



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

February 11, 2026

Juvenal Rutaramirwa
BETTER LIVING AFC LLC
448 Van Allen St Se
Grand Rapids, MI 49548

RE: Application #: AS340419706
Better Living Bradford
807 Bradford Dr.
Belding, MI 48809

Dear Mr. Rutaramirwa:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 6 is issued.

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 (517) 335-5985.

Sincerely,

A handwritten signature in black ink, appearing to read "Amanda Blasius".

Amanda Blasius, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS340419706
Applicant Name:	BETTER LIVING AFC LLC
Applicant Address:	448 Van Allen St Se Grand Rapids, MI 49548
Applicant Telephone #:	(480) 570-4843
Licensee Designee:	Juvenal Rutaramirwa
Administrator:	Nkusi Patrick
Name of Facility:	Better Living Bradford
Facility Address:	807 Bradford Dr. Belding, MI 48809
Facility Telephone #:	(480) 570-4843
Application Date:	07/08/2025
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODOLOGY

07/08/2025	Enrollment
07/08/2025	PSOR on Address Completed
07/08/2025	Application Incomplete Letter Sent AFC100, 1326 (No FPs)
07/08/2025	Contact - Document Sent- forms sent
08/01/2025	Contact - Document Received- 1326 and AFC-100.
08/01/2025	Comment- Enrollment might be ready to be transferred out to the field office.
08/04/2025	File Transferred To Field Office
08/05/2025	Application Incomplete Letter Sent
10/17/2025	Application Complete/On-site Needed
10/20/2025	Inspection Completed On-site
10/20/2025	Inspection Completed-BCAL Sub. Compliance
10/21/2025	Application Incomplete Letter Sent
02/26/2026	Application complete
02/26/2026	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Better Living Bradford AFC LLC is a ranch style home located within a residential subdivision of Belding and in the township of Otisco. Shopping areas, parks and churches are within 1.5 miles of the home. Parking is available within the driveway or on the street in front of the home. Due to the facility's location, it utilizes both public water and public sewage systems.

Better Living AFC LLC is leasing the property at 807 Bradford from property owner, Seth Gasinzira. A copy of the lease has been received which included permission for facility to operate as an Adult Foster Care facility on the property and for Licensing and Regulatory Affairs to inspect the property.

The home offers living space on the main level, with a finished basement that will not be utilized by residents. The front of the home offers a porch for residents to sit and enjoy

the outdoors. When entering the main door, one will enter into a living room that contains a couch and chairs. To the left of the living room is a hallway that leads to three resident bedrooms and two full resident bathrooms. Off from the living room is a dining room that contains a table that seats six. The dining room opens to the full kitchen. The full kitchen has a countertop that offers additional seating. On the other side of the kitchen is another sitting room, which contains the medication cart and a fireplace that will not be used. Off from this sitting room is another resident bedroom, a door that leads to the two-car garage and a door that leads to the finished basement. Within the garage is a door that leads to the front porch. The finished basement will be used only for storage or for staff meetings. The facility is not wheelchair accessible and cannot accept residents who require the regular use of a wheelchair.

The backyard of the home is fully fenced with a gate on the north side. The backyard contains a deck, patio, an in-ground pool and a grassy area. The in-ground pool area is completed enclosed by a second fence that is wooden and which prevents residents from entering the pool. At this time the licensee designee, does not plan to make the pool available for recreational use.

The gas furnace and gas hot water heater, in addition to the gas washer and dryer, are located in the facility's basement. A 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware is located at the top of the stairs to create floor separation. The facility's clothes dryer is vented to the outside using permanent metal duct work.

The facility is equipped with a wireless interconnected smoke detection system identified as Kiddie P4010DSC-W with battery backup, which was installed by a licensed electrician and is fully operational. The smoke alarms were inspected on 01/30/2026 and determined to be in the correct locations, interconnected, and functioning properly. Additionally, the facility's electrical system was inspected on 9/12/2025 and determined to be fully functioning and in good condition.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	11' X 8' 11"	98 square feet	1
2	12' X 11'	132 square feet	2
3	14'5" X 13'9"	198 square feet	2
4	11'7" X 15'3"	176 square feet	1

The living, dining, and sitting room areas measure a total of 634 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, it is concluded that this facility can accommodate six (6) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Admission and discharge policies, program statement, refund policy, personnel policies, emergency preparedness plans, standard procedures, and a visitation policy that addresses overnight visitors were reviewed and accepted as written.

The applicant intends to provide 24-hour supervision, protection and personal care to six (6) male or female ambulatory adults whose diagnosis is developmentally disabled or mentally impaired, in the least restrictive environment possible.

At Better Living Bradford they are dedicated to empowering residents to participate within the broader community and live meaningful lives. Their approach is comprehensive and individualized, promoting independence through engagement in everyday activities aligned with each resident's abilities. These include dressing and grooming, practicing social etiquette, grocery shopping, managing personal finances and navigating public transportation. Their goal is to foster confidence, autonomy, and personal growth—ensuring that each resident leads a fulfilling and meaningful life.

If required, behavioral intervention and crisis intervention programs and personal behavior support plans will be developed and identified in the assessment plan for each resident's social, behavioral, and developmental needs and designed and implemented specific to each resident. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

The applicant intends to accept residents from local community mental health agencies, local Department of Health and Human Services, private pay individuals, and Adult Protective Services as referral sources.

The applicant will ensure the availability of transportation services as agreed upon in the Resident Care Agreement, but shall ensure immediate emergency transportation through use of a recognized available community service or vehicle that is owned by the licensee, administrator, or direct care staff on duty. The applicant will provide or arrange transportation for residents.

The applicant will make provisions for a variety of leisure and recreational equipment. It is the intent of the applicant to utilize local community resources including libraries, local museums, shopping centers, and local parks for additional entertainment and leisure activities.

C. Applicant and Administrator Qualifications

The applicant is Better Living AFC, L.L.C., which is a "Domestic Limited Liability Company", was established in Michigan, on 05/05/2023. The applicant has

acknowledged sufficient financial resources to provide for the adequate care of the residents. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The members of Better Living AFC, L.L.C. have submitted documentation appointing Juvenal Rutaramirwa as Licensee Designee for this facility and Nkusi Patrick as the Administrator of the facility.

A licensing record clearance request was completed with no LEIN convictions recorded for licensee designee. The licensee designee submitted a medical clearance with a statement from a physician documenting Juvenal Rutaramirwa's good health, dated 02/26/2026.

Administrator, Nkusi Patrick also submitted a medical clearance with a statement from a physician documenting Nkusi Patrick's good health, dated 8/19/2025.

The licensee designee and administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. The licensee designee, Mr. Rutaramirwa highest level of education is from Western Michigan University and obtained a Bachelor of Business Administration in December, 2024. Mr. Rutaramirwa is currently the licensee designee for three AFC homes in Kent County. He became the licensee designee for the first home on 06/24/2024. Prior to becoming a licensee designee, he was a resident assistant for residents with mental illness, developmentally disabled and aged from 2022-2024.

The administrator of the home, Nkusi Patrick has a high school diploma from 2018 and attended two years at Grand Rapids Community College for Manufacturing and Applied Technology in 2019. Mr. Patrick has been a direct support professional since 2023 for residents with mental illness, developmental disabilities and physical disabilities. In 2024, he became the co-owner of two licensed AFC's in Kent County and is currently the home manager of one of them.

The staffing pattern for the original license of this 6 bed facility is adequate and includes a minimum of 1 staff to 6 residents per shift. The applicant acknowledges that the 1-to-6 staff to resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents. The applicant has indicated that direct care staff will be awake during sleeping hours. The applicant acknowledged that at no time will this facility rely on "roaming" staff or other staff that are on duty and working at another facility to be considered part of this facility's staff to resident ratio or expected to assist in providing supervision, protection, or personal care to the resident population. The applicant acknowledges an understanding of the qualifications, suitability, and training requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff to resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, “direct access” to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to be maintained in each employee’s record to demonstrate compliance. The applicant acknowledges their responsibility to obtain all required good moral character, medical, and training documentation and signatures that are to be completed prior to each direct care staff or volunteer working directly with residents. In addition, the applicant acknowledges their responsibility to maintain all required documentation in each employee’s record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee’s record.

The applicant acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee designee can administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The applicant acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care. The applicant acknowledges their responsibility to obtain the required written assessment plan, resident care agreement, and health care appraisal forms and signatures that are to be completed prior to, or at the time of each resident’s admission to the home as well as updating and completing those forms and obtaining new signatures for each resident on an annual basis or as needed. The applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and follow the retention schedule for all of the documents that are required to be maintained within each resident’s file.

The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledges recording each resident’s funds and itemized transactions including payment for services. The applicant acknowledges this document will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the resident’s personal money transactions that have been agreed to be managed by the applicant.

The applicant acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. The applicant indicated that it is their intent to achieve and maintain compliance with these requirements.

The applicant acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

The applicant acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

The applicant acknowledges that residents with mobility impairments may only reside on the main floor of the facility.

D. Rule/Statutory Violations

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home with a capacity of six residents.



02/27/2026

Amanda Blasius
Licensing Consultant

Date

Approved By:



02/27/2026

Dawn N. Timm
Area Manager

Date