

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

MARLON I. BROWN, DPA DIRECTOR

April 23, 2025

Krysta Starr Brightway House LLC 5931 Dana Lynn Goodrich, MI 48438

RE: License #:	AM250401616
	Brightway House LLC
	1202 Church Street
	Flint, MI 48503

Dear Krysta Starr:

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 (517) 643-7960.

Sincerely,

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Shamidah Wyden, Licensing Consultant Bureau of Community and Health Systems 411 Genesee P.O. Box 5070 Saginaw, MI 48607 989-395-6853

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

I. IDENTIFYING INFORMATION

License #:	AM250401616
Licensee Name:	Brightway House LLC
Licensee Address:	1202 Church Street
	Flint, MI 48502
1 1 1 1 1 1 1 1 1 1	(040) 577 0000
Licensee Telephone #:	(810) 577-2893
Licensee Designee:	Krysta Starr
<u> </u>	
Administrator:	Krysta Starr
Name of Facility:	Brightway House LLC
Facility Address:	1202 Church Street
	Flint, MI 48503
Facility Telephone #:	(810) 820-8046
Original Issuance Date:	11/18/2020
Capacity:	11
Program Type:	DEVELOPMENTALLY DISABLED
	MENTALLY ILL

II. METHODS OF INSPECTION

Dat	e of On-site Inspection(s):	04/17/2	025
Dat	e of Bureau of Fire Services Inspection if app	licable:	10/10/2024
Dat	e of Health Authority Inspection if applicable:		N/A
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed Role:		3 6
•	Medication pass / simulated pass observed?	Yes 🛛	No 🗌 If no, explain.
•	Medication(s) and medication record(s) revie	ewed? Y	∕es ⊠ No 🗌 If no, explain.
•	Resident funds and associated documents r Yes 🖾 No 🗌 If no, explain. Meal preparation / service observed? Yes		
•	Fire drills reviewed? Yes $igtimes$ No $igcup$ If no, e	xplain.	
•	Fire safety equipment and practices observe	ed? Yes	🛛 No 🗌 If no, explain.
•	E-scores reviewed? (Special Certification Or If no, explain. Water temperatures checked? Yes 🛛 No [
•	Incident report follow-up? Yes $igtimes$ No $igcup$ If	no, expla	ain.
•	Corrective action plan compliance verified? 05/16/2023 R803(6), R103(4), R402(3) N/A Number of excluded employees followed-up		CAP date/s and rule/s: N/A 🔀
•	Variances? Yes 🗌 (please explain) No 🗌	N/A 🖂	

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

	
This facility was t	found to be in non-compliance with the following rules:
R 400.14316	Resident records.
	(1) A licensee shall complete, and maintain in the home, a separate record for each resident and shall provide record information as required by the department. A resident
	record shall include, at a minimum, all of the following information:
	(a) Identifying information, including, at a minimum, all of the following: (viii) Funeral provisions and preferences.
At the time of ins Resident B's file.	pection, there were no funeral provisions noted in Resident A and
R 400.14318	Emergency preparedness; evacuation plan; emergency transportation.
	(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.
	pection, there was no daytime drill completed in the second quarter daytime drill in the second quarter of 2024.
R 400.14401	Environmental health.
	(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water
	temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.
At the time of ins degrees Fahrenh	pection, the water temperature at the kitchen sink was above 120
R 400.14401	Environmental health.
	(4) All garbage and rubbish that contains food wastes shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and
	shall be removed from the home daily and from the premises at least weekly.

At the time of inspection, the kitchen trash can did not have a lid.

R 400.14401	Environmental health.
	(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.

At the time of inspection, there were several resident bedroom windows that were not equipped with a screen.

R 400.14402	Food service.
	(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.

At the time of inspection, the downstairs refrigerator and freezer was not equipped with thermometers.

This was corrected during the on-site inspection.

R 400.14403	Maintenance of premises.
	(11) Handrails and nonskid surfacing shall be installed in showers and bath areas.

At the time of inspection, the upstairs bathroom did not have non-skid surfacing for the shower floor.

This was corrected during the on-site inspection.

R 400.14403	Maintenance of premises.
	(13) A yard area shall be kept reasonably free from all hazards, nuisances, refuse, and litter.
	pection, litter was observed in the front yard, and around the acility, near the facility office's exit door.
R 400.14403	Maintenance of premises.
	(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

At the time of inspection, Resident A's bedroom walls were observed to have several holes that needed repair.

R 400.14408	Bedrooms generally.
	(7) Bedrooms shall have at least 1 easily openable window.
	pection, Resident B and Resident C's bedroom window was ot easily openable.
R 400.14410	Bedroom furnishings.
	(1) The bedroom furnishings in each bedroom shall include all of the following: (d) At least 1 chair.
At the time of ins a chair.	pection, Resident D and Resident E's room was not furnished with

IV. RECOMMENDATION

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

04/23/2025

Shamidah Wyden Licensing Consultant

Date