



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

September 23, 2024

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

RE: License #: AL030084491
Addington Place of LakeSide Vista Zeeland Haus
346 West 40th Street
Holland, MI 49423

Dear Mr. Levy:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- An on-site inspection will be conducted.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

Please contact me with any questions. In the event that I am not available, and you need to speak to someone immediately, you may contact the local office at (616) 356-0183.

Sincerely,

A handwritten signature in blue ink that reads "Megan Aukerman, MSW". The signature is written in a cursive style.

Megan Aukerman, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 438-3036

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

I. IDENTIFYING INFORMATION

License #: AL030084491

Licensee Name: Leisure Living Management of Holland Inc.

Licensee Address: Suite 115
21800 Haggerty Rd.
Northville, MI 48167

Licensee Telephone #: (616) 394-0302

Licensee/Licensee Designee: Stephen Levy

Administrator: Mistee Hondorp

Name of Facility: Addington Place of LakeSide Vista Zeeland
Haus

Facility Address: 346 West 40th Street
Holland, MI 49423

Facility Telephone #: (616) 394-0302

Original Issuance Date: 06/18/1999

Capacity: 20

Program Type: AGED
ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 08/26/2024

Date of Bureau of Fire Services Inspection if applicable: 09/03/2024

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 0

No. of others interviewed [redacted] Role: [redacted]

- Medication pass / simulated pass observed? Yes No If no, explain.
The facility was under renovation. BFS approved the facility for occupancy on 09/03/2024.
- Medication(s) and medication record(s) reviewed? Yes No If no, explain.
There were no residents admitted at the time of the inspection.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. There were no residents admitted at the time of the inspection.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
The facility was under renovation. BFS approved the facility for occupancy on 09/03/2024
- 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.
- Incident report follow-up? Yes No If no, explain.
The facility was under renovation. BFS approved the facility for occupancy on 09/03/2024
- 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 found to be in non-compliance with the following rules:

R 400.15403 Maintenance of premises.

(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

ANALYSIS: On 12/14/2023, BFS submitted a report stating the facility was under construction and “not approved for use as an AFC”. As result, the facility was placed on a provisional license on 02/14/2024. Since then, renovations have been completed. On 09/03/2024, Fire Marshall Larry Lamb completed an inspection. He approved the facility for resident use; however, issued a temporary approval due to minor deficiencies. Fire Marshall Lamb cited the facility needed to replace painted sprinkler heads.

CONCLUSION: Violation Established

A corrective action plan was requested and approved on 09/18/2024. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended (capacity 20).

Megan Aukerman, MSW

09/23/2024

Megan Aukerman
Licensing Consultant

Date