

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 9, 2023

Cornelius Kuperus David's House Ministries 2390 Banner Dr. Wyoming, MI 49509

> RE: License #: AS410314820 House 4 2375 Banner Dr. SW Wyoming, MI 49509

Dear Mr. Kuperus:

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.

Sincerely,

loya gre

Toya Zylstra, Licensing Consultant Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503 (616) 333-9702

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

I. IDENTIFYING INFORMATION

License #:	AS410314820
Licensee Name:	David's House Ministries
Licensee Address:	2390 Banner Dr. Wyoming, MI 49509
Licensee Telephone #:	(616) 284-4388
Licensee/Licensee Designee:	Cornelius Kuperus, Designee
Administrator:	Ruth Bonfiglio, Administrator
Name of Facility:	House 4
Facility Address:	2375 Banner Dr. SW Wyoming, MI 49509
Facility Telephone #:	(616) 247-7861
Original Issuance Date:	10/18/2012
Capacity:	3
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection(s):	03/07/2023
Date of Bureau of Fire Services Inspection if applicable: 03/07/2023	
Date of Health Authority Inspection if applicable:	03/07/2023
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed N/A Role:	3 3
 Medication pass / simulated pass observed? Yes No If no, explain. Medications passed prior to inspection. 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. Meal prepared prior to inspection. Fire drills reviewed? Yes No If no, explain. 	
Fire safety equipment and practices observe	ed? Yes 🖂 No 🗌 If no, explain.
 E-scores reviewed? (Special Certification Only) Yes No N/A If no, explain. Water temperatures checked? Yes No I If no, explain. 	
 Incident report follow-up? Yes X No I If no, explain. 	
 Corrective action plan compliance verified? N/A N/A Number of excluded employees followed-up 	
• Variances? Yes 🗌 (please explain) No 🗌	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was determined to be in substantial compliance with rules and requirements.

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

R 400.14301 Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.

> (9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

Finding: Resident A's Resident Care Agreement was not reviewed annually. Resident A's Resident Care Agreement was signed by the Licensee Designee on 12/10/2021.

Exit Conference: On 03/07/2023 Licensee Designee Cornelius Kuperus stated during a face to face interview that he agreed with the finding and would submit an acceptable Corrective Action Plan.

IV. RECOMMENDATION

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

laya gre

03/09/2023

Toya Zylstra Licensing Consultant

Date