



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

August 5, 2025

Yvon Mukunzi
HEALING TOGETHER LLC
2019 Heather Lane
Kalamazoo, MI 49048

RE: License #: AS390418636
HEALING TOGETHER LLC
2019 Heather Lane
Kalamazoo, MI 49048

Dear Yvon Mukunzi:

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility.

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,

A handwritten signature in black ink that reads "Cathy Cushman".

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

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
ADDENDUM TO ORIGINAL LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AS390418636
Licensee Name:	HEALING TOGETHER LLC
Licensee Address:	2019 Heather Lane Kalamazoo, MI 49048
Licensee Telephone #:	(269) 266-9092
Licensee Designee:	Yvon Mukunzi
Administrator:	Yvon Mukunzi
Name of Facility:	HEALING TOGETHER LLC
Facility Address:	2019 Heather Lane Kalamazoo, MI 49048
Facility Telephone #:	(269) 266-9092
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. Purpose of Addendum

The licensee submitted a modification request to provide respite services within the facility.

III. Methodology

08/03/2025 – Contact – Document Received - Received modification request for respite services. Received updated program statement, admission and discharge policies.

IV. Description of Findings and Conclusions

The licensee, Healing Together LLC, was issued an original small group adult foster care (AFC) license with a capacity of six residents on 01/02/2025 for the facility, Healing Together LLC. The aged population was the sole population served by the licensee at the time the license was issued.

On 02/12/2025, the licensee was issued a specialized certification for the developmentally disabled and mentally ill populations.

On 08/03/2025, the licensee submitted a modification request to also provide respite services, which is the temporary provision of AFC services. The licensee submitted an updated program statement, admission and discharge policies documenting respite services will be provided in the facility.

Within these documents, the licensee included a statement documenting residents requiring respite services would count towards the facility's licensed capacity. The licensee included a statement documenting the provision of respite care could not impair the ability of the facility to meet the care needs of the residents or disrupt the residents who live in the facility. The licensee documented residents requiring respite services must complete all the required AFC documents at the time of admission. Additionally, the licensee acknowledged an understanding of compliance with Appendix F on evacuation scores.

V. Recommendation

I approve the licensee's request to provide respite care in the facility effective 08/05/2025.

Cathy Cushman

08/05/2025

Cathy Cushman
Licensing Consultant

Date

Approved:

Dawn Timm

08/05/2025

Dawn Timm
Area Manager

Date