GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 21, 2026

Rebecca Buchholz
Harbor House Ministries
919 44th Street
Jenison, MI 49428

RE: License #: AM700285825
Harbor House Anchor Place
979 44th Street
Jenison, MI 49428

Dear Mrs. Buchholz:

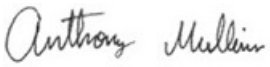
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 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

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

I. IDENTIFYING INFORMATION

License #:	AM700285825
Licensee Name:	Harbor House Ministries
Licensee Address:	919 44th Street Jenison, MI 49428
Licensee Telephone #:	(616) 797-9920
Licensee/Licensee Designee:	Rebecca Buchholz
Administrator:	Rebecca Buchholz
Name of Facility:	Harbor House Anchor Place
Facility Address:	979 44th Street Jenison, MI 49428
Facility Telephone #:	(616) 797-0810
Original Issuance Date:	09/19/2007
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/21/2026

Date of Bureau of Fire Services Inspection if applicable: 11/19/2025

Date of Environmental/Health Inspection if applicable: N/A

No. of staff interviewed and/or observed 5
No. of residents interviewed and/or observed 5
No. of others interviewed 1 Role: Designee

- 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. 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 ☐ R 400.15304 (1)(o) and (2) Resident rights; licensee responsibilities - approved 2024.

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

MCL 400.734b **Employing or contracting with certain individuals providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; determination of existence of national criminal history; failure to conduct criminal history check; automated fingerprint identification system database; electronic web-based system; costs; definitions.**

(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or

she is no longer exempt and shall be terminated from employment or denied employment.

During the onsite inspection, I reviewed all current staff members listed in the Workforce Background Check System for Harbor House Anchor Place with licensee designee, Rebecca Buchholz. The system showed 110 active employees. During this review, we determined that several employees listed are either no longer employed at the AFC or not required to be in the system due to not providing direct care to residents.

The Workforce Background Check System needs to be updated to accurately reflect the current staffing.

R 400.637 Handling of resident funds and valuables.

(10) A resident's account must be individual to the resident. A licensee is prohibited from having any ownership interest in a resident's account and shall inform the resident or resident's designated representative of this in writing.

HR created a bank account under the AFC name and put all residents' funds within the same account. However, per AFC licensing rules, a resident's account must be individual to the resident.

R 400.675 Resident medications.

(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident:
(a) Be trained in the proper handling and administration of medication.
(b) Complete an individual medication log that contains all of the following:
(i) Medication name.
(ii) Dosage.
(iii) Label instructions for use.
(iv) Time to be administered.
(v) Initials of the individual who administered the medication at the time given.

On 07/17/26, staff did not initial Resident A's MAR after passing his 12:00pm medications, which included: Dicyclomine 10mg, Maalox liquid, and Lisinopril 10mg.

R 400.685 Resident admission; resident assessment plan; resident care agreement; health care appraisal.

(10) A resident or resident's designated representative shall provide a written health care appraisal or a medical discharge summary by an appropriate health care professional that is completed within the 90-day period before admission. A written health care appraisal must be completed at least annually thereafter. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be completed no later than 30 days after admission.

Resident B's health care appraisal was last completed on 05/27/25 and needs to be updated within the last 12 months.

R 400.691 Resident records.

(1) A licensee shall complete and maintain a separate record for each resident that includes all of the following: (g) Admission and monthly weight record.

Resident A, Resident B, Resident C, Resident E, Resident F, and Resident G were all missing one or more monthly weights over the past two years.

During the onsite renewal inspection, I conducted an exit conference with licensee designee, Rebecca Buchholz. She was informed of the findings and aware that a CAP is required.

IV. RECOMMENDATION

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

07/21/2026

Anthony Mullins Date
Licensing Consultant