



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

July 27, 2022

Corey Husted  
Brightside Living LLC  
PO Box 220  
Douglas, MI 49406

RE: License #: AS410403030  
Investigation #: 2022A0467052  
Brightside Living - Cedar Springs

Dear Mr. Husted:

Attached is the Special Investigation Report for the above referenced facility. Due to the violation 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 the rule will be achieved.
- Who is directly responsible for implementing the corrective action for the violation.
- Specific time frames for the 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) 356-0183.

Sincerely,

A handwritten signature in cursive script that reads "Anthony Mullins".

Anthony Mullins, Licensing Consultant  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS410403030
<b>Investigation #:</b>	2022A0467052
<b>Complaint Receipt Date:</b>	07/26/2022
<b>Investigation Initiation Date:</b>	07/26/2022
<b>Report Due Date:</b>	09/24/2022
<b>Licensee Name:</b>	Brightside Living LLC
<b>Licensee Address:</b>	690 Dunegrass Circle Dr Saugatuck, MI 49453
<b>Licensee Telephone #:</b>	(614) 329-8428
<b>Administrator:</b>	Corey Husted
<b>Licensee Designee:</b>	Corey Husted
<b>Name of Facility:</b>	Brightside Living - Cedar Springs
<b>Facility Address:</b>	1880 18 Mile Rd NE Cedar Springs, MI 49319
<b>Facility Telephone #:</b>	(614) 329-8428
<b>Original Issuance Date:</b>	04/21/2020
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	10/21/2020
<b>Expiration Date:</b>	10/20/2022
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

**II. ALLEGATION(S)**

**Violation  
Established?**

The facility received a D-rating Environmental Health Inspection.	Yes
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**III. METHODOLOGY**

07/26/2022	Special Investigation Intake 2022A0467052
07/26/2022	Special Investigation Initiated - On Site
07/27/2022	Exit conference completed with licensee designee, Corey Husted.

**ALLEGATION: The facility received a D-rating environmental health inspection.**

**INVESTIGATION:** On 7/26/22, I reviewed the environmental health inspection report that was completed at the facility on 06/22/22. A D-rating is considered substantial non-compliance and therefore, prompting this special investigation. The concerns listed by the sanitarian are as follows: *'remove vegetation and small bushes from drain bed surface. A pump card for the septic tanks was not provided. Pump card was requested during inspection on 6/22/22 and again on 7/15/22 via email.'*

On 7/26/22, I made an unannounced onsite inspection to the facility. Upon arrival, I spoke to staff members Mary Thrush and Brandy Ryn. Ms. Thrush and Ms. Ryn denied having any knowledge of the environmental health inspection that was completed on 06/22/22. Therefore, they were unable to provide an update regarding the status of the corrective action plan. Both staff members stated that the owner/designee, Corey Husted was not present at the home. I informed them that I would follow-up with Mr. Husted via phone.

On 7/27/22, I spoke to Mr. Husted via phone. I explained the findings of the environmental health inspection that was completed on 06/22/22 by Josh Gekeler, sanitarian with the Kent County Health Department. Mr. Husted stated that he was aware that Mr. Gekeler needed a pump card for the septic tank and stated that he sent it to him via email on 07/22/22. However, Mr. Husted stated that he was not aware of the D-rating and the need to remove vegetation and small bushes from the drain bed surface. Mr. Husted stated that he never received the inspection report from Mr. Gekeler and only knew about the pump card because Mr. Gekeler emailed him about. Mr. Husted stated that he plans to contact Mr. Gekeler to receive a copy of the report and to address the concerns. Due to the facility receiving a D-rating, I explained to Mr. Husted that a corrective action plan is required. Mr. Husted stated that he understands and will take care of this. Mr. Husted agreed to consider this the exit conference and plans to send Mr. Gekeler and I a corrective action plan.

On 07/27/22, Mr. Husted called me and stated that he just received a copy of the revised report from Mr. Gekeler. The initial report was a D-rating due to not having the pump card. Per Mr. Husted, Mr. Gekeler has since updated the report to an A-rating. Mr. Husted sent me a copy of the revised report via email, which confirmed the A-rating.

<b>APPLICABLE RULE</b>	
<b>R 400.14401</b>	<b>Environmental health.</b>
	<b>(1) Private water systems shall be in compliance with R 325.10101 et seq. of the Michigan Administrative Code. A bacteriological report confirming water quality shall be required during the initial inspection and every 2 years thereafter. Group homes that use a community approved water system need not be in compliance with this requirement.</b>

<b>ANALYSIS:</b>	<p>The facility received a D-rating environmental health inspection on 06/22/22. Therefore, a preponderance of evidence exists to support the allegation.</p> <p>The owner/designee has since received a revised report from the county health department with an A-rating and plans to send a corrective action plan.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

Upon receipt of an acceptable corrective action plan, I recommend no change to the current license status.

*Anthony Mullins*

07/27/2022

Anthony Mullins  
Licensing Consultant

Date

Approved By:

*Jerry Hendrick*

07/27/2022

Jerry Hendrick  
Area Manager

Date