GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 17, 2026

Adam Frazier
Docate Homes, LLC
5297 Clato St
Kalamazoo, MI 49004

RE: License #: AS390085644
Docate Manor
5297 Clato Street
Kalamazoo, MI 49004

Dear Mr. Frazier:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- You are to submit documentation of compliance.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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,

Ondrea Johnson

Ondrea Johnson, Licensing Consultant
Bureau of Community and Health Systems

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

I. IDENTIFYING INFORMATION

License #:	AS390085644
Licensee Name:	Docate Homes, LLC
Licensee Address:	5297 Clato St Kalamazoo, MI 49004
Licensee Telephone #:	(269) 359-1511
Licensee/Licensee Designee:	Adam Frazier
Administrator:	Adam Frazier
Name of Facility:	Docate Manor
Facility Address:	5297 Clato Street Kalamazoo, MI 49004
Facility Telephone #:	(269) 381-7939
Original Issuance Date:	04/01/1999
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/14/2026

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

Date of Health Authority Inspection if applicable: 03/24/2026

No. of staff interviewed and/or observed 3
No. of residents interviewed and/or observed 3
No. of others interviewed 0 Role: 0

- 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? 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 400.615 Resident register.

A licensee shall maintain a chronological register of all residents admitted that includes the following information for each resident:
(a) Resident full name.
(b) Resident date of birth.
(c) Date of admission.
(d) Date of discharge and location, if known, where the resident moved.

FINDINGS: Resident Register not completed for all residents

R 400.619 Emergency preparedness plan.

(8) A licensee shall practice the emergency preparedness plan, including the fire safety plan, at least once a quarter per calendar year during each shift, 7 a.m. to 3 p.m., 3 p.m. to 11 p.m. and 11 p.m. to 7 a.m. A record of the practices must be maintained for 2 years.

FINDINGS: Fire drills are not completed during each shift per quarter as required.

R 400.629 Direct care staff; qualifications and training.

(5) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be trained and competent in all of the following areas before performing assigned tasks independently:
(a) Reporting requirements.
(h) Food safety, which includes food storage, preparation, distribution, and serving in a safe manner.

FINDINGS: Employee Larry Bolo does not have reporting requirements and food safety training for the department to review.

R 400.631 Health screenings.

(2) A licensee shall have on file a statement signed by a licensed physician or physician's designee attesting to the physical health of the licensee, staff, and members of the household. Statements for the licensee and administrator must be signed no more than 6 months before the issuance of a

temporary license and at any other time requested by the department. Statements for staff and members of the household must be obtained within 30 days of employment start date, assumption of duties, or occupancy in the facility.

FINDINGS: Employee Larry Bolo does not have a written health physical for the department to review.

R 400.631 Health screenings.

(4) A licensee shall annually review and maintain in the facility the health status of the staff and members of the household. Verification of annual reviews must be maintained for 2 years.

FINDINGS: Employee Larry Bolo does not have an annual health status review on record for the department to review.

R 400.639 Staff records.

(1) A licensee shall maintain a record for each staff that contains all of the following:

(e) Verification of experience, highest level of education completed, and training.

(f) Verification of not less than 2 reference checks. If reference checks cannot be obtained, documentation verifying reference checks were attempted must be maintained.

(i) Verification of the receipt by the staff of personnel policies and job descriptions.

FINDINGS: Employee Larry Bolo does not have verification of his highest level of education, verification of at least 2 reference checks and verification of the receipt by the staff of personnel polices, and job descriptions.

A corrective action plan was approved on 7/20/2026. It is expected that the corrective action plan be implemented with the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

Ondrea Johnson

Ondrea Johnson
Licensing Consultant

7/21/2026
Date