



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

July 13, 2023

Mary North  
Brookdale Grand Blanc MC  
5130 Baldwin Road  
Holly, MI 48442

RE: License #: AH250236933  
Brookdale Grand Blanc MC  
5130 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,

A handwritten signature in cursive script that reads "Aaron L. Clum".

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**

<b>License #:</b>	AH250236933
<b>Licensee Name:</b>	Brookdale Senior Living Communities, Inc.
<b>Licensee Address:</b>	Suite 2300 6737 West Washington St. Milwaukee, WI 53214
<b>Licensee Telephone #:</b>	(414) 918-5000
<b>Authorized Representative:</b>	Mary North
<b>Administrator:</b>	Heather Vahlbusch
<b>Name of Facility:</b>	Brookdale Grand Blanc MC
<b>Facility Address:</b>	5130 Baldwin Road Holly, MI 48442
<b>Facility Telephone #:</b>	(810) 603-0800
<b>Original Issuance Date:</b>	06/01/1999
<b>Capacity:</b>	53
<b>Program Type:</b>	AGED ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/11/2023

Date of Bureau of Fire Services Inspection if applicable: 04/04/2023

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 07/11/2023

No. of staff interviewed and/or observed 6  
No. of residents interviewed and/or observed 30  
No. of others interviewed N/A 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. 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.
- Incident report follow-up? Yes  IR date/s: N/A
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s: SI#2022A0585082/1932(1), 1935(5)
- Number of excluded employees followed up? 6 N/A

### 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

Renewal of the license is recommended.

*Aaron L. Clum*

7/13/2023

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Licensing Consultant

Date