



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

February 18, 2026

Desiree Biggs
Coleman Fields Assisted Living LLC
219 Church St.
Auburn, MI 48611

RE: License #: AL560392694
Coleman Fields Assisted Living
288 W. Old Orchard TRL
Coleman, MI 48618

Dear Ms. Biggs:

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility.

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 cursive script that reads "Johnnie Daniels".

Johnnie Daniels, Licensing Consultant
Bureau of Community and Health Systems
350 Ottawa Ave NW
Grand Rapids MI 49503

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
ADDENDUM TO ORIGINAL LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AL560392694
Licensee Name:	Coleman Fields Assisted Living LLC
Licensee Address:	288 W. Old Orchard Trail Coleman, MI 48618
Licensee Telephone #:	(989) 442-4184
Administrator/Licensee Designee:	Desiree Biggs
Name of Facility:	Coleman Fields Assisted Living
Facility Address:	288 W. Old Orchard TRL Coleman, MI 48618
Facility Telephone #:	(989) 442-4168
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED AGED

II. Purpose of Addendum

The licensee submitted a modification request to provide respite services within the facility.

III. Methodology

2/10/26 – Contact – Document Received- Received modification request for respite services. Received program statement, admission and discharge policies.

2/11/26 – Contact – Document Received - Received program statement, admission and discharge policies.

IV. Description of Findings and Conclusions

On 2/10/2026, the licensee designee submitted a modification request to also provide respite services, which is the temporary provision of AFC services. On 2/11/26 The licensee submitted an additional program statement and admission and discharge policies documenting respite services will be provided in the facility.

Within these documents, the licensee included a statement documenting residents requiring respite services would count towards the facility's licensed capacity. The licensee included a statement documenting that the provision of respite care could not impair the ability of the facility to meet the care needs of the residents or disrupt the residents who live in the facility. The licensee documented residents requiring respite services must complete all the required AFC documents at the time of admission and the licensee acknowledged an understanding of compliance with evacuation procedures when providing respite care.

V. Recommendation

I approve the licensee's request to provide respite care that does not to exceed the licensed capacity of the facility.



2/18/26

Johnnie Daniels
Licensing Consultant

Date

Russell Misiak

2/20/26

Russell B. Misiak
Area Manager

Date