GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 25, 2026

Yewande Okolo
Nazareth Inc.
3427 Gull Rd. PO Box 34
Nazareth, MI 49074

RE: License #: AH390382559
Nazareth Center
2929 Nazareth Rd.
Kalamazoo, MI 49048

Dear Yewande Okolo:

Attached is the 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 action plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result. Please review the enclosed documentation for accuracy and contact me with any questions. In the event I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (517) 335-5985.

Sincerely,

Julie Viviano

Julie Viviano, Licensing Staff
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

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

I. IDENTIFYING INFORMATION

License #:	AH390382559
Licensee Name:	Nazareth Inc.
Licensee Address:	2929 Nazareth Rd. Nazareth, MI 49048
Licensee Telephone #:	(269) 218-8071
Administrator/Licensee Designee:	Yewande Okolo
Name of Facility:	Nazareth Center
Facility Address:	2929 Nazareth Rd. Kalamazoo, MI 49048
Facility Telephone #:	(269) 381-6290
Original Issuance Date:	04/26/2019
Capacity:	138
Program Type:	AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/24/2026

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

Inspection Type: ☐ Interview and Observation ☒ Worksheet ☐ Combination

Date of Exit Conference: 06/24/2026

No. of staff interviewed and/or observed 12
No. of residents interviewed and/or observed 35
No. of others interviewed 0 Role N/A

- Medication pass / simulated pass observed? Yes ☒ No ☐ If no, explain.

- Medication(s) and medication records(s) reviewed? Yes ☒ No ☐ If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes ☐ No ☒ If no, explain. The home does not keep resident funds in trust.
- Meal preparation / service observed? Yes ☒ No ☐ If no, explain.

- Fire drills reviewed? Yes ☐ No ☒ If no, explain.
  Reviewed disaster plans and interviewed staff on policies and procedures.
- Water temperatures checked? Yes ☒ No ☐ If no, explain.

- Incident report follow-up? Yes ☐ IR date/s: N/A ☒
- Corrective action plan compliance verified? Yes ☐ CAP date/s and rule/s: N/A
- Number of excluded employees followed up? 0 N/A ☒

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 325.1923	**Employee's health.**
	(2) A home shall provide initial TB screening at no cost for its employees. New employees shall be screened within 10 days after hire and before occupational exposure.
ANALYSIS:	Review of 8 employee records revealed that while employees received TB screenings, four of the employees TB screenings were completed outside of the 10 days of hire. Therefore, the facility is in violation.
CONCLUSION:	**VIOLATION ESTABLISHED**

R 325.1972	**Solid wastes.**
	All garbage and rubbish shall be kept in leakproof, non-absorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.
ANALYSIS:	Inspection of the facility revealed garbage cans located throughout the facility on the first and second floor common areas, spa rooms, common area kitchenettes, and the main kitchen area did not have tight-fitting lids. This presents a risk of cross contamination.
CONCLUSION:	**VIOLATION ESTABLISHED**

R 325.1976	**Kitchen and dietary.**
	(13) A multi-use utensil used in food storage, preparation, transport, or serving shall be thoroughly cleaned and sanitized after each use and shall be handled and stored in a manner which will protect it from contamination.

ANALYSIS:	Review of the dishwasher sanitization logs from March 2026 to June 2026 revealed incomplete and/or blank entries of dishwasher sanitization temperatures. It could not be determined if the dishwasher was tested thoroughly to ensure cleanliness and sanitization of dishware and utensils due to the incomplete and/or blank entries. Therefore, the facility is in violation.
CONCLUSION:	**VIOLATION ESTABLISHED**

R 325.1976	**Kitchen and dietary.**
	(6) Food and drink used in the home shall be clean and wholesome and shall be manufactured, handled, stored, prepared, transported, and served so as to be safe for human consumption.
ANALYSIS:	Inspection revealed multiple food items were found unlabeled in the main kitchen freezer, and the main floor common area kitchenette. Also, food items discovered in the main kitchen freezer had been removed from the original packaging and repackaged into individual portions. These items were not labeled with the appropriate open date, and it could not be determined if the food items were safe for human consumption. An open date must be placed on all food items prepared and served to residents at the facility. Also, review of the main kitchen cooler and freezer temperature logs from March 2026 to June 2026 revealed incomplete and/or blank entries. It could not be determined if the main kitchen cooler or freezer temperatures were tested thoroughly to ensure food items were handled and stored at an appropriate temperature to prevent spoilage. Therefore, the facility is in violation.
CONCLUSION:	**VIOLATION ESTABLISHED**

R 325.1979	**General maintenance and storage.**
	(3) Hazardous and toxic materials shall be stored in a safe manner.

ANALYSIS:	Inspection revealed hazardous and toxic chemicals were found easily accessible in a common area bathroom on the first floor and in a cabinet in the exercise room on the second floor. Hazardous and/or toxic items and/or chemicals that are easily accessible to anyone in the facility present a potential risk of ingestion, harm, and/or injury to residents in the home with impaired cognition and/or function. Therefore, the facility is in violation.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Due to the violations found, a corrective action plan is requested and due by 7/11/2026.

Julie Viviano

6/25/2026

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Date

Licensing Consultant