GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

August 29, 2026

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

RE: License #: AS390293416
D Avenue
2951 East D Avenue
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 mentally ill and 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,

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 #:	AS390293416
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:	Jaime Burland
Name of Facility:	D Avenue
Facility Address:	2951 East D Avenue Kalamazoo, MI 49004
Facility Telephone #:	(269) 488-3933
Original Issuance Date:	01/18/2008
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection: 08/27/2026

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

Date of Health Authority Inspection if applicable: 05/21/2026

No. of staff interviewed and/or observed 6
No. of residents interviewed and/or observed 3
No. of others interviewed 1 Role: Assistant Program Director

- 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 400.647 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 handrails on the back ramp were loose and moved back and forth when pressure was applied. There was also a raised transition between the concrete walkway and the wooden ramp with no transition piece present.

REPEAT VIOLATION ESTABLISHED
[SEE 2024 RENEWAL LSR, DATED 08/16/2026, CAP DATED 08/28/2024]

R 400.647 Safety and maintenance of premises.

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

FINDING: The outdoor picnic table was observed with extensive peeling and deteriorated paint/finish.

R 400.647 Safety and maintenance of premises.

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

FINDING: Multiple areas of flooring throughout the facility, including the West side kitchen, dining and hallways, were damaged and separated, with visible gaps and sections that were lifting and no longer flush with the surrounding flooring.

The bathroom wall on the East side of the facility had an area of damaged and peeling paint with the underlying wall surface exposed. Resident A's bedroom walls also had multiple areas of chipped and peeling paint and were not maintained in good repair.

REPEAT VIOLATION ESTABLISHED
[SEE 2024 RENEWAL LSR, DATED 08/16/2026, CAP DATED 08/28/2024]
[SEE 2022 RENEWAL LSR, DATED 08/22/2022, CAP DATED 08/24/2022]

R 400.647 Safety and maintenance of premises.

(16) Yard areas must be kept reasonably free from hazards, nuisances, refuse, and litter.

FINDING: A section of wooden privacy fence had fallen in the backyard and was lying on the ground in an area accessible to residents, creating a potential safety hazard.

R 400.665 Food service.

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

FINDING: The kitchen countertops on the West side of the facility were in disrepair. There were sections of laminate that had come off exposing the substrate.

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.

FINDING: Leftover food was observed in the refrigerator without a discard date.

R 400.685 **Resident admission; resident assessment plan; resident care agreement; health care appraisal.**

(4) A written assessment plan must be completed with and signed by the resident or the resident's designated representative, responsible agency if applicable, and the licensee at the time of admission and annually thereafter. A licensee shall maintain a copy of the resident's most recent assessment plan on file at the facility for up to 2 years after discharge.

FINDING: Resident B was admitted to the facility on 03/26/2026; however, an assessment plan completed at the time of admission was not available for review.

IV. RECOMMENDATION

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

Cathy Cushman

08/29/2026

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Cathy Cushman Date
Licensing Consultant