GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

November 4, 2026

Cavel Young
Comfort Living Home L.L.C. #2
2111 N. Drake Rd.
Kalamazoo, MI 49006

RE: License #: AS390402639
Investigation #: 2026A0578046
Comfort Living Home #2

Dear Cavel Young:

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 (517) 335-5985.

Sincerely,



Eli DeLeon, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(269) 251-4091

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS390402639
Investigation #:	2026A0578046
Complaint Receipt Date:	09/14/2026
Investigation Initiation Date:	09/15/2026
Report Due Date:	11/13/2026
Licensee Name:	Comfort Living Home L.L.C. #2
Licensee Address:	2111 N. Drake Rd. Kalamazoo, MI 49006
Licensee Telephone #:	(269) 760-1182
Administrator:	Cavel Young
Licensee Designee:	Cavel Young
Name of Facility:	Comfort Living Home #2
Facility Address:	2918 W. Milham Avenue Portage, MI 49024
Facility Telephone #:	(269) 760-1182
Original Issuance Date:	06/11/2020
License Status:	REGULAR
Effective Date:	06/08/2025
Expiration Date:	06/07/2027
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED

II. ALLEGATION(S)

	Violation Established?
Every smoke detector in this facility was removed from the ceiling and placed in a cabinet in the dining room.	Yes

III. METHODOLOGY

09/14/2026	Special Investigation Intake 2026A0578046
09/15/2026	Special Investigation Initiated - On Site
09/15/2026	APS Referral
09/15/2026	Special Investigation Completed On-site-Interview with direct care staff Joy Okanta.
09/15/2026	Contact-Telephone- Interview with licensee designee Cavel Young.
09/18/2026	Contact-Documentation Reviewed- *Sales Receipt* for Macks Fire Protection Company.
10/13/2026	Special Investigation Completed On-site- Inspection of facility.
10/26/2026	Exit Conference- With licensee designee Cavel Young.

ALLEGATION: Every smoke detector in this facility was removed from the ceiling and placed in a cabinet in the dining room.

INVESTIGATION:

On 09/14/2026, I received an email from Complainant. Complainant reported that on 09/10/2026, every smoke detector in this facility was observed removed from the ceiling and stored in a cabinet in the dining room. Complainant provided three separate photos alleged to be from the inside of this facility and dated 09/11/2026. Two photographs provided by Complainant and alleged to be from inside this facility, show two empty smoke detectors mounting brackets attached to the ceiling. One photograph provided by Complainant and alleged to be from inside this facility shows eight smoke detectors tucked inside a piece of cabinet furniture on top of a computer laptop and underneath a large printer. I noted no meta data was available for the pictures provided by Complainant.

On 09/14/2026, I completed an unannounced investigation on-site at this facility and interviewed direct care staff Joy Okanta regarding the allegations. Joy Okanta was unaware of any concerns related to the smoke detectors in this facility. While at the facility, I inspected the common areas, kitchen, and hallways between bedroom areas and found no smoke detectors present. In the dining room of this facility, I observed several smoke detectors removed from their hard wiring and placed on a cabinet shelf. I noted the smoke detectors were still in the same position on this cabinet shelf with one smoke detector placed at an angle on another smoke detector, as documented by the photographs provided by Complainant.

On 09/14/2026, I interviewed licensee designee Cavel Young regarding the allegations. Cavel Young reported that the smoke detectors at this facility are also carbon monoxide detectors, and that recently one detector had begun to chirp, which caused all the smoke detectors to chirp as well. Cavel Young reported that she contacted Macks Fire Protection Company and was told to remove all the smoke detectors from their mounting brackets and clean off any dust that might be present and causing this chirping noise. Cavel Young reported putting the smoke detectors back in their location and the smoke detectors seemed to be functioning normal but then began chirping again this week. Cavel Young reported that she contacted Macks Fire Protection again and they arranged a service appointment at this facility on 09/15/2026.

On 09/18/2026, I reviewed a *Sales Receipt* for Macks Fire Protection Company provided by licensee designee Cavel Young. The *Sales Receipt* from Macks Fire Protection Company documented that on 09/15/2026, a basic service call and smoke detector inspection occurred.

On 10/13/2026, I completed an unannounced inspection on-site at this facility and found smoke detectors in the common areas, kitchen, and hallways between bedroom areas. While at the facility, I tested these smoke detectors and found them to be operating appropriately and interconnected.

APPLICABLE RULE	
R 400.647	**Safety and maintenance of premises.**
	(1) A facility must be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
ANALYSIS:	Based upon my investigation, which consisted of interviews with licensee designee Cavel Young, as well as observations made during an unannounced investigation on-site and a review of pertinent documentation relevant to this investigation, the interconnected smoke detectors were removed from the main floor of this facility for several days before being serviced and

	returned to their respective locations and functioning properly.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt of an acceptable written plan of correction, it is recommended that this license continues on regular status.

11/04/2026

Eli DeLeon Date
Licensing Consultant

Approved By:

11/04/2026

Dawn N. Timm Date
Area Manager