



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 15, 2026

Julie King
7212 S. Michigan Ave
Rothbury, MI 49452

RE: License #: AS640418185
Investigation #: 2026A0340029
Sunny Knoll North

Dear Ms. King:

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.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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,



Rebecca Piccard, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 446-5764

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS640418185
Investigation #:	2026A0340029
Complaint Receipt Date:	02/27/2026
Investigation Initiation Date:	02/27/2026
Report Due Date:	04/28/2026
Licensee Name:	Julie King
Licensee Address:	7212 S. Michigan Ave Rothbury, MI 49452
Licensee Telephone #:	(231) 894-0049
Administrator:	Julie King
Licensee Designee:	Julie King
Name of Facility:	Sunny Knoll North
Facility Address:	6699 A North Oceana Dr. Hart, MI 49420
Facility Telephone #:	(231) 301-2414
Original Issuance Date:	08/14/2024
License Status:	REGULAR
Effective Date:	02/14/2025
Expiration Date:	02/13/2027
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL, AGED

II. ALLEGATION(S)

	Violation Established?
Workforce background check shows no staff.	Yes

III. METHODOLOGY

02/27/2026	Special Investigation Intake 2026A0340029
02/27/2026	APS Referral Not appropriate for APS
02/27/2026	Special Investigation Initiated - Letter Julie King
02/27/2026	Exit Conference Licensee Julie King

ALLEGATION: Workforce background check shows no employees.

INVESTIGATION: On February 27, 2026, a special investigation was initiated after I received an email from Area Manager Jerry Hendrick on February 5, 2026, that included a spreadsheet showing AFC homes which had no employees listed on the Workforce Background Check (WBC) website. Julie King had four homes listed on this spreadsheet. I confirmed on the WBC site that there were still no staff listed under this home.

Prior to the complaint, on February 6, 2026, I contacted Ms. King via email to inform her of the deficiency and that it needed to be corrected or she could face a citation. I explained in this email that if a staff person works at multiple homes as I know her staff to do, that they must be listed under each home's license. I also informed her this was not a new requirement and that she would have received information regarding WBC upon opening a new license to operate an AFC Home.

Ms. King requested training on how to navigate the WBC website and was provided the training on February 10, 2026.

On February 27, 2026, the home still did not have any staff listed on the WBC website. I contacted Ms. King and provided her the opportunity to ask questions and explain a reason for the delay in completing the required documentation. I suggested she can also call the number listed on the WBC website if she has trouble updating her profile. She indicated that she has been in contact with personnel at the WBC website and that all her staff need to be re-fingerprinted for each home.

As of this date I have not received a Corrective Action Plan. Some names have been added to the profile of the home on the WBC website, however, it is unknown if it is complete.

APPLICABLE RULE	
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.

ANALYSIS:	Ms. King did not maintain an updated WBC profile on her employees. All employees had been listed under a single, different AFC home on the WBC website. Ms. King was given opportunities to correct this deficiency and did not. Ms. King was informed that if she did not correct this deficiency she would face a citation and she still did not update the homes employee background checks.
CONCLUSION:	VIOLATION NOT ESTABLISHED

On February 27, 2026, I conducted an exit conference with Ms. King. After discussing the ongoing request for the WBC website to be updated, I requested a Corrective Action Plan from Ms. King and asked if she had any questions, which she did not.

IV. RECOMMENDATION

Upon receipt of an acceptable Corrective Action Plan, I recommend no change to the current license status.



April 15, 2026

Rebecca Piccard
Licensing Consultant

Date

Approved By:



April 15, 2026

Jerry Hendrick
Area Manager

Date