



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 29, 2025

Lauren Gowman
Grand Pines Assisted Living Center
1410 S. Ferry St.
Grand Haven, MI 49417

RE: License #: AH700299440
Grand Pines Assisted Living Center
1410 S. Ferry St.
Grand Haven, MI 49417

Dear Lauren Gowman:

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.

If you fail to submit an acceptable corrective action plan, disciplinary action will result. Please review the enclosed documentation for accuracy and contact me with any questions. In the event I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (517) 335-5985.

Sincerely,

Julie Viviano, Licensing Staff
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #:	AH700299440
Licensee Name:	Grand Pines Assisted Living LLC
Licensee Address:	950 Taylor Ave. Grand Haven, MI 49417
Licensee Telephone #:	(616) 846-4700
Authorized Representative:	Lauren Gowman
Administrator/Licensee Designee:	Ami Moy
Name of Facility:	Grand Pines Assisted Living Center
Facility Address:	1410 S. Ferry St. Grand Haven, MI 49417
Facility Telephone #:	(616) 850-2150
Original Issuance Date:	07/08/2009
Capacity:	177
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/27/2025

Date of Bureau of Fire Services Inspection if applicable: BFS – A; 3/28/2025

Inspection Type: ☐ Interview and Observation ☒ Worksheet
☐ Combination

Date of Exit Conference: 5/27/2025

No. of staff interviewed and/or observed 14

No. of residents interviewed and/or observed 31

No. of others interviewed 0 Role N/A

- 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. The home does not hold resident funds in trust.
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.
- Fire drills reviewed? Yes ☐ No ☒ If no, explain.
Reviewed disaster plans along with interviewed staff on policies and procedures.
- 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: N/A
- Number of excluded employees followed up? 0 N/A ☒

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 325.1932	Resident medications.
	(2) The giving, taking, or applying of prescription medications shall be supervised by the home in accordance with the resident's service plan.
ANALYSIS:	Review of ten resident medication administration records revealed (MAR) Resident A's MAR was blank on 5/5/2025 for the 8:00 pm medication administration of Guaifenesin. Resident A was to receive 2 tablets by mouth twice daily of 600 mg tablet of Guaifenesin. The MAR is blank for 8:00 pm on 5/5/2025 and there is no documentation in the record to determine why Resident A did not receive the medication.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1975	Laundry and linen requirements.
	(1) A new construction, addition, major building change, or conversion after November 14, 1969 shall provide all of the following: (a) A separate soiled linen storage room. (b) A separate clean linen storage room.
ANALYSIS:	Inspection of the facility revealed a used coffee maker, iron, and fabric starch spray were stored in the clean linen area. This poses a risk for cross contamination. Clean linen storage is to be used for storage of clean linens only.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1976	Kitchen and dietary.
	(13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and

	sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.
ANALYSIS:	Review of dishwasher sanitization records reveal missing or blank entries for April 2025 and May 2025. It could not be determined if the dishwasher was tested thoroughly to ensure cleanliness and sanitization of dishware and utensils due to the incomplete and/or blank entries.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1976	Kitchen and dietary.
	(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.
ANALYSIS:	On-site inspection revealed multiple food items were found unlabeled in the employee lounge, the assisted living area kitchenette, the activities refrigerator and freezer, and the memory care kitchenette. These items were not labeled with the appropriate open date, and it could not be determined if the food items were safe for human consumption. An open date must be placed on food items served to residents in the facility once opened.
CONCLUSION:	VIOLATION ESTABLISHED

R 325.1979	General maintenance and storage.
	(3) Hazardous and toxic materials shall be stored in a safe manner.
ANALYSIS:	Inspection revealed a hazardous and toxic chemical in an unlocked bathroom in the assisted living area. It was easily accessible to anyone in the facility, and this presents a potential risk of ingestion, harm and/or injury to residents in the home with impaired cognition and/or function.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Receipt of an acceptable corrective action plan is requested and due by 6/13/2025.

Julie Marino

5/29/2025

Date

Licensing Consultant