



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

March 26, 2026

Stephen Forkpah  
Kingdom Rest Center, LLC  
7174 Martin Avenue SE  
Grand Rapids, MI 49548

RE: License #: AM410418653  
Investigation #: 2026A0579028  
Kingdom Rest Center, LLC

Dear Stephen Forkpah:

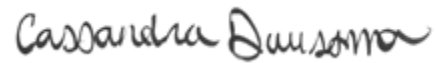
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

If you desire technical assistance in addressing these issues, please contact me. In any event, the corrective action plan is due within 15 days.

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 (616) 356-0100.

Sincerely,

A handwritten signature in cursive script that reads "Cassandra Duursma".

Cassandra Duursma, Licensing Consultant  
Bureau of Community and Health Systems  
350 Ottawa, N.W., Unit 13  
Grand Rapids, MI 49503  
(269) 615-5050

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM410418653
<b>Investigation #:</b>	2026A0579028
<b>Complaint Receipt Date:</b>	03/18/2026
<b>Investigation Initiation Date:</b>	03/20/2026
<b>Report Due Date:</b>	05/17/2026
<b>Licensee Name:</b>	Kingdom Rest Center, LLC
<b>Licensee Address:</b>	7174 Martin Avenue SE, Grand Rapids, MI 49548
<b>Licensee Telephone #:</b>	(616) 323-4379
<b>Administrator:</b>	Stephen Forkpah
<b>Licensee Designee:</b>	Stephen Forkpah
<b>Name of Facility:</b>	Kingdom Rest Center, LLC
<b>Facility Address:</b>	7174 Martin Avenue SE, Grand Rapids, MI 49548
<b>Facility Telephone #:</b>	(616) 323-4379
<b>Original Issuance Date:</b>	04/18/2025
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	10/18/2025
<b>Expiration Date:</b>	10/17/2027
<b>Capacity:</b>	10
<b>Program Type:</b>	PHYSICALLY HANDICAPPED/ MENTALLY ILL/ DEVELOPMENTALLY DISABLED/ ALZHEIMERS/ AGED/ TRAUMATICALLY BRAIN INJURED

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
There is an untreated ant infestation at the home.	No
Residents are not provided with three nutritionally balanced meals.	No
There is no menu posted or followed in the home.	Yes
Additional Findings	Yes

**III. METHODOLOGY**

03/18/2026	Special Investigation Intake 2026A0579028
03/20/2026	Special Investigation Initiated - Letter Marques McLemore, APS
03/20/2026	APS Referral
03/25/2026	Contact- Face to Face Resident A, Resident B, Estella Tamungang, Direct Care Worker
03/25/2026	Contact- Document Received Stephen Forkpah, Licensee Designee
03/25/2026	Exit Conference Stephen Forkpah, Licensee Designee

**ALLEGATION:** There is an untreated ant infestation at the home.

**INVESTIGATION:** On 3/18/26, I received this referral which alleged there is an untreated ant infestation at the home.

On 3/20/26, I contacted Adult Protective Services (APS) worker Marques McLemore due to having previous contact with Mr. McLemore at Kingdom Rest Center. He advised that APS is not currently involved at the home and confirmed the allegations do not relate to matters APS would investigate.

On 3/25/26, I completed an unannounced on-site investigation at the home. Interviews were completed with Resident A and direct care worker (DCW) Estella Tamungang. Resident B was observed but could not engage in interviewing due to being non-verbal. It was reported the other residents in the home were in the community.

Ms. Tamungang reported Resident A and his guardian informed her that they observed ants in the home a few weeks ago. She stated she immediately told

licensee designee Stephen Forkpah and he immediately sought professional treatment. She stated the home was treated inside and out approximately a week ago, however Resident A reported seeing ants in his room again so Mr. Forkpah contacted the company to treat the home again. She stated the company reported they will treat the home again and a putty will be applied at the foundation to prevent ants from entering.

Resident A was spoken to in his room. Two very small living ants were observed walking near the wall near Resident A's bed. A trap with numerous exterminated ants was observed located in the same area.

Resident A reported he dislikes the ants in his room. He confirmed he reported there were ants in her room and Mr. Forkpah responded by having a professional company treat his room. He reported the treatment did not work but he believes the home will be treated again.

On 3/25/26, I contacted Mr. Forkpah to request proof of professional treatment for the ants. Mr. Forkpah sent me a receipt from Aptive Environmental pest control confirming treatment on 3/17/26.

<b>APPLICABLE RULE</b>	
<b>R 400.645</b>	<b>Environmental health.</b>
	<b>(6) An insect, rodent, or pest control program must be maintained and carried out in a manner that continually protects the health of residents.</b>
<b>ANALYSIS:</b>	<p>Ms. Tamungang, Resident A, and Mr. Forkpah reported the home was professionally treated for ants when Resident A reported there were ants in his room.</p> <p>A receipt was provided for pest control treatment of the home by Aptive Environmental on 3/17/26.</p> <p>Based on the interviews completed and documentation observed, there is insufficient evidence that a pest control program was not adequately maintained to manage the ant infestation in the home.</p>
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:** Residents are not provided with three nutritionally balanced meals.

**INVESTIGATION:** On 3/18/26, I reviewed the referral which alleged that DCWs pick-

up fast-food sandwiches for residents and they do not eat balanced meals.

Ms. Tamungang reported she prepares breakfast, lunch, and dinner for the residents in the home. She stated she does not purchase fast food meals for residents. She stated there is a menu in the home but acknowledged she does not follow it because it is too challenging to meet the needs of the four residents in the home with one menu. She stated Resident A cannot chew well so he needs softened food and Resident B has diabetes, but does not have a physician ordered diet, so she must modify the main meal to meet Resident B's needs too. She stated it is easier at this time to make what she knows each resident will eat. She stated she is attempting to redo the menu so it includes foods that residents eat and does not rely on so many processed foods. She stated she ensures residents receive three meals per day and she aims to make the meals nutritionally balanced.

I observed limited food in the kitchen of the home. Ms. Tamungang reported there was a resident who was intentionally disruptive in the kitchen overnight and would prepare an entire family sized package of french fries for himself, eat a few, and throw the rest away so they were wasted. She stated due to this; she brings up only what is needed for meals for storage in the kitchen. She stated there are two freezers and a small refrigerator in the basement of the home.

I observed two large deep freezers in a storage room in the basement of the home. They contained numerous packages of frozen meats, vegetables, prepared meals, sandwiches, and bread. In the refrigerator, I observed jam and a package of pears. In the closet, I observed packaged grains and canned proteins. I inquired about limited fruit in the home and Ms. Tamungang stated Resident B primarily only consumes pears. She stated Resident A and Resident C like fruit so apples and bananas will be purchased for them to keep in their room and consume as they like.

Ms. Tamungang stated Mr. Forkpah or another DCW will do a large grocery shopping trip monthly and purchase perishable items weekly. She stated she prefers to go shopping for the monthly groceries to ensure the home is well stocked with nutritionally balanced items and not processed items as residents seem to eat the meals she makes when the items are not canned.

Resident A struggled to engage with interviewing. He reported he is upset that he has lost so much weight and does not recognize himself since he has gone into AFC placements, not just this placement but others he has lived at as well. He stated he has only been served rice at this home and at his previous placement but he does not like rice unless it is covered in gravy, although he has tried eating rice with sugar on it. Resident A denied receiving three meals daily. He denied receiving protein, vegetables, fruits, or dairy products at this home. He advised that DCWs purchase McDonald's breakfast sandwiches for him but they are cold inside so he does not eat them. He reported he did not eat lunch today. He stated the only meal he typically eats is dinner, but he does not like the food in this home because he was a chef prior to going into AFC care and the DCWs in this home do not know how to

cook. Resident A often became distracted discussing how he does not like his guardian or living in an AFC home and would like to move to a nursing home but his guardian will not move him. He seemed to provide only “no” or negative answers because he was agitated.

I observed numerous packages of Jimmy Dean breakfast sandwiches in the deep freezers in the home. I believe these are the sandwiches Resident A was referring to when discussing the McDonald’s sandwiches that are purchased for him.

<b>APPLICABLE RULE</b>	
<b>R 400.663</b>	<b>Nutrition; adoption by reference.</b>
	<b>(1) A licensee shall provide daily a minimum of 3 nutritious meals to residents.</b>
<b>ANALYSIS:</b>	<p>I observed sufficient food consistent with a nutritionally balanced diet, aside from limited fruit which is reportedly limited in meals due to Resident B’s nutritional needs. Ms. Tamungang reported one large grocery shopping order is done monthly and perishable items are purchased weekly.</p> <p>Ms. Tamungang reported she is currently preparing individual meals that she knows residents will eat. She is working to create a new menu due to residents not preferring the menu that was utilized in the home previously and the menu needing to be tailored to individual resident needs.</p> <p>Resident A became agitated when discussing the food in the home and distracted with discussing how he does not like his guardian and wants to live in a nursing home. His answers to questions regarding food were all negative. He advised that he only eats dinner at the home and denied receiving nutritionally balanced meals at this home or previous AFC placements.</p> <p>Based on the interviews completed and observations made, there is insufficient evidence that residents are not provided with three nutritious meals daily.</p>
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

**ALLEGATION:** There is no menu posted or followed in the home.

**INVESTIGATION:** On 3/18/26, I reviewed the referral which alleged there is no menu in the home.

On 3/18/26, Ms. Tamungang reported there is a menu in the home but acknowledged she does not follow it because residents will not eat the food she makes when she follows the menu and the menu does not meet the needs of Resident A and Resident B. She stated instead she prepares three nutritionally balanced meals specific to each resident's need and preference. She stated she is working to create a new menu to better meet residents' needs.

Ms. Tamungang pulled pages of a rotating menu out of binder in the home. The pages appeared clean and crisp, indicating they were not being used. No menu was observed posted in the home. Ms. Tamungang denied documenting what residents eat each day on a substitution list.

Resident A reported he has never seen a menu in this home and does not believe there is one.

<b>APPLICABLE RULE</b>	
<b>R 400.663</b>	<b>Nutrition; adoption by reference.</b>
	<b>(6) Menus, excluding special diets, must be written at least 1 week in advance and posted. Any change or substitution must be documented.</b>
<b>ANALYSIS:</b>	<p>No menu was posted in the home. No substitution list documenting what residents ate was found in the home.</p> <p>Ms. Tamungang acknowledged she is not following a menu and is currently making specific, nutritionally balanced meals for each resident because they would not eat what was on the menu. She stated she is creating a menu that better meets the needs of residents.</p> <p>Resident A denied seeing a menu in the home.</p> <p>Based on the interviews completed and observations made there is sufficient evidence that menus are not written a week in advance and posted and that any changes or substitutions are not documented.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ADDITIONAL FINDING**

**INVESTIGATION:** On 3/25/26, I observed the cabinet containing the kitchen trash to have a missing door. The trash container did not have a lid and trash was piling in the container.

<b>APPLICABLE RULE</b>	
<b>R 400.645</b>	<b>Environmental health.</b>
	<b>(5) Garbage and rubbish that contains food waste must be maintained in leakproof, non-absorbent containers. Containers must be covered with tight-fitting lids and removed from the facility daily and from the premises at least weekly.</b>
<b>ANALYSIS:</b>	I observed a trash container without a lid, piled with trash in the kitchen of the home.  Based on the observation made, there is sufficient evidence that the trash container in the kitchen of the home was not covered and does not have a tight-fitting lid.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 3/25/26, I completed an exit conference with Mr. Forkpah who did not dispute my findings or recommendations.

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable plan of corrective action, I recommend the status of the license remains the same.

*Cassandra Duursma*

03/25/2026

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Cassandra Duursma  
Licensing Consultant

\_\_\_\_\_  
Date

Approved By:

*Jerry Hendrick*

03/26/2026

\_\_\_\_\_  
Jerry Hendrick  
Area Manager

\_\_\_\_\_  
Date