



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 01, 2026

Jordan Walch
Spectrum Community Services
Suite 700
185 E. Main St
Benton Harbor, MI 49022

RE: License #: AS410289784
Investigation #: 2026A0467035
Blythefield Home

Dear Mrs. Walch:

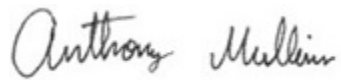
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (616) 356-0100.

Sincerely,

A handwritten signature in cursive script that reads "Anthony Mullins".

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

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT**

I. IDENTIFYING INFORMATION

License #:	AS410289784
Investigation #:	2026A0467035
Complaint Receipt Date:	05/13/2026
Investigation Initiation Date:	05/13/2026
Report Due Date:	07/12/2026
Licensee Name:	Spectrum Community Services
Licensee Address:	Suite 700 185 E. Main St Benton Harbor, MI 49022
Licensee Telephone #:	(734) 458-8729
Administrator:	Jordan Walch
Licensee Designee:	Jordan Walch
Name of Facility:	Blythefield Home
Facility Address:	3485 Rogue River Rd. NE Belmont, MI 49306
Facility Telephone #:	(616) 447-9380
Original Issuance Date:	06/25/2007
License Status:	REGULAR
Effective Date:	12/29/2025
Expiration Date:	12/28/2027
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
On 4/15/26, Resident A was left alone in the home unsupervised between 10:30am and 12:30pm.	Yes

III. METHODOLOGY

05/13/2026	Special Investigation Intake 2026A0467035
05/13/2026	Special Investigation Initiated - Letter Spoke to complainant via email
05/13/2026	APS Referral Not warranted based on findings
05/13/2026	Contact – Face to Face made with associate director Sam Johnson
06/01/2026	Exit conference with Jordan Walch, licensee designee.

ALLEGATION: On 4/15/26, Resident A was left alone in the home unsupervised between 10:30am and 12:30pm

INVESTIGATION: On 05/13/26, I received a complaint from Kent County Recipient Rights Officer Jeannie Haff. The complaint alleged that on 4/15/26, Resident A refused to get out of bed to go with staff to transport Resident B to a medical appointment. Staff member Greenlei Johnson contacted the home supervisor, Marta Houser-Weller, who approved leaving Resident A home alone for two hours while Ms. Greenlei Johnson transported Resident B to an appointment. Mrs. Houser-Weller reportedly based her approval on Resident A’s two hours of unsupervised community time. Ms. Haff informed me that she intends to substantiate her case due to Resident A being left unsupervised in the home.

On 5/13/26, I spoke in person with Associate Director Sam Johnson. Mrs. Sam Johnson confirmed the allegation and explained that Mrs. Houser-Weller had been scheduled to work on the day in question, which would have prevented the situation. However, Mrs. Houser-Weller had called off for personal reasons. Due to this, Ms. Greenlei Johnson was placed in a position where she believed leaving Resident A home alone for two hours was acceptable based on approval from her supervisor. Mrs. Sam Johnson acknowledged that Resident A being unsupervised in the home differs from unsupervised time in the community. As a result of this incident, Mrs. Houser-Weller received a two-day unpaid suspension and additional education. Ms. Sam Johnson reported that there were no incidents while Resident A was left home alone on 4/15/26.

On 5/13/26, I conducted an unannounced onsite investigation. Home supervisor Marta Houser-Weller answered the door and she was interviewed in the staff office area. Mrs. Houser-Weller stated that on the day in question, Resident A refused to leave the house with staff member Greenlei Johnson to transport Resident B to a medical appointment. Therefore, she approved Ms. Greenlei Johnson to leave Resident A in the home alone for two hours (10:30am to 12:30pm) while Ms. Greenlei Johnson transported Resident B. Mrs. Houser-Weller confirmed that Resident A is approved two hours of unsupervised community access, and she believed it applied to this situation. Mrs. Houser-Weller reported that after notifying her supervisor Regan Paige of the incident, she was immediately told the decision was inappropriate. Within two days of the incident occurring, Mrs. Houser-Weller received disciplinary action, including a two-day unpaid suspension and a corrective memo. She stated she had originally been scheduled to work on the day in question but called off for personal reasons. Mrs. Houser-Weller was adamant that a similar incident would not occur again.

I then spoke to Resident A at the dining room table, with Mrs. Houser-Weller present at his request. Resident A recalled that on 4/15/26, Ms. Greenlei Johnson attempted to bring him along to Resident B's medical appointment. Resident A stated that he was tired and refused to go. Resident A reported that Ms. Greenlei Johnson received permission to leave him home alone while she transported Resident B. Resident A could not recall the length of time he was alone in the home but reported no issues with his safety and well-being occurred during this period. He confirmed that he has a limited amount of unsupervised community time each month but understands this does not apply to being left alone in the home. Aside from this incident, Resident A stated that all his needs are being met and he spoke highly of the care he receives from staff. Staff member Greenlei Johnson was not present during the onsite visit. Due to a disclosure from Mrs. Houser-Weller and Resident A, staff member Greenlei Johnson was not interviewed.

On 6/1/26, I conducted an exit conference with licensee designee, Jordan Walch. She was informed of the investigation findings and agreed to complete a CAP within 15 days of receipt of this report.

APPLICABLE RULE	
R 400.633	Staffing requirements.
	(1) A licensee shall always have sufficient direct care staff on duty for the supervision, personal care, and protection of residents and to provide the services specified in a resident's assessment plan, health care appraisal, and resident care agreement. At a minimum, the ratio of direct care staff to residents must not be less than 1 direct care staff to either of the following: (a) 15 residents during waking hours or 20 residents during sleeping hours for large group homes and congregate facilities.

	(b) 12 residents for small group and family homes.
ANALYSIS:	Resident A confirmed that he was left home alone unsupervised on 4/15/26. Home supervisor Marta Houser-Weller confirmed she approved for staff member Greenlei Johnson to leave Resident A home alone unsupervised from 10:30am to 12:30pm while she transported Resident B to his medical appointment. Therefore, there is a preponderance of evidence to support this applicable licensing rule.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend no changes to the current license status.

Anthony Mullins

06/01/2026

Anthony Mullins
Licensing Consultant

Date

Approved By:

Jerry Hendrick

06/01/2026

Jerry Hendrick
Area Manager

Date