



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

March 1, 2021

Charles and Kerry Grayson  
6240 Pinecrest Dr.  
Zeeland, MI 49464

|                |   |
|----------------|---|
| RE: License #: | AF700263375<br>The Grayson's<br>6240 Pinecrest Dr.<br>Zeeland, MI 49464 |
|----------------|---|

Dear Charles and Kerry:

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

Please contact me with any questions. If I am not available and you need to speak to someone immediately, you may contact the local office at (616) 356-0100.

Sincerely,

Elizabeth Elliott, Licensing Consultant  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503  
(616) 901-0585

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

**I. IDENTIFYING INFORMATION**

|                                    |  |
|------------------------------------|--|
| <b>License #:</b>                  | AF700263375                              |
| <b>Licensee Name:</b>              | Grayson, Charles and Grayson, Kerry      |
| <b>Licensee Address:</b>           | 6240 Pinecrest Dr.<br>Zeeland, MI 49464  |
| <b>Licensee Telephone #:</b>       | (616) 875-8219                           |
| <b>Licensee/Licensee Designee:</b> | N/A                                      |
| <b>Administrator:</b>              | N/A                                      |
| <b>Name of Facility:</b>           | The Grayson's                            |
| <b>Facility Address:</b>           | 6240 Pinecrest Dr.<br>Zeeland, MI 49464  |
| <b>Facility Telephone #:</b>       | (616) 875-8219                           |
| <b>Original Issuance Date:</b>     | 03/11/2004                               |
| <b>Capacity:</b>                   | 4  |
| <b>Program Type:</b>               | DEVELOPMENTALLY DISABLED<br>MENTALLY ILL |
| <b>Certified Programs:</b>         | DEVELOPMENTALLY DISABLED<br>MENTALLY ILL |

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/19/2021

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: 11/05/2020

Inspection Type:  Interview and Observation  Worksheet  
 Combination  Full Fire Safety

No. of staff interviewed and/or observed 0

No. of residents interviewed and/or observed 4

No. of others interviewed 1 Role: Licensee, Kerry Grayson

- Medication pass / simulated pass observed? Yes  No  If no, explain.  
At the time of the virtual inspection, resident medications were not being administered. Virtual inspection was conducted due to COVID-19 concerns.
- Medication(s) and medication record(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident?  
Yes  No  If no, explain.
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.
- Fire safety equipment and practices observed? Yes  No  If no, explain.
- E-scores reviewed? (Special Certification Only) Yes  No  N/A   
If no, explain.
- Water temperatures checked? Yes  No  If no, explain.  
the inspection was conducted virtually due to COVID-19 concerns and a onsite water temp was not checked.
- Incident report follow-up? Yes  No  If no, explain.
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:  
N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes  (please explain) No  N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was determined to be in compliance with rules and requirements.

### IV. RECOMMENDATION

I recommend issuance of a 2-year adult foster care license with special certification (capacity 4).



03/01/2021

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Elizabeth Elliott  
Licensing Consultant

Date