

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

August 28, 2024

Kelly Kyllonen Clark Retirement Home 1551 Franklin Street, SE Grand Rapids, MI 49506-8203

RE: License #: AH410236767

Clark Retirement Home 1551 Franklin Street, SE

Grand Rapids, MI 49506-8203

Dear Licensee:

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. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (517) 241-1970.

Sincerely,

Lauren Wohlfert, Licensing Staff Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W.

Grand Rapids, MI 49503 (616) 260-7781

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AU440226767	
License #:	AH410236767	
Licensee Name:	Clark Retirement Community Inc.	
Licensee Address:	1551 Franklin SE	
	Grand Rapids, MI 49506	
Licensee Telephone #:	(616) 278-6704	
Administrator/Authorized	Kolly Kyllopop	
	Kelly Kyllonen	
Representative:		
	0.15.	
Name of Facility:	Clark Retirement Home	
Facility Address:	1551 Franklin Street, SE	
	Grand Rapids, MI 49506-8203	
Facility Telephone #:	(616) 452-1568	
Original Issuance Date:	12/25/1957	
Capacity:	107	
Program Type:	ALZHEIMERS	
	AGED	
	1	

II. METHODS OF INSPECTION

Date of On-site Inspection((s): 08/27/2024		
Date of Bureau of Fire Services Inspection if applicable: 08/15/2023			
Inspection Type:	☐Interview and Observation ☐Combination	⊠Worksheet	
Date of Exit Conference: (08/27/2024		
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed Role			
■ Medication pass / simulated 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. No resident funds held in trust Meal preparation / service observed? Yes ⋈ No ☐ If no, explain. 			
 Fire drills reviewed? Yes ☐ No ☒ If no, explain. Bureau of Fire Services reviews fire drills, disaster plans were reviewed with staff Water temperatures checked? Yes ☒ No ☐ If no, explain. 			
 Corrective action plan Special Investigation F rules 1933(1) and 192 7/24/24 rule 2024A10 	p? Yes ☐ IR date/s: N/A compliance verified? Yes ☐ Report (SIR) number 2023A1021(1)(b) and SIR number 2024A10050	CAP date/s and rule/s: 1009 CAP dated 12/15/22 1010050 CAP dated	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

I recommend renewal of the facility's license.

08/28/2024

Date

Licensing Consultant

Jamen Wohlfert