

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

May 22, 2023

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

#### RE: License #: AS390402639 Comfort Living Home #2 2918 W. Milham Avenue Portage, MI 49024

Dear Ms. Young:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

• You are to submit documentation of compliance.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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) 284-9730.

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

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

# I. IDENTIFYING INFORMATION

License #:	AS390402639
Licensee Name:	Comfort Living Home L.L.C. #2
Licensee Address:	2111 N. Drake Rd. Kalamazoo, MI 49006
Licensee Telephone #:	(126) 976-0118
Licensee/Licensee Designee:	Cavel Young
Administrator:	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
Capacity:	6
Program Type:	AGED TRAUMATICALLY BRAIN INJURED

# **II. METHODS OF INSPECTION**

Date of On-site Inspection(s):	05/19/2023	
Date of Bureau of Fire Services Inspection if app	licable: N/A	
Date of Health Authority Inspection if applicable:	N/A	
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed 0 Role: 0	1 4	
• Medication pass / simulated pass observed? Yes $\boxtimes$ No $\square$ If no, explain.		
• Medication(s) and medication record(s) reviewed? Yes 🛛 No 🗌 If no, explain.		
<ul> <li>Resident funds and associated documents reviewed for at least one resident? Yes X No I If no, explain.</li> <li>Meal preparation / service observed? Yes X No I If no, explain.</li> </ul>		
• Fire drills reviewed? Yes 🛛 No 🗌 If no, explain.		
● Fire safety equipment and practices observed? Yes ⊠ No □ If no, explain.		
<ul> <li>E-scores reviewed? (Special Certification Only) Yes No N/A</li> <li>If no, explain.</li> <li>Water temperatures checked? Yes No I If no, explain.</li> </ul>		
● Incident report follow-up? Yes ⊠ No □ If no, explain.		
<ul> <li>Corrective action plan compliance verified? N/A </li> <li>Number of excluded employees followed-up</li> </ul>		
• 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:

## R 400.14511 Flame-producing equipment; enclosures.

(2) Heating plants and other flame-producing equipment located on the same level as the residents shall be enclosed in a room that is constructed of material which has a 1-hour-fire resistance rating, and the door shall be made of 1 3/4-inch solid core wood. The door shall be hung in a fully stopped wood or steel frame and shall be equipped with an automatic self-closing device and positive-latching hardware.

The door leading to the furnace and hot water heated was not equipped with a selfclosing device.

## R 400.14511 Flame-producing equipment; enclosures.

#### (3) A permanent outside vent that cannot be closed shall be incorporated in the design of heating plant rooms so that adequate air for proper combustion is assured.

The vent from the gas dryer to outside of the facility was not permanently attached.

#### R 400.14511 Flame-producing equipment; enclosures.

(4) Combustible materials shall not be stored in rooms that contain heating equipment, a water heater, an incinerator, or other flame-producing equipment.

Combustible materials were stored in the same room as the furnace.

A corrective action plan was requested and approved on 05/19/2023. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

## **IV. RECOMMENDATION**

An acceptable corrective action plan has been received. Renewal of the license is recommended.

In The -05/22/2023

Eli DeLeon Licensing Consultant Date