

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

April 30, 2024

Mary North Brookdale Grand Blanc AL 5080 Baldwin Road Holly, MI 48442

RE: License #: AH250236939

Brookdale Grand Blanc AL

5080 Baldwin Road Holly, MI 48442

Dear Mary North:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. Your license is renewed. It is valid only at your present address and is nontransferable.

Please review the enclosed documentation for accuracy and contact me with any questions. If I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (517) 284-9730.

Sincerely.

Claron & Clarm Aaron Clum, Licensing Staff

Bureau of Community and Health Systems

611 W. Ottawa Street

P.O. Box 30664

Lansing, MI 48909

(517) 230-2778

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH250236939	
Licensee Name:	Brookdale Senior Living Communities, Inc.	
Licensee Address:	Suite 2300	
	6737 West Washington St.	
	Milwaukee, WI 53214	
Licenses Telembone #	(44.4) 04.0 5000	
Licensee Telephone #:	(414) 918-5000	
Authorized Representative:	Mary North	
Administrator:	Heather Vahlbusch	
Name of Facility:	Brookdale Grand Blanc AL	
Facility Address.	5000 Doldwin Dood	
Facility Address:	5080 Baldwin Road	
	Holly, MI 48442	
Facility Telephone #:	(810) 953-7111	
Original Issuance Date:	10/01/1998	
Capacity:	78	
Program Type:	AGED	
3) p	1,1022	

II. METHODS OF INSPECTION

Date of On-site Inspection	(s): 04/04/2024		
Date of Bureau of Fire Ser	vices Inspection if applicable: 1	1/07/2023	
Inspection Type:	☐Interview and Observation☐Combination	⊠Worksheet	
Date of Exit Conference:	04/04/2024		
No. of staff interviewed and No. of residents interviewed No. of others interviewed	ed and/or observed	9 40	
Medication pass / sim	ulated pass observed? Yes ⊠	No ☐ If no, explain.	
 Medication(s) and medication records(s) reviewed? Yes ⋈ No ☐ If no, explain. Resident funds and associated documents reviewed for at least one resident? Yes ☐ No ⋈ If no, explain. Facility does not maintain resident funds Meal preparation / service observed? Yes ⋈ No ☐ If no, explain. 			
Fire drills reviewed? Yes ⊠ No □ If no, explain.			
Water temperatures checked? Yes ⊠ No ☐ If no, explain.			
 Corrective action plan SI#2022A1027007: 19 SI#2024A0585014: 19 	p? Yes IR date/s: N/A compliance verified? Yes 31(6),1932(1) - S#2023A10270321(1) pployees followed up? 4 N/A	CAP date/s and rule/s:	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

Renewal of the license is recommended.

The facility was found to be in substantial compliance with the public health code and administrative rules regulating home for the aged facilities.

IV. RECOMMENDATION

aron L. Clum	4/05/2023
Licensing Consultant	Date