



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

May 14, 2026

Prince Andrew  
Stone Home Partners  
611 Douglas Ave  
Kalamazoo, MI 49007

RE: License #: AS390419707  
**Stone Home Partners 1**  
**611 Douglas Ave**  
**Kalamazoo, MI 49007**

Dear Prince Andrew:

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled.

Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan within 15 days. 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.

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,

A handwritten signature in black ink that reads "Cathy Cushman". The signature is written in a cursive, flowing style.

Cathy Cushman, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(269) 615-5190

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS390419707
<b>Licensee Name:</b>	Stone Home Partners
<b>Licensee Address:</b>	611 Douglas Ave Kalamazoo, MI 49007
<b>Licensee Telephone #:</b>	(575) 329-2046
<b>Licensee Designee:</b>	Prince Andrew
<b>Administrator:</b>	Mkama Martine
<b>Name of Facility:</b>	Stone Home Partners 1
<b>Facility Address:</b>	611 Douglas Ave Kalamazoo, MI 49007
<b>Facility Telephone #:</b>	(575) 329-2046
<b>Original Issuance Date:</b>	11/17/2025
<b>Capacity:</b>	5
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection: 04/07/2026 – interim inspection

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 2  
No. of residents interviewed and/or observed 0  
No. of others interviewed [redacted] Role: [redacted]

- Medication pass / simulated pass observed? Yes  No  If no, explain.  
No residents have resided in the facility during the temporary license period; therefore, a medication pass was unable to be observed.
- Medication(s) and medication record(s) reviewed? Yes  No  If no, explain.  
No residents have resided in facility during the temporary license period; therefore, medication records were unable to be reviewed.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain. No residents have resided in the facility during the temporary license period; therefore, residents funds and associated documents were unable to be reviewed.
- Meal preparation / service observed? Yes  No  If no, explain.  
No residents have resided in the facility during the temporary license period and a meal was not observed during the interim inspection on 04/07/2026; however, the food service equipment was in good repair, and the facility appeared equipped to prepare and serve adequate meals.
- Fire drills reviewed? Yes  No  If no, explain.  
No residents were in care during the temporary license period; therefore, fire drills with residents were not conducted.
- Fire safety equipment and practices observed? Yes  No  If no, explain.
- E-scores reviewed? (Special Certification Only) Yes  No  N/A   
If no, explain.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  No  If no, explain.  
No residents have been in care during the temporary license period; therefore, there were no incident reports to follow up on.
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:  
N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes  (please explain) No  N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

**MCL 400.713** License required; application; forms; investigation; on-site evaluation; issuance or renewal of license; disclosures; maximum number of persons; stating type of specialized program; issuance of license to specific person at specific location; transferability of license; sale of facility; notice; items of noncompliance; refusal by department to issue or renew license; conditions; unlicensed facility; violation as misdemeanor; penalty; receipt of completed application; issuance of license within certain time period; inspections; report; criminal history and records check; storage of fingerprints in automated fingerprint identification system database; convictions; "completed application" defined.

(3) Before issuing or renewing a license, the department shall investigate the activities and standards of care of the applicant and shall make an on-site evaluation of the facility. On-site inspections conducted in response to the application may be conducted without prior notice to the applicant. On-site inspections conducted for renewing a license may be conducted within 12 months before the expiration date of the current license without impact on the license renewal date or the license fee. Subject to subsections (9), (10), and(11), the department shall issue or renew a license if satisfied as to all of the following:

(b) The applicant's compliance with this act and rules promulgated under this act.

**FINDING:** An interim inspection was completed in the facility on 04/07/2026. No residents had been admitted to the facility since issuance of the temporary license on 11/17/2025. On 05/14/2026, the licensee designee, Prince Andrew, confirmed there were still no residents in care. Therefore, resident care and quality of care could not be assessed for renewal to a regular license.

**IV. RECOMMENDATION**

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.

*Cathy Cushman*

05/14/2026

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Cathy Cushman  
Licensing Consultant

Date

Approved:

*Dawn Timm*

05/14/2026

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Dawn Timm  
Area Manager

Date