



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

January 28, 2026

Corey Husted
Brightside Living LLC
PO Box 220
Douglas, MI 49406

RE: License #: AS410400152
Brightside Living - Comstock Park
4312 Division Ave N
Comstock Park, MI 49321

Dear Mr. Husted:

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) 356-0100.

Sincerely,

Anthony Mullins

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 #: AS410400152

Licensee Name: Brightside Living LLC

Licensee Address: 690 Dunegrass Circle Dr
Saugatuck, MI 49453

Licensee Telephone #: (614) 329-8428

Licensee/Licensee Designee: Corey Husted

Administrator: Corey Husted

Name of Facility: Brightside Living - Comstock Park

Facility Address: 4312 Division Ave N
Comstock Park, MI 49321

Facility Telephone #: (616) 551-1034

Original Issuance Date: 08/01/2019

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/26/2026

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 4

No. of others interviewed 1 Role: Designee

- Medication pass / simulated pass observed? Yes No If no, explain. No medications 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 No If no, explain. The facility does not manage resident's funds.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
- Fire safety equipment and practices observed? Yes No If no, explain.
- E-scores reviewed? (Special Certification Only) Yes No N/A If no, explain.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes No If no, explain. N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A
- 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 400.675

Resident medications.

(1) Medication must be given, taken, or applied as prescribed, ordered, or directed by an appropriately licensed health care professional.

Resident B's MAR indicated that he did not receive his 12:00pm dose of Oxcarbazepin Tab 150 medication as prescribed on 01/24/26.

Resident C's MAR indicated that he missed doses of his Aspirin Low Dose – 81mg, Ropinirole Tab1MG, Sodium Chlor Sol 0.9%, Docusate Sodium 100MG Caps, Mypirocin Oint 2%, and Azithromycin Tab 250 due to "waiting on pharmacy, waiting on new order from doctor" and the medication needing to be reordered. None of the explanations given are an appropriate reason for the resident to miss a dose of medication.

Resident D's MAR indicated that he did not receive his Aquaphor Ointment as scheduled on 01/23/26. The MAR also indicated that he did not receive his Metoprol Tar Tab 50MG medication on 01/02/26 due to "waiting on pharmacy."

R 400.685

Resident admission; resident assessment plan; resident care agreement; health care appraisal.

(10) A resident or resident's designated representative shall provide a written health care appraisal or a medical discharge summary by an appropriate health care professional that is completed within the 90-day period before admission. A written health care appraisal must be completed at least annually thereafter. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be completed no later than 30 days after admission.

Resident B's health care appraisal needs to be updated as it was last completed on 09/05/24.

R 400.685

Resident admission; resident assessment plan; resident care agreement; health care appraisal.

(4) A written assessment plan must be completed with and signed by the resident or the resident's designated representative, responsible agency if applicable, and the licensee at the time of admission and annually thereafter. A licensee shall maintain a copy of the resident's most recent assessment plan on file at the facility for up to 2 years after discharge.

Resident C's assessment plan needs to be updated as it was last completed on 01/05/24.

R 400.685

Resident admission; resident assessment plan; resident care agreement; health care appraisal.

(9) A licensee shall review the written resident care agreement with the resident, resident's designated representative, or responsible agency at least annually or more often if necessary. Any changes to the resident care agreement must be re-signed by all applicable parties. If the annual review results in no changes to the resident care agreement the resident care agreement does not need to be re-signed but the licensee shall document that all applicable parties were contacted and agreed that no changes were necessary.

Resident C's resident care agreement needs to be updated as it was last completed on 01/05/24.

R 400.691

Resident records.

(1) A licensee shall complete and maintain a separate record for each resident that includes all of the following:
(g) Admission and monthly weight record.

Resident A did not have weight records on file for April, May, and June 2025.

R 400.725

Means of egress.

(3) Doors that form a part of a required means of egress must be equipped with positive-latching, non-locking-

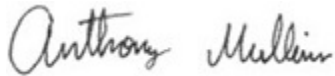
against-egress hardware and have a width to allow for residents requiring wheelchairs or other devices to easily navigate through doorways.

The front door and the backdoor of the AFC home did not have doorknobs that were non-locking-against egress hardware during the renewal inspection.

An exit conference was completed onsite during the renewal inspection with licensee designee, Corey Husted. He was informed of the investigative findings and aware that a corrective action plan is due within 15 days of receipt of this report.

IV. RECOMMENDATION

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



01/28/2026

Anthony Mullins
Licensing Consultant

Date