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GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

July 14, 2025

Catherine Reese New Friends Dementia Community, LLC 3700 W Michigan Ave Kalamazoo. MI 49006

RE: License #: AL390299687

Vibrant Life Senior Living Kalamazoo Lodge 3

3708 W. Michigan Ave. Kalamazoo, MI 49006

Dear Ms. Reese:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

You are to submit documentation of compliance.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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,

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Ondrea Johnson, Licensing Consultant Bureau of Community and Health Systems

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

### I. IDENTIFYING INFORMATION

**License #:** AL390299687

Licensee Name: New Friends Dementia Community, LLC

**Licensee Address:** 3700 W Michigan Ave

Kalamazoo, MI 49006

**Licensee Telephone #:** (269) 372-6100

**Licensee/Licensee Designee:** Catherine Reese, Designee

Administrator: Fiorella Spalvieri

Name of Facility: Vibrant Life Senior Living Kalamazoo Lodge 3

**Facility Address:** 3708 W. Michigan Ave.

Kalamazoo, MI 49006

**Facility Telephone #:** (269) 372-6100

Original Issuance Date: 04/23/2012

Capacity: 20

Program Type: AGED

**ALZHEIMERS** 

## II. METHODS OF INSPECTION

Date	e of On-site Inspection(s):	06/24/2	025
Date of Bureau of Fire Services Inspection if applicable: 4/11/2025			
Date of Health Authority Inspection if applicable: N/A			
No.	of staff interviewed and/or observed of residents interviewed and/or observed of others interviewed 0 Role: 0		4 10
•	Medication pass / simulated pass observed?	' Yes ⊠	No 🗌 If no, explain.
•	Medication(s) and medication record(s) review	ewed? Y	es 🗵 No 🗌 If no, explain
•	Resident funds and associated documents r Yes No I If no, explain. Meal preparation / service observed? Yes		
•	Fire drills reviewed? Yes ⊠ No ☐ If no, e	xplain.	
•	Fire safety equipment and practices observe	d? Yes	⊠ No  If no, explain.
•	E-scores reviewed? (Special Certification Or If no, explain.  Water temperatures checked? Yes   No [	• ,	
•	Incident report follow-up? Yes ⊠ No ☐ If	no, expla	ain.
•	Corrective action plan compliance verified? N/A ⊠ Number of excluded employees followed-up		CAP date/s and rule/s: N/A ⊠
•	Variances? Yes ☐ (please explain) No ☐	N/A 🖂	

## **III. DESCRIPTION OF FINDINGS & CONCLUSION**

This facility was found to be in non-compliance with the following rules:

R 400.15204 Direct care staff; qualifications and training.

- (3) 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 competent before performing assigned tasks, which shall include being competent in all of the following areas:
  - (a) Reporting requirements.
  - (d) Personal care, supervision, and protection.
  - (f) Safety and fire prevention.

FINDINGS: Employee Karmela Carter missing fire safety and prevention, reporting requirements, and personal care, supervision, and protection training. Employee Whitney Davis missing reporting requirements, personal care, supervision and protection training.

R 400.15310 Resident health care.

(3) A licensee shall record the weight of a resident upon admission and monthly thereafter. Weight records shall be kept on file for 2 years.

FINDINGS: Weight records not recorded for Resident A from the time of admission.

R 400.15401 Environmental health.

(4) All garbage and rubbish that contains food wastes shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.

FINDINGS: No tight-fitting lid on kitchen garbage container.

R 400.15402 Food service.

(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.

FINDNGS: Freezer in kitchen not equipped with an thermometer.

R 400.15403 Maintenance of premises.

(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

FINDINGS: Tissue holder in bedroom 131 private bathroom broken.

A corrective action plan was requested and approved on 06/30/2025. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

#### IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

Ondrea Johnson

Licensing Consultant

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7/14/2025 Date