GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 21, 2026

Candace Yow
Michigan AFC Inc
715 S Michigan
Saginaw, MI 48602

RE: License #: AM730009520
Reis AFC Home
715 S Michigan
Saginaw, MI 48602

Dear Candace Yow:

Attached is the Renewal Licensing Study Report for the facility referenced above. Your license will be renewed upon the completion of the open Special Investigation. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- An on-site inspection will be conducted.

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 (517) 643-7960.

Sincerely,

Sabrina McGowan

Sabrina McGowan, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 835-1019

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

I. IDENTIFYING INFORMATION

License #:	AM730009520
Licensee Name:	Michigan AFC Inc
Licensee Address:	715 S Michigan Saginaw, MI 48602
Licensee Telephone #:	(810) 444-6781
Licensee/Licensee Designee:	Candace Yow
Administrator:	Candace Yow
Name of Facility:	Reis AFC Home
Facility Address:	715 S Michigan Saginaw, MI 48602
Facility Telephone #:	(810) 444-6781
Original Issuance Date:	11/01/1989
Capacity:	12
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/16/2026

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed 1
No. of residents interviewed and/or observed 10
No. of others interviewed 1 Role: Licensee Designee

- 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. No IR's to review.
- Corrective action plan compliance verified? Yes ☒ CAP date/s and rule/s: 07/30/2024-301(10), 315(6), 312(3), 203(1)(a), and 403(1) N/A ☐
- Number of excluded employees followed-up? 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 400.645 **Environmental health.**

(8) A habitable room must have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. From April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes must be supplied with a standard screen of not less than 16 mesh.

Vent fan in the bathroom on the main level is not working. Window in the bathroom upstairs is painted shut.

R 400.647 **Safety and maintenance of premises.**

(1) A facility must be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

Kitchen ceiling light needs cleaning, i.e. dead bug removal**.**

R 400.657 **Bedrooms.**

(4) Interior doorways of a resident bedroom must be equipped with a side-hinged, permanently mounted door that is equipped with positive-latching, non-locking-against-egress hardware.

3 doorknobs in the home are not equipped with positive-latching, non-locking-against-egress hardware.

A corrective action plan was requested and approved on 07/16/2026. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

Contingent upon the completion of the open Special Investigation, renewal of the license is recommended.

Sabrina McGowan July 21, 2026

_____

Sabrina McGowan Date
Licensing Consultant