GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 24, 2026

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

RE: License #: AM410403710
Investigation #: 2026A0583045
Brightside Living - Mistywood

Dear Mr. Husted:

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.
- 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) 356-0100.

Sincerely,

Toya Zylstra, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 333-9702

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM410403710
Investigation #:	2026A0583045
Complaint Receipt Date:	07/02/2026
Investigation Initiation Date:	07/02/2026
Report Due Date:	08/01/2026
Licensee Name:	Brightside Living LLC
Licensee Address:	690 Dunegrass Circle Dr Saugatuck, MI 49453
Licensee Telephone #:	(614) 329-8428
Administrator:	Corey Husted
Licensee Designee:	Corey Husted
Name of Facility:	Brightside Living - Mistywood
Facility Address:	3371 Mistywood St SE Caledonia, MI 49316
Facility Telephone #:	(616) 803-0476
Original Issuance Date:	05/01/2020
License Status:	REGULAR
Effective Date:	11/01/2024
Expiration Date:	10/31/2026
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED, DEVELOPMENTALLY DISABLED, MENTALLY ILL, AGED

II. ALLEGATION(S)

	Violation Established?
Facility staff administered Resident A discontinued medications.	No
Additional Findings	Yes

III. METHODOLOGY

07/02/2026	Special Investigation Intake 2026A0583045
07/02/2026	APS Referral
07/02/2026	Special Investigation Initiated - Letter
07/06/2026	Inspection Completed On-site
07/24/2026	Exit Conference Licensee Designee Corey Husted

ALLEGATION: Facility staff administered Resident A discontinued medications.

INVESTIGATION: On 07/01/2026 the above complaint allegation from Network 180 was received via the online complaint form and assigned for my investigation. The complaint alleged, “AFC home staff were administering medications that had been discontinued to a resident after her hospital discharge over the course of 2 months before Network180 was made aware”.

On 07/01/2026 I emailed the complaint allegation to Adult Protective Services via the online portal.

On 07/06/2026 I completed a TEAMS virtual meeting with Recipient Rights staff Melissa Gekeler and Network 180 nurse Jenifer VanWyngarden. Ms. VanWyngarden stated that Resident A was admitted to Bronson hospital from 04/11/2026 until 04/23/2026. She stated that hospital staff discontinued Resident A’s Lithium, Fluvoxamine, Trazadone PRN, and Glycopyrrolate PRN upon her 04/23/2026 discharge. Ms. VanWyngarden stated that facility staff were not supplied a separate “DC order” but rather an updated medication list located in Resident A’s discharge paperwork. Ms. VanWyngarden stated that she received a Lithium and Trazadone refill request from Guardian pharmacy staff on 06/25/2026 and learned from speaking to facility staff that Resident A continued to be administered the medications despite the medications being discontinued by hospital staff on 04/23/2026. Ms. VanWyngarden stated that Guardian Pharmacy did not receive a discontinuation order from Bronson hospital on 04/23/2026.

On 07/06/2026 I completed an unannounced onsite investigation at the facility and privately interviewed staff Donna Rodriguez and Resident A. Ms. Rodriquez stated that the facility did not receive a discontinuation order from Bronson Hospital to stop the administration of Lithium, Fluvoxamine, Trazadone PRN, and Glycopyrrolate PRN on 04/23/2026 and continued to administer these medications until a discontinuation order was received on 06/25/2026 from Network 180 medical staff.

While onsite I observed Resident A's Medication Administration Record from 03/01/2026 until current. Resident A's MAR indicates that Resident A was prescribed Fluvoxamine 50 MG from 03/12/2026 until 06/25/2026, Lithium 300 MG from 03/12/2026 until 06/25/2026, Trazadone 50 MG PRN from 03/12/2026 until 06/25/2026, and Glycopyrrolate 1 MG PRN from 03/12/2026 until 06/25/2026.

On 07/24/2026 I completed an exit conference via telephone with licensee designee Corey Husetd. He agreed with the special investigation finding.

APPLICABLE RULE	
R 400.675	**Resident medications.**
	(1) Medication must be given, taken, or applied as prescribed, ordered, or directed by an appropriately licensed health care professional.
ANALYSIS:	Ms. Rodriquez stated the facility did not receive a separate and physical discontinuation order from Bronson Hospital to stop the administration of Lithium, Fluvoxamine, Trazadone PRN, and Glycopyrrolate PRN on 04/23/2026 and staff continued to administer said medications until a discontinuation order was received on 06/25/2026 from Network 180 medical staff. While onsite I observed Resident A's Medication Administration Record from 03/01/2026 until current. Resident A's MAR indicates that Resident A was prescribed Fluvoxamine 50 MG, Lithium 300 Mg, Glycopyrrolate 1 MG PRN, and Trazadone 50 MG from 03/12/2026 until 06/25/2026. Based upon my investigation, a preponderance of evidence does not support that a violation of the applicable rule occurred. Staff did not receive a physical discontinuation order from Bronson hospital and therefore staff administered the medications until Network 180 medical staff formally discontinued the medications.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS: Facility staff did not contact an appropriate medical provider when Resident A refused medications.

INVESTIGATION: While onsite on 07/06/2026 I observed Resident A's MAR. Resident A's MAR indicates that on 06/21/2026, Resident A refused Divalproex 500 MG, Ferosul 325 MG, Fluvoxamine 50 MG, Haloperidol 5 MG, Vitamin B-12 5,000 MCG, Vitamin C 250 MG, and Vitamin D3 50 MCG.

Ms. Rodriguez stated that on 06/21/2026 she was tasked with administering Resident A's medications. She stated that Resident A refused Divalproex 500 MG, Ferosul 325 MG, Fluvoxamine 50 MG, Haloperidol 5 MG, Vitamin B-12 5,000 MCG, Vitamin C 250 MG, and Vitamin D3 50 MCG. Mr. Rodriquez acknowledged that she did not contact a medical provider regarding the medication refusals.

On 07/24/2026 I completed an exit conference via telephone with licensee designee Corey Husetd. He did not dispute the finding and stated that he would submit an acceptable Corrective Action Plan.

APPLICABLE RULE	
R 400.675	**Resident medications.**
	(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident: **(g) Contact the appropriately licensed health care professional when a resident refuses a prescribed medication or procedure. A licensee, administrator, or staff shall document and follow the instructions given by the licensed health professional. Documented instructions may include procedures to follow when a resident refuses medication or procedures in the future.**
ANALYSIS:	Resident A's MAR indicates that on 06/21/2026, Resident A refused Divalproex 500 MG, Ferosul 325 MG, Fluvoxamine 50 MG, Haloperidol 5 MG, Vitamin B-12 5,000 MCG, Vitamin C 250 MG, and Vitamin D3 50 MCG. Ms. Rodriguez stated that on 06/21/2026 she was tasked with administering Resident A's medications. She stated that Resident A refused Divalproex 500 MG, Ferosul 325 MG, Fluvoxamine 50 MG, Haloperidol 5 MG, Vitamin B-12 5,000 MCG, Vitamin C 250 MG, and Vitamin D3 50 MCG. Mr. Rodriquez acknowledged she did not contact a medical provider regarding the medication refusals. Based upon my investigation, a preponderance of evidence

	does support that a violation of the applicable rule occurred.
CONCLUSION:	**REPEAT VIOLATION ESTABLISHED** **Special Investigation 2025A0357039 07/14/2025**

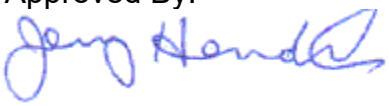
IV. RECOMMENDATION

Upon receipt of an acceptable Corrective Action Plan, I recommend no change to the license.

07/24/2026

Toya Zylstra — Date
Licensing Consultant

Approved By:



07/24/2026

Jerry Hendrick — Date
Area Manager