



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 16, 2026

Brian Nitz
Baruch SLS, Inc.
Suite 203
3196 Kraft Avenue SE
Grand Rapids, MI 49512

RE: License #: AM700398468
Investigation #: 2026A0340053
Sorrell AFC Home

Dear Mr. Nitz:

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 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,



Rebecca Piccard, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 446-5764

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM700398468
Investigation #:	2026A0340053
Complaint Receipt Date:	07/10/2026
Investigation Initiation Date:	07/10/2026
Report Due Date:	09/08/2026
Licensee Name:	Baruch SLS, Inc.
Licensee Address:	Suite 203 3196 Kraft Avenue SE Grand Rapids, MI 49512
Licensee Telephone #:	(616) 588-9131
Administrator:	Rebecca Summerville
Licensee Designee:	Brian Nitz
Name of Facility:	Sorrell AFC Home
Facility Address:	16224 Mercury Drive Grand Haven, MI 49417
Facility Telephone #:	(616) 847-4242
Original Issuance Date:	03/23/2020
License Status:	REGULAR
Effective Date:	09/24/2024
Expiration Date:	09/23/2026
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED AGED, ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Staff are not trained in CPR/1st Aid	Yes

III. METHODOLOGY

07/10/2026	Special Investigation Intake 2026A0340053
07/10/2026	APS Referral Not an APS matter
07/10/2026	Special Investigation Initiated - Face to Face
07/10/2026	Inspection Completed On-site
07/15/2026	Exit Conference Laura Whaley

ALLEGATION: Staff are not trained in CPR/1st Aid

INVESTIGATION: While investigating complaint #2026A0340048 and #2026A0340049 on the same campus, it was discovered that staff are not all being trained in CPR/1st Aid across all the homes on the Baruch Lakeshore campus. On July 10, 2026, I was reviewing staff files and was informed by Activities Director, Rachel Kooiman, that all staff work at all of the Lakeshore homes. I reviewed 12 randomly chosen staff files and found 9 staff to not have training in First aid. When I brought this concern to acting Designee Laura Whaley, she was able to provide training documentation for 3 of the staff who did not have documentation in their files. The remaining staff who have not been trained in First Aid or CPR include Kayla Henderson, Shakia Gray, Isabelle Eschman, Lauren Bridgeforth, Kailyn Chaney and Alexis Fisk

On July 15, 2026, I conducted an exit conference with Laura Whaley who is the acting Licensee Designee for Baruch. I informed her of the allegation and findings and requested a Corrective Action Plan which she agreed to send and had no further questions.

APPLICABLE RULE	
R 400.629	Direct care staff; qualifications and training.
	(5) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be trained and

	competent in all of the following areas before performing assigned tasks independently: (b) First aid. (c) Cardiopulmonary resuscitation, which includes a hands-on demonstration as part of the training.
ANALYSIS:	While reviewing 12 staff files it was discovered that six staff were not trained in First aid or CPR.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an approved Corrective Action Plan, I recommend no change to the current license status.



July 16, 2026

Rebecca Piccard
Licensing Consultant

Date

Approved By:



July 16, 2026

Jerry Hendrick
Area Manager

Date