

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

October 3, 2024

Kalia Greenhoe Brightside Living LLC PO Box 220 Douglas, MI 49406

RE: License #: AS410403028 Brightside Living - Leonard 2646 Leonard St. NW Grand Rapids, MI 49504

Dear Ms. Greenhoe:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, a regular license and special certification will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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,

anthony Mullim

Anthony Mullins, Licensing Consultant Bureau of Community and Health Systems Unit 13, 7th Floor 350 Ottawa, N.W. Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #:	AS410403028
Licensee Name:	Brightside Living LLC
Licensee Address:	690 Dunegrass Circle Dr Saugatuck, MI 49453
Licensee Telephone #:	(614) 329-8428
Licensee/Licensee Designee:	Kalia Greenhoe
Administrator:	Kalia Greenhoe
Name of Facility:	Brightside Living - Leonard
Facility Address:	2646 Leonard St. NW Grand Rapids, MI 49504
Facility Telephone #:	(616) 805-3212
Original Issuance Date:	04/23/2020
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s):	09/30/2024	
Date of Bureau of Fire Services Inspection if app	licable: N/A	
Date of Health Authority Inspection if applicable:	N/A	
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed 1 Role: Designe	3 4 2e	
 Medication pass / simulated pass observed? Yes No If no, explain. No meds were scheduled to be passed during the onsite inspection. Medication(s) and medication record(s) reviewed? Yes No If no, explain. 		
 Resident funds and associated documents reviewed for at least one resident? Yes X No I If no, explain. Meal preparation / service observed? Yes X No I If no, explain. 		
● Fire drills reviewed? Yes ⊠ No □ If no, explain.		
• Fire safety equipment and practices observed? Yes \boxtimes No \square If no, explain.		
 E-scores reviewed? (Special Certification Only) Yes X No X N/A If no, explain. Water temperatures checked? Yes X No If no, explain. 		
 Incident report follow-up? Yes No If no, explain. 		
 Corrective action plan compliance verified? N/A 	Yes 🗌 CAP date/s and rule/s:	
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 400.14310 Resident health care.

 (3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.
 Resident A did not have a recorded weight on file for several months in 2024.

 R 400.14403 Maintenance of premises.

 (6) All plumbing fixtures and water and waste pipes shall be properly installed and maintained in good working condition. Each water heater shall be equipped with a thermostatic temperature control and a pressure relief valve, both of which shall be in good working condition.

The sink in the resident's bathroom needs to be repaired due to minimal water pressure. It also takes a significant period of time before the water temperature increases.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license and special certification is recommended.

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Anthony Mullins Licensing Consultant 10/03/2024

Date