



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

February 11, 2025

Nichole VanNiman
Beacon Specialized Living Services, Inc.
Suite 110
890 N. 10th St.
Kalamazoo, MI 49009

RE: License #: AM030402102
Investigation #: 2025A0340014
Beacon Home at Bridge Street

Dear Ms. VanNiman:

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 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 (616) 356-0183.

Sincerely,

A handwritten signature in blue ink that reads "Rebecca Piccard". The signature is fluid and cursive, with the first name "Rebecca" and last name "Piccard" clearly distinguishable.

Rebecca Piccard, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 446-5764

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM030402102
Investigation #:	2025A0340014
Complaint Receipt Date:	01/02/2025
Investigation Initiation Date:	01/07/2025
Report Due Date:	03/03/2025
Licensee Name:	Beacon Specialized Living Services, Inc.
Licensee Address:	Suite 110 890 N. 10th St. Kalamazoo, MI 49009
Licensee Telephone #:	(269) 427-8400
Administrator:	Nichole VanNiman
Licensee Designee:	Nichole VanNiman
Name of Facility:	Beacon Home at Bridge Street
Facility Address:	691 West Bridge Street Plainwell, MI 49080
Facility Telephone #:	(269) 204-6493
Original Issuance Date:	07/16/2020
License Status:	REGULAR
Effective Date:	01/16/2025
Expiration Date:	01/15/2027
Capacity:	12
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
There is not adequate food in the home for the 11 residents.	Yes
Additional Findings	Yes

III. METHODOLOGY

01/02/2025	Special Investigation Intake 2025A0340014
01/07/2025	APS Referral Complaint received from APS
01/07/2025	Special Investigation Initiated - On Site
01/07/2025	Inspection Completed On-site
01/07/2025	Contact - Telephone call made Stella Keeler-left voicemail
01/21/2025	Contact - Telephone call made Keyaria Johnson
01/21/2025	Contact - Telephone call made Stella Keeler
01/21/2025	Contact - Telephone call made Nicole VanNiman
01/27/2025	Contact - Document Sent from Nicole VanNiman
01/27/2025	Contact – Document Received From Keyaria Johnson
02/07/2025	Exit Conference Designee Nicole VanNiman

ALLEGATION: There is not adequate food in the home for the 11 residents.

INVESTIGATION: On January 2, 2025, a complaint was filed with BCHS Online Complaints by Adult Protective Services. It stated that on 12/30/2024 there was not enough food in the home. Staff purchased food with their own money for the

residents to eat to make sure they did not go without. This complaint was sent to me a week after it was filed by APS.

On January 7, 2025, I conducted an unannounced home inspection. I first spoke with home manager Kaitlyn Taylor whom I informed of the allegations. She informed me that she makes weekly grocery orders on Friday. She showed me the pantry, refrigerators, and freezers. It appeared, on this date, that there was adequate food for the residents in the home. My inspection occurred over lunch time and staff was preparing lunch during this time. I witnessed food served to residents to be brats, baked beans, and mixed vegetables.

Ms. Taylor also provided me with a receipt for food purchased on 12/23/24. She explained that there is always plenty of food in the home but feels that staff do not want to make the food. They prefer “quick and easy” meals which require little preparation. I asked Ms. Taylor about staff buying food with their own money. She stated she had no knowledge of this. No one has requested reimbursement of funds either.

Ms. Taylor provided me with the names and contact information for 1st shift staff who would be responsible for making meals for residents.

During my inspection I interviewed Residents A, B, C, D, E and F. None of the residents reported going without food at any time. They all reported that they also have snacks available when they want.

On January 21, 2025, I made contact with staff Keyaria Johnson. I informed her of the complaint regarding a lack of food in the home. Ms. Johnson stated that Ms. Taylor says that she “orders all this food”, but in reality, it does not feed 11 male residents, and they run out of food before another order is made. Ms. Johnson does not believe groceries are being ordered every week. If they are, it is not what is on the menu or nearly enough to make 3 meals per day for 7 days. There are a lot of frozen vegetables in the freezer, but nothing else to go with it, definitely not enough protein for the residents. I asked Ms. Johnson if the grocery order contains the items needed for the menu the following week. She stated that it would make sense if it was done that way, but Ms. Johnson did not believe there was any method to what is on the order. Ms. Johnson added that rarely do the staff have the food that is listed on the menu. She acknowledged that staff sometimes write in what the substitutions are, but often it does not happen. She gave an example of when she was recently working “pork loin” was on the menu but there was no pork loin in the home to make so she made chicken. Ms. Johnson states she makes chicken a lot and the residents complain about the lack of diversity in their meals.

Ms. Johnson stated that Ms. Taylor is a fill-in for Home Manager. When the previous home manager was there, these issues did not exist. There is also a lack of paper products (staff utilize paper plates and napkins for the residents), disposable forks, and there is never enough protein for the residents. Ms. Johnson

has complained to Ms. Taylor but it has not yet been resolved. Ms. Johnson states she has also bought food for the residents out of her own pocket and has not been reimbursed. Ms. Johnson stated she did not know she could be reimbursed.

I asked Ms. Johnson if there are other people she could contact about the menu and food shortage. She stated that Designee Ms. VanNiman is also aware, but she also seems to be dismissive about the issue.

On January 21, 2025, I interviewed staff Stella Keeler. I informed Ms. Keeler about the allegations made. Ms. Keeler confirmed that there is not enough food in the home for the 11 male residents to eat 3 meals per day for a week. She stated she also has purchased food with her own money and has not been reimbursed. Ms. Keeler states she has informed Ms. Taylor about this but Ms. Taylor has not reimbursed Ms. Keeler's money.

Ms. Keeler states that Ms. Taylor does make grocery orders, however, the grocery orders do not match what is on the menu. Staff need to alter the menu constantly because the food they need is not available. Ms. Keeler states she has also contacted Ms. VanNiman and Ms. VanNiman instructed her to make different meals for every resident to use up whatever food is available in the home. Ms. Keeler is also aware that there is a debit card to be used for groceries, but she is not allowed to use it and has no access to it. Ms. Keeler feels that the people above her are not sympathetic to the issue.

Ms. Keeler added that the "recipes" staff follow when making meals was not portioned for 11 residents until recently. For several months prior the recipes were portions for 8 servings. She would then need to make something else to cover the remaining 3 servings. I asked Ms. Keeler if there are ever leftovers. She said there is not. There is not even enough food for residents to have "seconds". Ms. Keeler added that staff are not allowed to have food delivered (like Uber Eats etc.) but are allowed to eat food that is made in the home for their meals when they are working. However, there is never enough food for that so staff have to order food for delivery for themselves.

Ms. Keeler stated there is no assigned Home Manager at this time and Ms. Taylor is the "District Manager". She stated that maybe these issues exist because there is no assigned home manager.

On January 21, 2025, I contacted Ms. VanNiman. I informed her of the allegations. I requested more grocery receipts from her as well as a copy of the menu for January. Ms. VanNiman responded to the allegations stating that staff do not want to make what is on the menu, so they say there is no food. They want "fast food" or delivery and do not want to cook.

Ms. VanNiman stated that there is a debit card available, and they can call someone to get food if they really do not have food available to make for the residents. I

asked Ms. VanNiman about changes made to the menu if staff make something different. She stated they should be making those documentations on the menu but she did not know if it was being done.

I began to compare what was on the menu to what was on the grocery order. It was difficult to compare as the menu had very few dates. The grocery orders for the past month were dated 12/23/24, 1/4/25, and 1/12/25. While reviewing the receipts I did find them to be filled with random items and very few proteins and the amount of protein did not seem adequate for 11 men.

The 12/23/24 receipt included only 3 pounds of ham steaks and 9 pounds of chicken thighs for “dinner” meals. Other possible proteins were lunchmeat, fish sticks and 3 pounds of ground pork.

The 1/4/25 receipt included less than 6 pounds of chicken breasts, 7 pounds of ground turkey, frozen chicken nuggets, lunchmeat, 1 pound of sausage, 9 pounds of chicken thighs, 3 pounds of ground beef, 3-ish pounds of round steak.

The 1/12/25 receipt included 9 pounds chicken tenderloins, 3 pounds frozen tilapia, 2 pounds ground beef, 2-8 count packs of hotdogs, 2-8 count packs of turkey dogs, 4-6 pounds of chops (not clear of the weight), plus lunchmeat and tuna.

Not only did this seem inadequate to feed 11 men lunch and dinner 7 days a week, but it did not appear to follow any type of meal planning.

On January 27, 2025, I received several messages from Ms. Johnson from a group text for the Bridge St. Home staff dated the previous Saturday 1/25/2025. She was working at the home and there was not adequate food for the residents’ meal. She contacted Ms. Taylor and forwarded me the texts exchanged between them. By reading the exchange between Ms. Taylor and Ms. Johnson, there was obvious confusion regarding whether or not there was an order made to Walmart and if or when it was picked up. Ms. Taylor indicated that the order was “probably cancelled”. Another order was placed, and staff would pick it up on that date.

In the meantime, there was an issue about food for lunch and possibly getting something delivered. Staff were discussing the fact that only management is able to access the debit cards, and no one was responding about delivery information.

Ms. Johnson sent pictures of the refrigerators, freezer, and pantry and it showed very limited food quantities: popsicles, bread, frozen bologna, sausage, vegetables, lunchmeat, maybe some bacon, ham and chicken. In the pantry there was canned fruit, soup, and beans. There was peanut butter and jelly, rice, soup, and barley in the cupboard.

Ms. Johnson stated that she was attempting to contact Ms. Taylor or the Assistant Manager about the grocery order but never got a response. No one knew when the

order was placed or what time was the pickup. She stated that “today they’re scribbling and scrambling around the house trying to scrape something up for them to cook for the guys”.

I reviewed the menu received from Ms. VanNiman. For 1/25/2025 what was supposed to be made for the residents was: Breakfast- pancakes from mix, low calorie syrup, skim milk (except 2% for 2 residents) Apple or orange juice choice (1/2 C. apple juice for one resident). It was undetermined what was on the menu for lunch and dinner as the menu does not have dates on them.

APPLICABLE RULE	
R 400.14313	Resident nutrition.
	(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal.
ANALYSIS:	<p>The allegation was made that there is not enough food for the 11 residents at the Bridge Street Home.</p> <p>Ms. Taylor reports that she makes weekly grocery orders and had no knowledge of a food shortage. She provided me with one receipt which was large, but did not contain adequate food for the week for 11 men.</p> <p>Ms. Keeler and Johnson both report inconsistent grocery orders, not enough food purchased, and often times food not available to prepare which matches what’s on the menu.</p> <p>I observed food being prepared which did not match the menu.</p> <p>Ms. VanNiman provided additional receipts and menus. None of the receipts included adequate proteins for 11 men. It was also not possible to match the menu items with the food receipts.</p> <p>Ms. Johnson provided additional text message exchanges between her, other staff, and Ms. Taylor which showed a clear frustration regarding the lack of food in the home and the lack of food available to make what was on the menu.</p> <p>There is a preponderance of evidence to support the rule violation of lack of food for the 11 male residents.</p>

CONCLUSION:	VIOLATION ESTABLISHED
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ADDITIONAL FINDINGS

INVESTIGATION: While conducting the above investigation, it was discovered that substitutions were being made to the menu when staff make alternative meals for residents, but they are not documenting the changes.

I witnessed residents being served brats, baked beans, and vegetables. On the menu for this date was supposed to be "hot tuna sandwich, mixed vegetables, animal crackers". There was also no alternative documented on the menu or elsewhere.

Staff Johnson and Keeler admitted that substitutions were often made but not changed on the menu.

APPLICABLE RULE	
R 400.14313	Resident nutrition.
	(4) Menus of regular diets shall be written at least 1 week in advance and posted. Any change or substitution shall be noted and considered as part of the original menu.
ANALYSIS:	<p>It was discovered that staff are not following the menu and not documenting substitutions.</p> <p>I witnessed a meal being prepared which did not match what was on the menu.</p> <p>Ms. Keeler and Ms. Johnson confirmed that often they do not make what is on the menu because the food is not available.</p>
CONCLUSION:	VIOLATION ESTABLISHED

On February 07, 2024, I emailed Ms. VanNiman after repeated failed attempts to contact her. I stated the findings and requested a Corrective Action Plan (CAP). Ms. VanNiman responded to the email and stated she would send a CAP.

IV. RECOMMENDATION

Upon receipt of an acceptable Corrective Action Plan, I recommend no change to the current license status.

 February 10, 2025

Rebecca Piccard
Licensing Consultant

Date

Approved By:



February 11, 2025

Jerry Hendrick
Area Manager

Date