



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 29, 2026

Marcia Curtiss
BRIDGEWAY PARK SENIOR LIVING
Ste 115
21800 Haggerty RD
Northville, MI 48167

RE: License #: AL230419858
Bridgeway Park Lansing
7323 Delta Commerce Dr
Lansing, MI 48917

Dear Mrs. Curtiss:

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 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 (517) 335-5985.

Sincerely,



Ondrea Johnson, Licensing Consultant
Bureau of Community and Health Systems

611 W. OTTAWA • P.O. BOX 30664 • LANSING, MICHIGAN 48909
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**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #:	AL230419858
Licensee Name:	BRIDGEWAY PARK SENIOR LIVING
Licensee Address:	Ste 115 21800 Haggerty RD Northville, MI 48167
Licensee Telephone #:	(248) 735-1020
Licensee/Licensee Designee:	Marcia Curtiss
Administrator:	Marcia Curtiss
Name of Facility:	Bridgeway Park Lansing
Facility Address:	7323 Delta Commerce Dr Lansing, MI 48917
Facility Telephone #:	(517) 327-5566
Original Issuance Date:	01/06/2026
Capacity:	20
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/27/2026

Date of Bureau of Fire Services Inspection if applicable: 5/7/2026

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 5

No. of residents interviewed and/or observed 8

No. of others interviewed 0 Role: 0

- Medication pass / simulated pass observed? Yes ☒ No ☐ If no, explain.
- 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.
- 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.
- 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 400.619 Emergency preparedness plan.

(8) A licensee shall practice the emergency preparedness plan, including the fire safety plan, at least once a quarter per calendar year during each shift, 7 a.m. to 3 p.m., 3 p.m. to 11 p.m. and 11 p.m. to 7 a.m. A record of the practices must be maintained for 2 years.

FINDINGS: Fire drills are not conducted once per shift per quarter during the shifts of 7am to 3pm, 3pm to 11pm and 11pm to 7am.

R 400.675 Resident medications.

(2) Prescribed medication must be kept in the original pharmacy container and labeled for a specific resident. Over-the-counter medication must be kept in the original manufacturer's container. Prescription and over-the-counter medication must be kept in a locked cabinet or drawer and refrigerated if required. Equipment necessary to administer medication must be easily accessible and used only for the resident for whom it is prescribed unless generally used for all residents.

FINDINGS: Resident A does not have medications Antacid Chew 500mg and Tylenol stored at the facility.

R 400.701 Required personnel policies.

(1) A licensee shall have all the following written policies and procedures:

- (a) Mandatory reporting.**
- (b) Resident care related prohibited practices.**
- (d) Training requirements, including understanding the act and these rules.**
- (e) Resident rights in accordance with R 400.681.**
- (f) The process for reviewing the licensing statute and administrative rules with adult foster care staff.**

(2) Written policies and procedures must be given to staff and volunteers at the time of hire or appointment. A verification of receipt of the policies and procedures must be maintained in the individual's personnel record.

FINDINGS: Required personnel policies aligned with administrative rules not available for the department to review and verification of receipt of the policies not maintained in employee individual records.

IV. RECOMMENDATION

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



Ondrea Johnson
Licensing Consultant

7/29/2026
Date