GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

August 17, 2026

Stephen Levy
Leisure Living Management of Holland Inc.
Suite 115
21800 Haggerty Rd.
Northville, MI 48167

RE: License #:	AL030006859
Investigation #:	2026A0356043
	Addington Place of Lakeside Vista Rotterdam Haus

Dear Mr. Levy:

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. If I am not available and you need to speak to someone immediately, please contact the local office at (616) 356-0100.

Sincerely,

Elizabeth Elliott, Licensing Consultant
Bureau of Community and Health Systems
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 901-0585

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL030006859
Investigation #:	2026A0356043
Complaint Receipt Date:	06/22/2026
Investigation Initiation Date:	06/22/2026
Report Due Date:	08/21/2026
Licensee Name:	Leisure Living Management of Holland Inc.
Licensee Address:	Suite 115, 21800 Haggerty Rd. Northville, MI 48167
Licensee Telephone #:	(616) 394-0302
Administrator:	Stephen Levy
Licensee Designee:	Stephen Levy
Name of Facility:	Addington Place of Lakeside Vista Rotterdam Haus
Facility Address:	340 West 40th Street Holland, MI 49423
Facility Telephone #:	(616) 394-0302
Original Issuance Date:	12/12/1988
License Status:	REGULAR
Effective Date:	04/04/2026
Expiration Date:	04/03/2028
Capacity:	20
Program Type:	AGED, ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
The facility lacks essential care supplies for resident care.	No
Resident A's room conditions are poor.	Yes
Additional Findings	Yes

III. METHODOLOGY

06/22/2026	Special Investigation Intake 2026A0356043
06/22/2026	Special Investigation Initiated - Telephone Natasha Grew, AFC Licensing Consultant.
06/24/2026	Contact - Document Received Another complaint re: Resident A and condition of room. Added to existing SI.
07/02/2026	Inspection Completed On-site
07/02/2026	Contact - Face to Face Eric Rash, Executive Director, Haile Pacholka, Clinical scheduler.
07/02/2026	Contact - Face to Face Resident's A&B.
07/02/2026	Contact - Face to Face Joanna Parcell, DCW, Jordan Hicks, med tech/DCW.
07/28/2026	Contact - Face to Face Eric Rash reviewed documents.
07/28/2026	Contact - Document Received Reviewed facility documents.
08/17/2026	Exit conference-Stephen Levy, licensee designee.

ALLEGATION: The facility lacks essential supplies for resident care.

INVESTIGATION: On 06/24/2026, I received a LARA-BCHS (Licensing and Regulatory Affairs, Bureau of Community Health Systems) online complaint. The complainant reported that the residents at this facility do not have briefs, bed pads or

wipes, staff must use wet paper towels as wipes because the facility is not ensuring family provides the needed supplies for care. The complainant reported many residents do not have toiletry items such as toothpaste or toothbrushes. The residents' needs are not being met because the facility does not hold family accountable for bringing in supplies, briefs, wipes and staff are expected to figure it out. Staff sees the shortages and remedies the situation by "stealing" from other residents rather than contacting anyone about the shortages. There are five buildings on this campus, and this complaint came in without a specific building so a special investigation was opened on each building.

On 07/02/2026, I conducted an unannounced inspection at the facility and interviewed Eric Rash, executive director and Haile Pacholka, clinical scheduler. Mr. Rash stated each resident room has its own supply of toiletries, mainly provided by the residents or the residents' family members. Mr. Rash stated the med tech's at the facility take inventory and staff contact families when supplies run low and the residents' family members are required to keep the resident's toiletry items supplied. Mr. Rash stated the residents' families are good at bringing supplies needed to the residents. Mr. Rash stated if the residents or their families cannot bring supplies, they have extra briefs and toiletries in the laundry room and in a closet that staff can access but the facility does not supply each resident with personal care items. Mr. Rash stated it is the responsibility of the resident or the resident's designated representative to provide the residents' personal care items.

On 07/02/2026, I observed supplies in the laundry room storage area and in a closet just inside the entrance to the facility. I walked up and down the facility hallway entering resident rooms and was able to observe toiletries in the residents' rooms such as toothpaste, toothbrushes, soap, wet wipes, briefs, if the resident used briefs, urinary incontinence pads, shampoo, conditioners, and skin lotion.

On 07/28/2026, I conducted an inspection at the facility and interviewed DCW (direct care worker) Joanne Parsell. Ms. Parsell stated it is up to the family or Hospice to supply personal care items such as wipes, briefs, shampoo, conditioner, lotion, toilet paper and other toiletries. Ms. Parsell stated wet wipes can be an issue because it is a supply that is used every day, so they run out often however, families donate wipes, and she has never had to use paper towels to wipe a resident or failed to provide proper care to a resident due to lack of supplies.

On 07/28/2026, I interviewed Resident A in her room. Resident A stated she has boxes of briefs, wipes and toilet paper in her room, which I observed. Resident A stated she gets packages of wet wipes when she receives boxes of adult briefs. Resident A stated if residents run out of wipes, staff usually "borrow" wipes from another resident or they get them from a supply they have elsewhere but she rarely runs out of wipes and usually donates wet wipes to the facility because she buys the wipes she likes from the store and gets them supplied with her adult brief orders. Resident A stated she places orders through Walmart online and has the supplies delivered to the facility. Resident A stated she orders wipes that she likes and then

donates the wipes provided with her brief orders to the facility. I observed toothpaste, toothbrush and toiletry supplies in Resident A's room and Resident A stated she is not lacking in personal care supplies.

I inspected several resident rooms and observed personal care items such as toilet paper, toothpaste, toothbrushes, wet wipes, powder, deodorant, perfume, hairspray, shampoo, conditioner and paper towels.

On 07/28/2026, I reviewed the Adult Foster Care Resident Admission Agreement which acts as the AFC Resident Care Agreement (RCA). The RCA documented under excluded services, *'The community shall not be responsible for furnishing or paying for any health care items or services not expressly included in this contract, including, without limitation, hospital services, physicians' services, nursing services and supplies, skilled nursing facility services, private duty personnel, medications, personal supplies, toiletries, vitamins, eyeglasses, eye examinations, hearing aids, ear examinations, dental work, dental examinations, orthopedic appliances, laboratory tests, x-ray services, rehabilitative services, or any other care of equipment beyond the community's routine levels of staffing and equipment.'*

The RCA documented*, 'the Community assumes that residents wish to provide their own supplies for personal care and hygiene. However, if you are unable to provide such supplies or choose not to provide them, the Community may provide you with certain personal items for an extra charge.'*

The RCA's are signed by the residents, the resident's designated representative and the community representative/administrator.

On 08/17/2026, I conducted an exit conference with Licensee Designee, Stephen Levy via email. Mr. Levy did not provide any additional information to this allegation, analysis, or conclusion of this applicable rule.

APPLICABLE RULE	
R 400.677(2)	**Resident hygiene, clothing.**
	(2) A licensee shall ensure the resident receives or has access to all of the following: (d) Availability of all the following resident hygiene supplies: (i) Deodorant. (ii) Feminine hygiene products. (iii) Razors and shaving cream. (iv) Shampoo. (v) Soap. (vi) Toothpaste. (vii) Toothbrushes. (viii) Toilet paper.

ANALYSIS:	The complainant reported that residents do not have toiletry and personal care items needed to complete their care needs. The complainant reported the residents' needs are not being met because the facility does not hold family accountable for bringing in supplies. There is not a preponderance of evidence to show that resident personal care needs are unmet because of lack of supplies. A violation of this applicable rule is not established.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: Resident A's room conditions are poor.

INVESTIGATION: On 06/24/2026, I received a LARA-BCHS (Licensing and Regulatory Affairs, Bureau of Community Health Systems) online complaint. The complainant reported the residents' room reeks of urine and ammonia so badly that it takes your breath away when you walk into the room. The complainant reported the smell seeps into the hallway so strongly and it cannot be healthy for Resident A to sit and breathe that air all day as it makes your throat burn if you are in the room too long. The complainant reported that there is no effort to clean the room or air it out. The resident eats her meals in the room, and the resident never leaves the room. The complainant reported Resident A refuses to allow staff to clean the room but still she should not be living in those conditions.

On 07/02/2026, I conducted an unannounced inspection at the facility and interviewed Resident A in her room. As I approached Resident A's room from the hallway, I did not detect an odor from outside the room into the hallway. Upon entering the room, I detected a strong odor of urine as the complainant reported. The room was warm. It was not dirty or overly cluttered, but the strong smell of urine was overwhelming. Resident A is not ambulatory and is either in her bed or relies on the use of a wheelchair to get around. Resident A stated she changes her own adult briefs and puts the soiled briefs in the garbage can next to her bed. Resident A stated she tells staff when she puts a soiled brief in the garbage so they can empty it but stated some of the staff, typically the "midnight staff" from (12:00a.m.-8:00a.m.) are the staff that ignore them and do not take the garbage out. Resident A stated especially if there is BM in the brief in the garbage, she contacts staff right away via the call button and "some staff remove it, some don't."

Resident A's bedding appeared clean, she has all the toiletries and things she needs at arm's length from where she is in her bed. Resident A appears clean and well-groomed but stated she only likes certain staff to shower her. Resident A stated she is "picky" when it comes to staff providing personal care and only allows staff who "knows her body" to give her showers. Resident A stated she is scheduled to receive showers on Monday, Wednesday, Friday and sometimes Saturdays and stated she

consistently gets showers. Resident A stated the facility has shampooed her carpet and maintains her room, but staff do not like to go into the room because of the smell of urine. Resident A asked me if her room smelled of urine and stated she was unable to smell it.

On 07/02/2026, I interviewed Mr. Rash and Ms. Pacholka in the office at the facility. Mr. Rash stated they have a constant struggle with Resident A and the condition of her room. Mr. Rash stated they have regular meetings with Resident A and her family. Staff pull her garbage, but she does not always notify staff when there is a brief that needs to be disposed of immediately. Mr. Rash stated Resident A does not allow staff to shower her as often as she is scheduled to be showered and only allows certain staff to shower her.

On 07/02/2026, I interviewed DCW Ms. Parsell, who stated Resident A does not allow anyone to assist her with toileting and while staff try to stay on top of keeping her garbage clean, her room still has a strong urine odor. Ms. Parsell stated staff empty Resident A's garbage daily and the room is cleaned weekly and as needed in between.

On 07/28/2026, I received and reviewed Resident A's assessment plan dated 02/19/2026. The assessment plan documented under housekeeping and laundry, Resident A requires staff assistance with 'daily bed making, 1 time(s) per day, every day, daily trash removal, 1 time(s) per day, every day, Resident A is dependent upon others to complete all aspects of tasks, 1 time per day, every 1 week(s) on Monday, staff completes all housekeeping tasks, 1 time(s) per day, every day.'

On 08/17/2026, I conducted an exit conference with Licensee Designee, Stephen Levy via email. Mr. Levy did not provide any additional information to this allegation, analysis, or conclusion of this applicable rule.

APPLICABLE RULE	
R 400.647	**Safety and maintenance of premises.**
	(1) A facility must be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
ANALYSIS:	The complainant reported that the resident's room has a strong smell of urine and ammonia and the smell seeps into the hallway. Upon inspection, I could not detect the smell of urine in the hallway outside of Resident A's room. I observed Resident A's room, it was not dirty or overly cluttered with unnecessary items, however, the smell of urine was overpowering inside the room and therefore, violation of this applicable rule is established.

CONCLUSION:	**VIOLATION ESTABLISHED**

ADDITIONAL FINDING

INVESTIGATION: On 07/28/2026, I reviewed Resident A's Resident Care Agreement. The RCA was signed by Resident A and dated 06/29/2022, the date of Resident A's admission to the facility.

On 07/28/2026, I interviewed Mr. Rash at the facility. Mr. Rash had not been working at the facility since 2022 and stated to his knowledge the RCA was not reviewed or updated since 2022.

On 08/17/2026, I conducted an exit conference with Licensee Designee, Stephen Levy via email. Mr. Levy did not provide any additional information to this allegation, analysis, or conclusion of this applicable rule.

APPLICABLE RULE	
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.
ANALYSIS:	Resident A's Resident Care Agreement was dated 06/29/2022. Mr. Rash reported the RCA has not been reviewed per this rule since 2022.
CONCLUSION:	**VIOLATION ESTABLISHED**

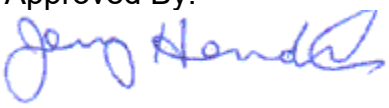
IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend the status of the license remains unchanged.

08/17/2026

Elizabeth Elliott Date
Licensing Consultant

Approved By:



08/17/2026

Jerry Hendrick Date
Area Manager