee Designee:	Ranaida Madiam
Administrator:	Ranaida Madiam
Name of Facility:	Agape AFC Home
Facility Address:	10014 M 216 Marcellus, MI 49067
Facility Telephone #:	(269) 646-0870
Original Issuance Date:	02/12/2016
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/07/2026

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

Date of Health Authority Inspection if applicable: Unknown

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 2

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.
Inspection did not occur during the time of the inspection.
- 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.
No recent incident reports to review.
- 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.

(5) Facilities that accommodate residents who regularly require wheelchairs must be equipped with ramps located at 2 approved means of egress from the first floor. Ramps constructed before the effective date of these rules must not exceed 1 foot of rise in 12 feet of run. Ramps constructed on or after the effective date of these rules must comply with R 400.647(10). A ramp is not required when an egress door is level with the walkway.

FINDINGS: The facility had two wheelchair residents and only one wheelchair ramp.

IV. RECOMMENDATION

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

Nile Khabeiry, LMSW

7/8/26

Nile Khabeiry
Licensing Consultant

Date