GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

October 16, 2026

Melissa Roberts
The River AFC, LLC
397 W Michigan Ave
Hesperia, MI 49421

RE: License #: AL640404079
The River
397 W Michigan Ave
Hesperia, MI 49421

Dear Melissa Roberts:

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 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 (616) 356-0100.

Sincerely,



Bruce A. Messer, Licensing Consultant
Bureau of Community and Health Systems
701 S. Elmwood
Traverse City, MI 49684
(231) 342-4939

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

I. IDENTIFYING INFORMATION

License #:	AL640404079
Licensee Name:	The River AFC, LLC
Licensee Address:	397 W Michigan Ave Hesperia, MI 49421
Licensee Telephone #:	(231) 750-9273
Licensee Designee:	Melissa Roberts
Administrator:	Melissa Roberts
Name of Facility:	The River
Facility Address:	397 W Michigan Ave Hesperia, MI 49421
Facility Telephone #:	(231) 750-9273
Original Issuance Date:	05/07/2020
Capacity:	16
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/14/2026

Date of Bureau of Fire Services Inspection if applicable: 10/09/2026

Date of Health Authority Inspection if applicable: 07/27/2026

No. of staff interviewed and/or observed 2
No. of residents interviewed and/or observed 5
No. of others interviewed 0 Role:

- 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: CAP 8/1//26 R681.1 CAP 3/12/26 R675.1 N/A ☐
- Number of excluded employees followed-up? 0 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 400.639 Staff records.

(1) A licensee shall maintain a record for each staff that contains all of the following:
(d) Verification of age.

At the time of the renewal inspection, the Licensee was unable to provide documentation or verification of staff member Kristine Cousineau-Bussis age.

R 400.691 Resident records.

(1) A licensee shall complete and maintain a separate record for each resident that includes all of the following:
(a) Personal information including all of the following:
(i) Resident's full name.
(ii) Social Security number.
(iii) Date of birth.
(iv) Marital status.
(v) Veteran's status.
(vi) Gender identity.
(vii) Former address.
(viii) Name, address, and contact information of identified contact or designated representative.
(ix) Name, address, and contact information of the person and agency responsible for the resident's placement in the facility.
(x) Funeral provisions, preferences, and contact information.
(xi) Resident's religious preference.

At the time of the renewal inspection, it was noted that the licensee did not have a Resident Information and Identification record, which notes listed items above, on file for Resident A.

R 400.691 Resident records.

(1) A licensee shall complete and maintain a separate record for each resident that includes all of the following:
(d) Health care information including all of the following:
(i) Health care appraisals.

At the time of the renewal inspection, it was noted that the Licensee had not obtained a health care appraisal for Resident B at the time of his admission to the facility. Resident B was admitted on May 1, 2026, and the health care appraisal was not completed until June 10, 2026.

R 400.691 Resident records.

(1) A licensee shall complete and maintain a separate record for each resident that includes all of the following:
(e) Resident care agreement.

At the time of the renewal inspection, it was noted that the Licensee had not completed a Resident Care Agreement for Resident A.

R 400.691 Resident records.

(1) A licensee shall complete and maintain a separate record for each resident that includes all of the following:
(f) Assessment plan.

At the time of the renewal inspection, it was noted that the Licensee had not completed an Assessment Plan for Resident A or Resident C.

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.

At the time of the renewal inspection, it was noted that the Licensee had not completed a weight record for Resident A.

On October 14, 2026, I provided Licensee Designee Melissa Roberts with an exit conference. I explained my findings as noted above. Ms. Roberts stated she understood the findings, and that she had no questions or additional information to provide concerning this renewal inspection. Ms. Roberts stated she would submit a corrective action plan addressing the cited rules noted above.

IV. RECOMMENDATION

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

 October 16, 2026

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Bruce A. Messer Date
Licensing Consultant