



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 1, 2025

Nichole VanNiman
Beacon Specialized Living Services, Inc.
Suite 110
890 N. 10th St.
Kalamazoo, MI 49009

RE: License #: AL800278708
Investigation #: 2026A1031004
Beacon Home at Wave Crest

Dear Ms. VanNiman:

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 feel free to 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,

A handwritten signature in blue ink that reads 'KDuda'.

Kristy Duda, Licensing Consultant
Bureau of Community and Health Systems
350 Ottawa, N.W. Unit 13, 7th Floor
Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #:	AL800278708
Investigation #:	2026A1031004
Complaint Receipt Date:	09/30/2025
Investigation Initiation Date:	10/02/2025
Report Due Date:	11/29/2025
Licensee Name:	Beacon Specialized Living Services, Inc.
Licensee Address:	Suite 110 890 N. 10th St. Kalamazoo, MI 49009
Licensee Telephone #:	(269) 427-8400
Administrator:	Israel Baker
Licensee Designee:	Nichole VanNiman
Name of Facility:	Beacon Home at Wave Crest
Facility Address:	28840 63rd Street Bangor, MI 49013
Facility Telephone #:	(269) 427-8400
Original Issuance Date:	03/21/2006
License Status:	REGULAR
Effective Date:	04/25/2025
Expiration Date:	04/24/2027
Capacity:	16
Program Type:	PHYSICALLY HANDICAPPED, DEVELOPMENTALLY DISABLED, MENTALLY ILL, AGED, AND TRAUMATICALLY BRAIN INJURED

II. ALLEGATION(S)

	Violation Established?
Staff are using drugs while caring for residents.	No
There is mold in Resident A's bedroom.	Yes
Resident A's special diet is not followed.	No

III. METHODOLOGY

09/30/2025	Special Investigation Intake 2026A1031004
09/30/2025	APS Referral
10/02/2025	Special Investigation Initiated - On Site
10/02/2025	Contact - Face to Face Resident A, Anna Smith, Jermaine Burrell, Joanna Deaguino, and Cassandra Cruz.
11/07/2025	Inspection Completed On-site
11/07/2025	Contact - Face to Face Interview with Desean Brown, Dayelle Daughtry, Laura Boylan, Resident A, Resident B, and Resident C.
11/13/2025	Contact - Document Requested - Assessments
11/18/2025	Contact – Documents Received and Reviewed

ALLEGATION:

Staff are using drugs while caring for residents.

INVESTIGATION:

On 10/2/25, I conducted an unannounced visit to the facility and interviewed direct care workers (DCW) Anna Smith, Jermaine Burrell, Joanna Deaguino, and Cassandra Cruz. I attempted to interview Resident A, however, he refused to engage in the interview process.

Ms. Smith, Mr. Burrell, Ms. Deaguino, and Ms. Cruz were consistent in reporting that they did not have any information regarding the allegations. They reported they have never observed other staff use drugs and denied using drugs themselves.

On 11/4/25, I received another complaint regarding staff using drugs while caring for residents.

On 11/7/25, I conducted an unannounced visit to the facility and interviewed the facility manager Dayelle Daughtry, assistant facility manager Desean Brown, Resident A, Resident B, and Resident C.

Ms. Daughtry and Mr. Brown reported they did not have any concerns regarding staff being under the influence of drugs while working with the residents. They denied using drugs while caring for the residents.

Resident A reported there are a few staff at the facility that will smoke marijuana outside while they are working. Resident A was not able not provide the names of the staff he observed using drugs. Resident A was asked if the staff were smoking cigarettes and he reported he knows what drugs are because he used to use drugs himself. Resident A reported everyone knows the staff are using drugs but will not say anything.

Resident B and Resident C reported they have never observed staff using drugs while they are working but has observed them smoke cigarettes outside.

On 11/7/25, I interviewed Resident A's case manager Laura Boylin through Case Management of MI who was also conducting a visit to the facility to visit Resident A. Ms. Boylin reported she visits the facility on a weekly basis and has never observed staff under the influence of drugs or use drugs. Ms. Boylin reported Resident A has been using drugs in the community and comes back to the facility under the influence. Ms. Boylin reported Resident A has a history of drug abuse and will often blame others when he is caught using drugs as he is not supposed to be.

APPLICABLE RULE	
R 400.629	Direct care staff; qualifications and training.
	(4) Direct care staff shall possess all of the following qualifications before working independently: (a) Be capable of meeting the physical, emotional, intellectual, and social needs of each resident.
ANALYSIS:	There was no evidence found to support that staff are using drugs and not capable of meeting the needs of the residents. Multiple staff, social workers, and residents reported they have

	never observed staff use drugs while working at the facility and caring for residents.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

There is mold in Resident A's bedroom.

INVESTIGATION:

On 11/7/25, I conducted an unannounced visit to the facility as I received a new complaint on 11/4/25 that there was mold in Resident A's bedroom.

Ms. Boylin reported Resident A has not been keeping his room clean and denies staff access to his room to clean it. Ms. Boylin reported Resident A has brown matter all over the walls in his bedroom and she is not sure if it is bodily fluids or tobacco.

Resident A reported there was mold on his window, and his walls were very dirty. Resident A allowed me access to his room to see the mold and residue on his walls. There was no mold observed in his bedroom. There was dirt on his windowsill outside of the screen which appeared to have clumped up after being wet from the rain. Resident A's walls were observed to be dirty as there were thick brown and yellowish substances on multiple walls. Resident A reported he tried to clean it but believes his walls absorbed the dirt and could not be cleaned. Resident A admitted that he has refused help from staff to clean his room.

Resident A's assessment read that he requires prompting and assistance to maintain the cleanliness of his room.

APPLICABLE RULE	
R 400.647	Safety and maintenance of premises.
	(5) Floors, walls, and ceilings must be cleanable, maintained clean, and in good repair.
ANALYSIS:	Although Resident A admitted to not allowing staff to assist with cleaning his bedroom, Resident A's walls were not clean as there were multiple areas covered in a brown/yellowish substance, and it appeared the walls had not been cleaned for an extended period of time.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Resident A's special diet is not followed.

INVESTIGATION:

Ms. Smith, Mr. Burrell, Ms. Deaguino, Ms. Cruz, Ms. Daughtry, and Mr. Brown were consistent in reporting that Resident A is very particular about his food due to being a diabetic. They all reported that Resident A has reported that sugar is poison to his body and believes the facility is poisoning the residents. They reported the facility provides him with healthy options and buys him specialty sugar-free snacks just for him. The staff were able to show me Resident A's snacks that were kept in a designated area within the kitchen. I reviewed the menus that were posted within the kitchen and the meals provided were adequate to meet the requirements of a diabetic diet. Staff reported they will alter meals as needed to meet the requirements of Resident A's diet.

Ms. Boylin reported the facility follows Resident A's diet and does provide him with sugar-free items and meals that are healthy. Ms. Boylin reported Resident A has a history of complaining about food provided even if it is items, he specifically requested.

Resident A reported he does not like the food provided at the facility. Resident A reported the facility does provide food that follows his diet, but he does not want to eat it. Resident A had snacks in his bedroom that were sugar-free, and he reported the facility purchased it for him.

On 11/18/25, I received and reviewed Resident A's health appraisal and AFC assessment. Both documents read that Resident A requires a diabetic diet.

APPLICABLE RULE	
R 400.663	Nutrition; adoption by reference.
	(5) A resident who has a prescribed diet by an appropriately licensed health care professional shall be provided that diet.
ANALYSIS:	Based on interviews and the review of documentation, there was no evidence found to support that the facility is not following Resident A's diabetic diet. Resident A reported the facility provides him with food to meet his diet, but he does not like the meals provided. Resident A reported the facility purchases sugar-free snacks and food items as requested.

CONCLUSION:	VIOLATION NOT ESTABLISHED
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IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, it is recommended that the status of the license remain unchanged.

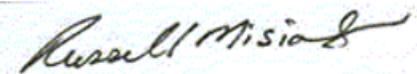


11/18/25

Kristy Duda
Licensing Consultant

Date

Approved By:



11/25/26

Russell B. Misiak
Area Manager

Date