



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

February 14, 2024

Stephen Levy  
Leisure Living Management of Holland Inc.  
Suite 115  
21800 Haggerty Rd.  
Northville, MI 48167

RE: License #: AL030084491  
Investigation #: 2024A0581015  
Addington Place of LakeSide Vista Zeeland Haus

Dear Stephen Levy:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days.

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 (517) 284-9730.

Sincerely,

A handwritten signature in black ink that reads "Cathy Cushman". The signature is written in a cursive, flowing style.

Cathy Cushman, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(269) 615-5190

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL030084491
<b>Investigation #:</b>	2024A0581015
<b>Complaint Receipt Date:</b>	01/02/2024
<b>Investigation Initiation Date:</b>	01/03/2024
<b>Report Due Date:</b>	03/02/2024
<b>Licensee Name:</b>	Leisure Living Management of Holland Inc.
<b>Licensee Address:</b>	Suite 115 21800 Haggerty Rd. Northville, MI 48167
<b>Licensee Telephone #:</b>	(616) 394-0302
<b>Administrator:</b>	Mistee Hondorp
<b>Licensee Designee:</b>	Stephen Levy
<b>Name of Facility:</b>	Addington Place of LakeSide Vista Zeeland Haus
<b>Facility Address:</b>	346 West 40th Street Holland, MI 49423
<b>Facility Telephone #:</b>	(616) 394-0302
<b>Original Issuance Date:</b>	06/18/1999
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	04/06/2022
<b>Expiration Date:</b>	04/05/2024
<b>Capacity:</b>	20
<b>Program Type:</b>	ALZHEIMERS AGED

**II. ALLEGATION**

	<b>Violation Established?</b>
The facility is under construction and not arranged to provide for the health, safety, and well-being of residents.	Yes

**III. METHODOLOGY**

01/02/2024	Special Investigation Intake 2024A0581015
01/03/2024	Special Investigation Initiated - Telephone Interview with BFS inspector, Larry Lamb.
01/11/2024	Inspection Completed On-site Interview with Administrator, Mistee Hondorp.
01/11/2024	Contact - Document Sent Sent disapproved BFS report to Administrator.
01/17/2024	Contact - Document Sent Email to Ms. Hondorp
01/25/2024	Contact - Document Received Email from Ms. Hondorp
02/05/2024	Inspection Completed-BCAL Sub. Compliance
02/05/2024	Exit conference with licensee designee, Stephen Levy, via telephone.
02/09/2024	Contact – Telephone call made Interview with Administrator, Ms. Hondorp.

**ALLEGATION:**

**The facility is under construction and not arranged to provide for the health, safety, and well-being of residents.**

**INVESTIGATION:** On 01/02/2024, I received a disapproved fire inspection report from the Bureau of Fire Services (BFS). The BFS report, dated 12/14/2023, documented the facility was under construction and “not approved for use as an

AFC". The BFS reported also documented "Fire door was verified and should remain closed to separate it from other houses. Please make sure work is being performed under an approved plan review submittal from the Bureau of Fire Services".

On 01/03/2024, I interviewed BFS inspector, Larry Lamb, via telephone. Mr. Lamb stated there were no residents in the facility; however, he stated he disapproved the facility's inspection because the entire facility was in disrepair and unable to house residents in a safe environment. Additionally, he stated BFS has not received approvals for the projects taking place in the facility. Mr. Lamb was not aware of the licensee submitting any plans for review pertaining to the facility's repairs and renovations.

On 01/03/2024, I contacted the facility's assigned AFC consultant, Eli Deleon. Mr. Deleon was not aware of the facility being under construction or renovation.

On 01/11/2024, I conducted an unannounced inspection and interviewed the facility's Administrator, Mistee Hondorp. Ms. Hondorp acknowledged the facility was under construction and being renovated. She stated the facility hadn't had any residents in care for the last 3.5 years. She stated the licensee preferred to renovate while there were no residents in care. She stated the facility was not expected to be completed with renovations until Spring 2024. She stated the facility needed outside drains installed prior to the indoor plumbing installed and/or updated. I requested Ms. Hondorp provide me with a timeline of the remodel/renovation.

Based on my observations, the facility was not arranged or currently maintained to provide adequately for the health, safety or wellbeing of the residents because resident bedrooms were missing flooring, plumbing fixtures were not installed or functioning, there were sections of the heating, ventilation, and air conditioning (HVAC) systems exposed, disconnected and/or not functioning properly, walls with exposed studs, and extensive building materials and construction supplies being stored in multiple rooms throughout the facility.

On 01/17/2024, Ms. Hondorp emailed me documenting the timeline for the facility's renovations as the following:

"The plan was for the outside drainage work to be completed on Building #5 in December, but as Josh was removing the outside patio, that was actually rebarred & took a bit, when it did come up there was a new flood of water that has been under building #5, that wasn't in pipes. Waiting on assessment of that. Then the freeze came which put Josh further behind. I have a call into Greg Robinson at Direct Supply to get an update. We need him to finish up the drainage, so that we can then get the Apt HVAC in, finish up the replacement drywall,

so that Brahms can get in and do the work they planned 2 years ago.”

<b>APPLICABLE RULE</b>	
<b>R 400.15403</b>	<b>Maintenance of premises.</b>
	<b>(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.</b>
<b>ANALYSIS:</b>	Based on the Bureau of Fire Services inspection report, dated 12/14/2023, my interview with the facility’s Administrator, Mistee Hondorp, and my observations of the facility, despite the facility not currently having any residents and the licensee intending to update the physical plant to benefit the facility’s future residents, there is substantial evidence the facility is not currently constructed, arranged or being maintained to provide adequately for the health, safety, and well-being of any residents, as required.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

On 02/05/2024, I attempted to conduct my exit conference with the licensee designee, Stephen Levy, via telephone; however, I was unable to reach him. I left Mr. Levy a voicemail requesting he contact me for the exit conference. I explained my findings and recommendation to the facility’s Administrator, Mistee Hondorp, in person during my inspection on 01/11/2024; however, she disagreed with my recommendation. Ms. Hondorp stated she did not find a violation appropriate because the licensee was updating the facility without displacing any residents.

**IV. RECOMMENDATION**

Due to the physical plant violations cited in the report, a six-month provisional license is recommended.

*Cathy Cushman*

02/05/2024

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Cathy Cushman  
Licensing Consultant

Date

Approved By:

*Dawn Timm*

02/13/2024

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Dawn N. Timm  
Area Manager

Date