



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 20, 2026

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

RE: License #: AS130408635
Investigation #: 2026A1030044
Beacon Home at East Ave

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 feel free to contact me. In any event, the corrective action plan is due within 15 days.

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) 356-0100.

Sincerely,

A handwritten signature in black ink that reads "Nile Khabeiry, LMSW". The signature is written in a cursive, flowing style.

Nile Khabeiry, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS130408635
Investigation #:	2026A1030044
Complaint Receipt Date:	07/14/2026
Investigation Initiation Date:	07/14/2026
Report Due Date:	09/12/2026
Licensee Name:	Beacon Specialized Living Services, Inc.
Licensee Address:	Suite 110 890 N. 10th St. Kalamazoo, MI 49009
Licensee Telephone #:	(269) 427-8400
Administrator:	Aubrey Napier
Licensee Designee:	Nichole VanNiman, Designee
Name of Facility:	Beacon Home at East Ave
Facility Address:	20271 East Ave N Battle Creek, MI 49017
Facility Telephone #:	(269) 427-8400
Original Issuance Date:	10/04/2021
License Status:	REGULAR
Effective Date:	04/04/2026
Expiration Date:	04/03/2028
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. ALLEGATION(S)

	Violation Established?
The facility did not provide three nutritious meals.	No
Additional Findings	Yes

III. METHODOLOGY

07/14/2026	Special Investigation Intake 2026A1030044
07/14/2026	APS Referral Received and reviewed APS referral
07/14/2026	Special Investigation Initiated - Telephone Interview with the referral source
07/17/2026	Inspection Completed On-site Interview with Resident A
07/17/2026	Contact - Face to Face Interview with Resident B
07/17/2026	Contact - Face to Face Interview with Jennifer Benoit
07/17/2026	Contact - Face to Face Interview with Emma Shugars
07/17/2026	Contact - Face to Face Interview with Pam Marhgerita
07/20/2026	Exit Conference Exit conference by phone

ALLEGATION:

The facility did not provide three nutritious meals.

INVESTIGATION:

On 7/14/26, I interviewed the referral source (RS) by phone. The RS reported she did not find any mistreatment of Resident A by the facility.

On 7/17/26, I interviewed Resident A at the facility. Resident A reported she is not happy with the meals served at the facility. Resident A reported that sometimes the staff do not cook meals for the residents but was unable to remember an exact date.

On 7/17/26, I interviewed Resident B at the facility. Resident B reported she had lived at the facility for 10 months. Resident B reported the staff always provide meals for the residents, however she does not always like the food. Resident B provided an example regarding breakfast as sometimes they have cereal for breakfast that she did not like but today they served bacon and eggs.

On 7/17/26, I interviewed direct care staff member DCSM) Jennifer Benoit at the facility. Ms. Benoit reported she had worked at the facility for one month. Ms. Benoit reported there are three staff members that work during the day and that one DCSM is on a one for Resident A. Ms. Benoit reported that one staff member will be in charge of medications and the other staff member will be in charge of the kitchen. Ms. Benoit indicated they always provide three meals per day for all the residents as well as snacks.

On 7/17/26, I interviewed DCSM Emma Shugars at the facility. Ms. Shugars reported that she had worked at the facility for one month and today she had been the one on one staff for Resident A. Ms. Shugars reported that the facility provides three meals per day for the residents.

On 7/17/26, I interviewed DCSM Pam Margherita at the facility. Ms. Margherita reported that she had worked at the facility for seven months. Ms. Margherita reported that the residents are always provided with three meals per day and snacks.

APPLICABLE RULE	
R 400.663	Nutrition; adoption by reference.
	(1) A licensee shall provide daily a minimum of 3 nutritious meals to residents.
ANALYSIS:	It was alleged that the facility did not provide three nutritious meals. Based on interviews this violation will not be established. Although Resident A reported that the facility did not always provide meals to the residents there was no other evidence that indicated that they went without meals or snacks.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 7/17/26, I conducted an on-site inspection and was informed by DCSM Pam Margherita that the facility did not have a weekly menu posted and that the staff do not usually follow the menu that gets emailed to them because the residents won't eat anything on the menu.

APPLICABLE RULE	
R 400.663	Nutrition; adoption by reference.
	(6) Menus, excluding special diets, must be written at least 1 week in advance and posted. Any change or substitution must be documented.
ANALYSIS:	During an on-site inspection it was determined that the facility did not have a weekly menu posted in a common area.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

During on-site inspection I noted that there were two unwrapped and unlabeled plates of food in the refrigerator. The two plates contained lunch items served that day that were being saved for residents to eat later. All three staff members were informed of the administrative rules regarding safe storage of food that is removed from its original packaging.

APPLICABLE RULE	
R 400.665	Food service.
	(7) When food is removed from its original packaging and stored, it must be clearly labeled to identify the prepared or opened date and an expiration or discard date. The discard date must be no more than 7 days on all perishable foods that are opened or if food is prepared and held at safe storage temperatures. The day of opening or day of preparation must be counted as day 1. If there are signs of spoilage, food must be discarded immediately. If any residents of the home have known food allergies, the label must also indicate that this food contains the food or ingredient that the resident is allergic to.
ANALYSIS:	During an on-site inspection I observed two plates of food that were being saved for residents in the refrigerator to eat later that had not been wrapped or labeled.
CONCLUSION:	VIOLATION ESTABLISHED

On 7/20/26, I shared the findings of the investigation with licensee Nichole VanNiman by phone. Ms. VanNiman acknowledged the findings and agreed to submit a corrective action plan.

IV. RECOMMENDATION

Contingent upon the submission of an acceptable corrective action plan, I recommend no change in the current license status.

Nile Khabeiry, LMSW

7/21/26

Nile Khabeiry
Licensing Consultant

Date

Approved By:

Russell Misiak

7/21/26

Russell B. Misiak
Area Manager

Date