



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

November 20, 2025

Timothy Van Dyk
Residential Opportunities, Inc.
1100 South Rose Street
Kalamazoo, MI 49001

RE: License #: AS390243297
Meadowcroft
3419 Meadowcroft
Kalamazoo, MI 49004

Dear Timothy Van Dyk:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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.

Upon receipt of an acceptable corrective plan, a regular license and specialized certification for the developmentally disabled populations, will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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

License #: AS390243297

Licensee Name: Residential Opportunities, Inc.

Licensee Address: 1100 South Rose Street
Kalamazoo, MI 49001

Licensee Telephone #: (269) 343-3731

Licensee Designee: Timothy Van Dyk

Administrator: Jennifer Risselmann

Name of Facility: Meadowcroft

Facility Address: 3419 Meadowcroft
Kalamazoo, MI 49004

Facility Telephone #: (269) 373-8705

Original Issuance Date: 03/20/2002

Capacity: 6

Program Type: DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection: 11/18/2025

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

Date of Environmental/Health Inspection if applicable: N/A

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 5

No. of others interviewed N/A Role: [REDACTED]

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication record(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain.
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
- 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.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A
- Number of excluded employees followed-up? 2 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:

R 400.645 Environmental health.

(3) A licensee shall provide hot and cold running water under pressure. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the fixture.

FINDING: The bathroom sink faucets were not registering between 105 and 120 degrees Fahrenheit, as required. The bathroom faucet water temperature in the left side bathroom was registering at 78 degrees Fahrenheit while the bathroom faucet water temperature in the right side bathroom was registering at 90 degrees Fahrenheit.

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.

FINDING: The facility's kitchen cabinets were in disrepair, particularly beneath the peninsula countertop. The cabinet's white finish was peeling and chipped exposing the material underneath.

Doors and door trim throughout the facility were in disrepair as evidenced by numerous scratches, gouges, and scuff marks.

The facility's garage door was damaged and in need of repair.

Tile on the tub in the bathroom on the right side of the hallway was missing and chipped.

R 400.647 Safety and maintenance of premises.

(5) Floors, walls, and ceilings must be cleanable, maintained clean, and in good repair.

FINDING: The flooring throughout the facility was in disrepair as evidenced by the top layer of flooring being worn away exposing what appeared to be the subfloor or underlayment. Specifically, an approximate 2 ft x 1 ft section of flooring in the dining room was damaged, as well as various areas throughout resident bedrooms and in the hallway.

The wall in the shower area of the bathroom on the left side of the hallway had cracked tile near the floor.

R 400.661 Bedroom furnishings.

- (5) A resident shall not use any of the following for sleeping:**
 - (f) Daybed.**

FINDING: Resident A has a daybed for sleeping, which is not allowed.

R 400.665 Food service.

- (10) Food preparation surfaces and areas must be clean and in good repair.**

FINDING: The facility's countertops were in disrepair as multiple areas had chipped or missing sections of laminate exposing the underlying substrate. The curved edge section was significantly damaged.

Additionally, the countertop on the facility's peninsula was not securely attached to the cabinets as staff demonstrated it could be pulled up.

R 400.675 Resident medications.

- (4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident:**
 - (e) Not adjust or modify a resident's prescription medication without instructions from a physician, physician assistant, advanced practice nurse, or a pharmacist who has knowledge of the medical needs of the resident. A licensee shall record in writing any instructions regarding a resident's prescription medication.**

FINDING: Direct care staff were adding Resident B's medication to applesauce without available instructions from a physician, physician's assistant, advanced practice nurse or a pharmacist who has knowledge of Resident B's medications.

R 400.697 Resident transportation.

(2) A licensee shall ensure all of the following when providing transportation services:

(c) The vehicle operator has a valid driver's license. This may include a chauffeur and a commercial driver license (CDL) if transporting 16 or more people including the driver.

FINDING: I reviewed direct care staff files at the licensee's main office on 10/10/2025. Two direct care staff, Jada Cook and Kaili Baskers, and the facility's Administrator, Jennifer Risselmann, were identified as drivers for the licensee; however, copies of valid driver's licenses were not in their employee files. Jada Cook, Kaili Baskers and Jennifer Risselmann's driver's licenses had expiration dates of 09/17/2025, 09/05/2024, and 05/27/2025, respectively.

During the 11/18/2025 onsite inspection, Jennifer Risselmann and Kaili Baskers provided valid driver's licenses.

R 400.731 Flame-producing equipment; enclosures.

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

FINDING: The door on the facility's heating plant room was not positive latching, as required.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license and specialized certification for the developmentally disabled, are recommended.



11/20/2025

Cathy Cushman
Licensing Consultant

Date