GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 15, 2026

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

RE: License #: AS390417777
**Beacon Home at Kobza**
**135 Ridgewood St.**
**Kalamazoo, MI 49001**

Dear Ms. VanNiman:

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 #:** | AS390417777 |
| **Licensee Name:** | Beacon Specialized Living Services, Inc. |
| **Licensee Address:** | Suite 110<br>890 N. 10th St.<br>Kalamazoo, MI 49009 |
| **Licensee Telephone #:** | (269) 427-8400 |
| **Licensee/Licensee Designee:** | Nichole VanNiman, Designee |
| **Administrator:** | Aubry Napier |
| **Name of Facility:** | Beacon Home at Kobza |
| **Facility Address:** | 135 Ridgewood St.<br>Kalamazoo, MI 49001 |
| **Facility Telephone #:** | (269) 214-4341 |
| **Original Issuance Date:** | 01/02/2024 |
| **Capacity:** | 6 |
| **Program Type:** | DEVELOPMENTALLY DISABLED<br>MENTALLY ILL |

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/02/2026

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 2
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 400.619 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 were not conducted during 11pm to 7am shift as required once a quarter.

**R 400.631 Health screenings.**

**(5) A licensee shall maintain documentation of a baseline screening for communicable diseases and records of illness on hiring. Staff who have direct physical contact with residents or resident food may perform those duties only when they are noninfectious or when proper precautions are taken to prevent the spread of a communicable disease. A licensee shall follow a staff's health care professional or local health department guidance on controlling the spread of a communicable disease when identified.**

FINDINGS: Licensee does not have documentation of a baseline screening for communicable diseases for employee Renee Burnett.

**R 400.639 Staff records.**

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

(a) Name, address, telephone number, and Social Security number.

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

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

FINDINGS: FINDINGS: Licensee does not have listed telephone number, social security number, diploma or high school transcript verification, and verification of receipt of 6 required personnel policies according to administrative rules in Renee Burnett staff's record at the time of inspection.

**R 400.645 Environmental health.**

(7) Poisons, caustics, and other dangerous materials must be stored and safeguarded in non-resident, non-food preparation areas, and storage areas.

FINDINGS: Cleaning supplies stored in Resident A's bedroom.

**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.
(2) (2) Home furnishings and housekeeping standards must present a comfortable, clean, and orderly appearance.

FINDINGS: Resident A's and Resident B's individual bedrooms are unclean and cluttered. Resident C's bedroom closet door and closet shelf are broken. Patio deck rails need to be painted or refinished.

**R 400.649 Electrical service.**

Electrical service must be maintained in a safe condition. Where conditions indicate a need for inspection, and on all new or remodeled projects, the electrical service must be inspected by a qualified electrical inspection service and a copy of the inspection report must be maintained for 2 years.

FINIDINGS: Multiple electrical cords and power strips in close proximity of combustible items in Resident A's bedroom and pose as a safety concern.

**R 400.651 Living space.**

(3) A resident shall be provided with storage space for storing personal belongings.

FINDINGS: Resident A has excess clothing and belongings stored in bedroom causing extreme clutter.

**R 400.665 Food service.**

(3) Food must be protected from contamination while being transported, stored, prepared, and served.

FINDINGS: Personal food items stored in Resident A and Resident B bedrooms that are not protected from contamination.

**R 400.675 Resident medications.**

(2) Prescribed medication must be kept in the original pharmacy container and labeled for a specific resident. Over-the-counter medication must be kept in the original manufacturer's

container. Prescription and over-the-counter medication must be kept in a locked cabinet or drawer and refrigerated if required. Equipment necessary to administer a medication must be easily accessible and used only for the resident for whom it is prescribed unless generally used for all residents.

FINDINGS: Bottle of Tylenol found stored in Resident A's bedroom.

**R 400.681 Resident rights; licensee responsibilities.**

(4) A licensee shall provide to a resident or resident's designated representative a copy of the resident's rights at time of admission.

FINDINGS: Resident Rights according to LARA's administrative rules were not maintained in Resident D's record to verify that these rights were given to him at time of admission.

On 7/3/2026, I conducted an exit conference with licensee designee Nichole VanNiman. I informed Nichole VanNiman of my findings and allowed her an opportunity to ask questions and make comments. On 7/14/2026, I received an acceptable corrective action plan.

## IV. RECOMMENDATION

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

Ondrea Johnson

Ondrea Johnson
Licensing Consultant

7/6/2026
Date