



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

February 11, 2026

Lori McLaughlin
North Woods Village At Kalamazoo
6203 Stadium Dr
Kalamazoo, MI 49009

RE: License #: AH390394454
**North Woods Village At Kalamazoo
6203 Stadium Dr
Kalamazoo, MI 49009**

Dear Lori McLaughlin:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. 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 (517) 335-5985.

Sincerely,

Julie Viviano, Licensing Staff
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

| | |
|---|--|
| License #: | AH390394454 |
| Licensee Name: | MITN, LLC |
| Licensee Address: | 6203 Stadium Dr Kalamazoo, MI 49009 |
| Licensee Telephone #: | (574) 247-1866 |
| Authorized Representative: | Lori McLaughlin |
| Administrator/Licensee Designee: | Amanda Buhl |
| Name of Facility: | North Woods Village At Kalamazoo |
| Facility Address: | 6203 Stadium Dr Kalamazoo, MI 49009 |
| Facility Telephone #: | (269) 397-2200 |
| Original Issuance Date: | 03/11/2019 |
| Capacity: | 61 |
| Program Type: | AGED ALZHEIMERS |

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 2/9/2026

Date of Bureau of Fire Services Inspection if applicable: N/A

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 2/9/2026

No. of staff interviewed and/or observed 13

No. of residents interviewed and/or observed 25

No. of others interviewed 0 Role N/A

- 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. The home does not keep resident funds in trust.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Reviewed disaster plans along with interviewed staff on policies and procedures.
- 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: N/A
- Number of excluded employees followed up? 0 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

| | |
|--------------------|---|
| R 325.1923 | Employee's health. |
| | (2) A home shall provide initial tuberculosis screening at no cost for its employees. New employees shall be screened within 10 days of hire and before occupational exposure. |
| ANALYSIS: | Review of 8 employee records revealed that while employees received the TB screenings, two of the employees TB screenings were completed outside of the 10 days of hire. Therefore, the facility is in violation. |
| CONCLUSION: | VIOLATION ESTABLISHED |

| | |
|--------------------|--|
| R 325.1954 | Meal and food records. |
| | The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period. |
| ANALYSIS: | Inspection revealed the meal census and food records from November 2025 to February 2026 were incomplete and/or missing entries. It could not be determined the kind of food or the amount of food that was served during the preceding 3-month period. Therefore, the facility is in violation. |
| CONCLUSION: | VIOLATION ESTABLISHED |

| | |
|-------------------|--|
| R 325.1975 | Laundry and linen requirements. |
| | (1) A new construction, addition, major building change, or conversion after November 14, 1969 shall provide all of the following: (a) A separate soiled linen storage room. (b) A separate clean linen storage room. |
| ANALYSIS: | Inspection revealed clean linens were found stored with other miscellaneous items such as a wheelchair, boxes, brooms, lost |

| | |
|--------------------|--|
| | <p>and found items etc. This poses a risk for cross-contamination. Clean linens must have a designated separate storage room.</p> <p>Inspection also revealed soiled linen items were stored in a general storage closet in the memory care area along with garbage, housekeeping items, and kitchenette items etc. This poses a risk for cross-contamination. Soiled linens must have a designated and separate storage space from all other items.</p> <p>Soiled linen items such as miscellaneous clothing, shoes etc. were found behind the dryers located in the memory care unit laundry room. This poses a risk of cross contamination and is a fire hazard. Therefore, the facility is in violation.</p> |
| CONCLUSION: | VIOLATION ESTABLISHED |

| | |
|--------------------|--|
| R 325.1976 | Kitchen and dietary. |
| | (13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and sanitized after each use and shall be handled and stored in a manner which will protect it from contamination. |
| ANALYSIS: | Review of the January and February 2026 dishwasher sanitization logs revealed incomplete and/or blank entries of dishwasher sanitization temperatures. It could not be determined if the dishwasher was tested thoroughly to ensure cleanliness and sanitization of dishware and utensils due to the incomplete and/or blank entries. Therefore, the facility is in violation. |
| CONCLUSION: | VIOLATION ESTABLISHED |

IV. RECOMMENDATION

Receipt of an acceptable corrective action plan is requested and due by 2/27/2026.

Julie Marino

2/11/2026

Date

Licensing Consultant