



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

May 13, 2025

Jennifer Gellinger  
Quincy Place Senior Living  
12300 Quincy Street  
Holland, MI 49424

RE: License #: AH700408748  
**Quincy Place Senior Living**  
**12300 Quincy Street**  
**Holland, MI 49424**

Dear Jennifer Gellinger:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates for each 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 licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. Please review the enclosed documentation for accuracy and contact me with any questions. In the event I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (517) 335-5985.

Sincerely,

Julie Viviano, Licensing Staff  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH700408748
<b>Licensee Name:</b>	Holland Senior Living, LLC
<b>Licensee Address:</b>	802 East 86th Street Indianapolis, IN 46240
<b>Licensee Telephone #:</b>	(317) 669-8404
<b>Authorized Representative:</b>	Jennifer Gellinger
<b>Administrator/Licensee Designee:</b>	Laura Kelling
<b>Name of Facility:</b>	Quincy Place Senior Living
<b>Facility Address:</b>	12300 Quincy Street Holland, MI 49424
<b>Facility Telephone #:</b>	(616) 834-0220
<b>Original Issuance Date:</b>	09/06/2023
<b>Capacity:</b>	102
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/12/2025

Date of Bureau of Fire Services Inspection if applicable: BFS – A; 6/21/2023

Inspection Type: ☐ Interview and Observation ☒ Worksheet  
☐ Combination

Date of Exit Conference: 5/12/2025

No. of staff interviewed and/or observed 16

No. of residents interviewed and/or observed 39

No. of others interviewed 0 Role N/A

- 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. The home does not keep resident funds in trust.
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.
- Fire drills reviewed? Yes ☐ No ☒ If no, explain.  
Reviewed disaster plans along with interviewed staff on policies and procedures.
- Water temperatures checked? Yes ☒ No ☐ If no, explain.
- Incident report follow-up? Yes ☒ IR date/s: N/A ☐
- Corrective action plan compliance verified? Yes ☐ CAP date/s and rule/s: N/A
- Number of excluded employees followed up? 0 N/A ☒

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

<b>R 325.1923</b>	<b>Employee's health.</b>
	<b>(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure.</b>
<b>ANALYSIS:</b>	Review of 10 employee records revealed that while employees had tuberculosis screenings, 4 of the employee tuberculosis screenings were completed outside the 10 days of hire. New employees must be screened within 10 days of hire.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>R 325.1932</b>	<b>Resident medications.</b>
	<b>(2) The giving, taking, or applying of prescription medications shall be supervised by the home in accordance with the resident's service plan.</b>
<b>ANALYSIS:</b>	It was observed during the medication administration of Resident A that Resident A's medications were being crushed by staff and placed in pudding for Resident A to swallow. At the time of the medication administration, the physician order was not in the medication administration record system to crush medications or to place the crushed medications in a palatable substance for Resident A. Medications must be given in the manner in which they are prescribed and all medication orders must be present at the time of administration in the resident's medication administration record for staff to correctly administer.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>R 325.1975</b>	<b>Laundry and linen requirements.</b>
	<b>(1) A new construction, addition, major building change, or conversion after November 14, 1969 shall provide all of the following:</b> <b>(a) A separate soiled linen storage room.</b>

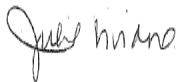
	<b>(b) A separate clean linen storage room.</b>
<b>ANALYSIS:</b>	Inspection revealed clean and soiled linens mixed together in the memory care unit laundry room. Clean linens were found on the floor of the clean linen room on hallway 124 as well. Clean and soiled linens cannot be mixed or stored together. Clean linens cannot touch the floor or be stored on the floor. This presents a risk of cross contamination.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>R 325.1976</b>	<b>Kitchen and dietary.</b>
	<b>(13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.</b>
<b>ANALYSIS:</b>	Review of dishwasher sanitization records reveal missing or blank entries for 2/28/2025, 5/9/2025 to 5/11/2025. It could not be determined if the dishwasher was tested thoroughly to ensure cleanliness and sanitization of dishware and utensils due to the incomplete and/or blank entries.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>R 325.1979</b>	<b>General maintenance and storage.</b>
	<b>(3) Hazardous and toxic materials shall be stored in a safe manner.</b>
<b>ANALYSIS:</b>	Inspection revealed hazardous and toxic chemicals were stored in an unlocked lower main area kitchenette cabinet, in the activity's cabinets, and memory care unit cabinet. Sharp items were found unsecured in the activities common area. The items were easily accessible to anyone in the facility, and this presents a potential risk of ingestion, harm, and/or injury to residents in the home with impaired cognition and/or function.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

#### IV. RECOMMENDATION

Receipt of an acceptable corrective action plan is requested and due by 5/30/2025.



5/13/2025

Date

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Licensing Consultant