GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 27, 2026

Karen Hoornstra
P.O. Box 362
Reese, MI 48757

RE: License #: AM730009493
Investigation #: 2026A0576041
Hoornstra AFC Home

Dear Karen Hoornstra:

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.
- Be signed and dated.

If you desire technical assistance in addressing these issues, please feel free to 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 (517) 643-7960.

Sincerely,

Christina Garza, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 240-2478

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM730009493
Investigation #:	2026A0576041
Complaint Receipt Date:	06/04/2026
Investigation Initiation Date:	06/08/2026
Report Due Date:	08/03/2026
Licensee Name:	Karen Hoornstra
Licensee Address:	10015 E Washington, Reese, MI 48757-0362
Licensee Telephone #:	(989) 753-1368
Administrator:	Theresa Lewis
Licensee Designee:	N/A
Name of Facility:	Hoornstra AFC Home
Facility Address:	704 S Michigan, Saginaw, MI 48602
Facility Telephone #:	(989) 790-4679
Original Issuance Date:	04/01/1985
License Status:	REGULAR
Effective Date:	09/12/2025
Expiration Date:	09/11/2027
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED, MENTALLY ILL, DEVELOPMENTALLY DISABLED, AGED

II. ALLEGATION(S)

	Violation Established?
On 05/27/2026, Resident A was observed with swollen, painful feet and poor hygiene, including hardened feces and strong odor. Concerns about possible neglect at the AFC home.	No
Additional Findings	Yes

III. METHODOLOGY

06/04/2026	Special Investigation Intake 2026A0576041
06/04/2026	APS Referral Referral received from APS.
06/08/2026	Special Investigation Initiated - Letter Sent email to Jessire Ramos, Saginaw County Adult Protective Services (APS)
06/08/2026	Contact - Document Received Email received from Jessire Ramos
06/25/2026	Inspection Completed On-site Interviewed Staff Denise Parker and Resident A
07/09/2026	Contact - Telephone call made Interviewed Guardian A
07/09/2029	Contact - Telephone call made Left message for Case Manager Kimball Horton to return call
07/21/2026	Contact - Telephone call made Left message for Kimball Horton to return call
07/24/2026	Contact - Telephone call made Interviewed Kimball Horton
07/27/2026	Exit Conference

ALLEGATION:

On 05/27/2026, Resident A was observed with swollen, painful feet and poor hygiene, including hardened feces and strong odor. Concerns about possible neglect at the AFC home.

INVESTIGATION:

On June 8, 2026, I sent an email to Saginaw County Adult Protective Services (APS) Investigator Jessire Ramos regarding the status of her investigation. Investigator Ramos advised she did not substantiate abuse or neglect of Resident A. Investigator Ramos interviewed Resident A who reported he sometimes has accidents and cleans himself. Resident A does not ask staff for assistance when he is soiled. Resident A moved into the facility about one month ago and was taking a laxative daily which may have contributed to him having accidents. Staff contacted Resident A's doctor, and the medication was prescribed to as needed.

On June 25, 2026, I conducted an unannounced on-site inspection at Hoornstra AFC Home and interviewed Staff Denise Parker regarding the allegations. Staff Parker reported Resident A has resided at the home since May 7, 2026. Staff at Resident A's program called the home and reported Resident A soiled himself and had feces on his back. Staff picked up Resident A from program, and he took a shower when he returned home. According to Staff Parker, Resident A takes a shower every day. Staff Parker reported Resident A was previously prescribed a stool softener daily and he was having accidents. Resident A no longer takes the medication every day. Regarding Resident A's feet, Staff Parker reported Resident A fell in a snowbank last year. Resident A "waddles" and there is nothing wrong with his feet.

On June 25, 2026, I interviewed Resident A who came out of his bedroom to the dining area of the home. Resident A walked slowly and had socks on his feet. Resident A denied having any pain in his feet and his feet did not appear swollen. Resident A appeared neat and clean and had no discernable odor. Resident A reported he sometimes has accidents and he will shower. Resident A reported that if he needs help cleaning himself, he will ask staff for help. Resident A reported staff are nice and he denied any concerns.

On June 25, 2026, I reviewed Resident A's health care appraisal and AFC Assessment Plan. Resident A was noted to be fully ambulatory and "well-kept" at his appointment on May 12, 2026, with his doctor. Resident A requires staff assistance with toileting, bathing, grooming, and personal hygiene.

On July 9, 2026, I interviewed Resident A's guardian, Guardian A1 who reported he has not seen Resident A in the condition that is alleged. Historically, Resident A has had trouble keeping himself clean and may need assistance from staff. Guardian A1 has never known Resident A to be unclean or odorous. Guardian A1 denied any issues of hygiene when he visits Resident A.

On July 9, 2026, and July 21, 2026, I left a message for Resident A's Case Manager, Kimball Horton, to return call. On July 24, 2026, I interviewed Kimball Horton regarding the allegations. Case Manager Horton reported that Resident A may have had an accident on the way to program and soiled himself. Case Manager Horton visited Resident A at his home on July 17, 2026, and Resident A was fine. Staff are doing their job and Resident A reports that he is comfortable at home. When Case Manager Kimball visits with Resident A, he is not odorous and appears neat and clean. Case Manager Kimball reported there is nothing wrong with Resident A's feet. Resident A is top-heavy and walks slowly.

APPLICABLE RULE	
R 400.681	**Resident rights; licensee responsibilities.**
	(1) A resident shall be treated with dignity and respect, free from exploitation, and protected and safe.
ANALYSIS:	There were concerns that Resident A was being neglected at his home. Upon conclusion of investigative interviews and an unannounced on-site visit to the facility there is not a preponderance of evidence to conclude a rule violation. Resident A was interviewed at his home on June 25, 2026, and he was viewed to be clean and neat in appearance. Resident A walked slowly, however there did not appear to be any issues with his feet. Resident A's case manager and guardian were interviewed, and both denied any concerns regarding neglect of Resident A at his home. Staff Denisa Parker was interviewed and reported Resident A had an accident and soiled himself while at program. Upon the facility staff being notified, they picked up Resident A, and he was taken home to shower. It was reported that Resident A was on a medication that caused him to have accidents and Resident A subsequently discontinued that medication. There is not a preponderance of evidence to conclude Resident A is not being treated with dignity and respect or that he is not protected and safe.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

ADDITIONAL FINDINGS:

INVESTIGATION:

On June 25, 2026, I visited the facility and viewed Resident A's bedroom. I entered the home through the back entrance and upon entering the home I found the home to be odorous. When I entered Resident A's bedroom, I found the bedroom to also be odorous. Given the strong unpleasant odor, the home's housekeeping standard did not present as comfortable and clean.

APPLICABLE RULE	
R 400.647	**Safety and maintenance of premises.**
	(2) Home furnishings and housekeeping standards must present a comfortable, clean, and orderly appearance.
ANALYSIS:	On June 25, 2026, I visited the facility and viewed Resident A's bedroom. I entered the home through the back entrance and upon entering the home I found the home to be odorous. When I entered Resident A's bedroom, I found the bedroom to also be odorous. Given the strong unpleasant odor, the home's housekeeping standard did not present as comfortable and clean.
CONCLUSION:	**VIOLATION ESTABLISHED**

On July 27, 2026, I conducted an exit conference with administrator Theresa Lewis. I advised administrator Lewis of the findings of my investigation and that I would be requesting a corrective action plan for the cited rule violation.

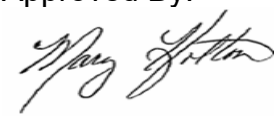
IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan no change in the license status is recommended.

7/27/2026

Christina Garza — Date
Licensing Consultant

Approved By:



7/27/2026

Mary E. Holton — Date
Area Manager