



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

October 10, 2022

Paul Carlson
Sojourner Aid OPCO, LLC
5364 Greenmeadow
Kalamazoo, MI 49009

RE: License #: AH390378211
Sojourner Place
5364 Greenmeadow
Kalamazoo, MI 49009

Dear Mr. Carlson:

An administrative review of your licensing activity for the past year has revealed substantial compliance with the public health code and administrative rules regulating home for the aged facilities. However, in accordance with MCL 333.20155(1) Home for the Aged cannot be renewed until license renewal fee is received and until an approved BFS rating is received. The current BFS is C – 8/10/2021.

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

Sincerely,

A handwritten signature in cursive script that reads "Julie Viviano".

Julie Viviano, Licensing Staff
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
Cell (616) 204-4300

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #:	AH390378211
Licensee Name:	Sojourner Aid OPCO, LLC
Licensee Address:	Ste. 3700 330 N. Wabash Chicago, IL 60611
Licensee Telephone #:	(312) 725-7000
Authorized Representative:	Paul Carlson
Administrator/Licensee Designee:	Tawnee Stone
Name of Facility:	Sojourner Place
Facility Address:	5364 Greenmeadow Kalamazoo, MI 49009
Facility Telephone #:	(269) 353-0416
Original Issuance Date:	04/24/2017
Capacity:	61
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/10/2022 – No Onsite Administrative Review Completed

Date of Bureau of Fire Services Inspection if applicable: BFS – C 8/10/2021

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference:

No. of staff interviewed and/or observed

No. of residents interviewed and/or observed

No. of others interviewed Role

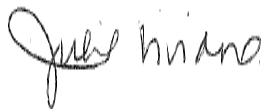
- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
- Number of excluded employees followed up? N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility is in compliance with all applicable rules and statutes. However, the current license renewal fee has not been received and the current BFS rating is C – 8/10/2021.

IV. RECOMMENDATION

Upon receipt of the renewal license fee and receipt an approved BFS rating, renewal of the license is recommended.



10/10/2022

Licensing Consultant

Date