



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

July 17, 2025

Lauren Gowman  
Sheldon Meadows Assisted Living Center  
4482 Port Sheldon  
Hudsonville, MI 49426

RE: License #: AH700236945  
**Sheldon Meadows Assisted Living Center**  
**4482 Port Sheldon**  
**Hudsonville, MI 49426**

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.

Receipt of an acceptable corrective action plan is requested and due by 8/1/2025. 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**

<b>License #:</b>	AH700236945
<b>Licensee Name:</b>	Sheldon Meadows Living Ctr. LLC
<b>Licensee Address:</b>	950 Taylor Ave. Grand Haven, MI 49417
<b>Licensee Telephone #:</b>	(616) 662-8191
<b>Authorized Representative:</b>	Lauren Gowman
<b>Administrator/Licensee Designee:</b>	Jamie Palma
<b>Name of Facility:</b>	Sheldon Meadows Assisted Living Center
<b>Facility Address:</b>	4482 Port Sheldon Hudsonville, MI 49426
<b>Facility Telephone #:</b>	(616) 662-8191
<b>Original Issuance Date:</b>	02/01/1998
<b>Capacity:</b>	129
<b>Program Type:</b>	ALZHEIMERS AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/16/2025

Date of Bureau of Fire Services Inspection if applicable: N/A

Inspection Type: ☐ Interview and Observation ☒ Worksheet  
☐ Combination

Date of Exit Conference: 7/16/2025

No. of staff interviewed and/or observed 14

No. of residents interviewed and/or observed 32

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:

<b>R 325.1923</b>	<b>Employee's health.</b>
	<b>(2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure.</b>
<b>ANALYSIS:</b>	Review of 8 employee records revealed 4 employees tuberculosis screenings were completed outside of the 10 days of hire parameter. New employees must be screened within 10 days of hire and prior to any occupational exposure.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>R 325.1968</b>	<b>Toilet and bathing facilities.</b>
	<b>(4) A toilet room or bathroom shall not be used for storage or housekeeping functions.</b>
<b>ANALYSIS:</b>	Inspection revealed a bathroom in the memory care unit was used for storage of resident dirty laundry, housekeeping supplies, biohazard materials etc. A facility bathroom may not be used for storage.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>R 325.1975</b>	<b>Laundry and linen requirements.</b>
	<b>(1) A new construction, addition, major building change, or conversion after November 14, 1969 shall provide all of the following:</b> <b>(a) A separate soiled linen storage room.</b> <b>(b) A separate clean linen storage room.</b>
<b>ANALYSIS:</b>	Inspection revealed that on A-Hallway, clean linens were stored on top of the spa room counter and partition next to the tub. Clean linens are to be stored separately in the available spa

	<p>room linen cabinet. Clean linens are not to be stored on the spa room counter and partition next to the tub because this presents a risk of cross contamination.</p> <p>On D-Hallway, Hoyer slings, linen carts, and a fan were found in the clean linen storage area. To prevent risk of cross-contamination, the clean linen storage area is not to be used as a storage area for any other items. Clean linens are to be stored separately.</p> <p>In the memory care unit, residents soiled laundry was found in a storage closet that was not the designated soiled linen area. Soiled linen is to be kept in the soiled linen storage area only and cannot be kept in a storage closet with other items and supplies. This presents a risk of cross-contamination.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>R 325.1976</b>	<b>Kitchen and dietary.</b>
	<b>(16) A storage area for housekeeping items and a janitor's closet shall be provided convenient to the kitchen and dietary area.</b>
<b>ANALYSIS:</b>	Inspection revealed kitchen supplies such as bowls and disposable foods serving items were stored in the janitor's closet in the west side serving kitchen of the facility. This presents a risk of cross-contamination and only housekeeping items can be stored in the janitor's closet.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>R 325.1979</b>	<b>General maintenance and storage.</b>
	<b>(3) Hazardous and toxic materials shall be stored in a safe manner.</b>
<b>ANALYSIS:</b>	Inspection revealed hazardous and toxic chemicals were found in an unlocked upper cabinet in the memory care unit and in the assisted living dining room cabinets. The items were 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.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

#### IV. RECOMMENDATION

Receipt of an acceptable corrective action plan is requested and due by 8/1/2025.

*Julie Marino*

8/1/2025

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Date

Licensing Consultant