



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

September 15, 2025

Karen Yens  
Satchell's Christian Retirement Home, Inc.  
2662 East Caro Rd  
Caro, MI 48723

RE: License #: AL790284241  
Satchell's Christian Retirement Home  
2662 East Caro Rd  
Caro, MI 48723

Dear Karen Yens:

Attached is the Renewal Licensing Study Report for the facility referenced above. Your license will be renewed upon receipt of an passing Bureau of Fire Services inspection. 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:

- An on-site inspection will be conducted.

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) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Sabrina McGowan".

Sabrina McGowan, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(810) 835-1019

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

**I. IDENTIFYING INFORMATION**

**License #:** AL790284241

**Licensee Name:** Satchell's Christian Retirement Home, Inc.

**Licensee Address:** 2662 East Caro Rd  
Caro, MI 48723

**Licensee Telephone #:** (989) 673-3329

**Licensee/Licensee Designee:** Karen Yens

**Administrator:** Karen Yens

**Name of Facility:** Satchell's Christian Retirement Home

**Facility Address:** 2662 East Caro Rd  
Caro, MI 48723

**Facility Telephone #:** (989) 673-3329

**Original Issuance Date:** 03/12/2007

**Capacity:** 20

**Program Type:** PHYSICALLY HANDICAPPED  
AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 09/11/2025

Date of Bureau of Fire Services Inspection if applicable: 08/05/2025

Date of Health Authority Inspection if applicable: 06/30/2025

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 18

No. of others interviewed 1 Role: Licensee

- 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:  
08/01/2023-R315(6) 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 400.15208**

**Direct care staff and employee records.**

**(3) A licensee shall maintain a daily schedule of advance work assignments, which shall be kept for 90 days. The schedule shall include all of the following information:**

**(b) Job titles.**

Staff schedule does not contain job titles.

**R 400.15315**

**Handling of resident funds and valuables.**

**(6) Except for bank accounts, a licensee shall not accept resident funds of more than \$200.00 for any resident of the home after receiving payment of charges owed.**

Resident account exceeded \$200.00

**REPEAT VIOLATION ESTABLISHED**

**LSR dated 08/09/2023.**

The corrective action plan, dated 08/01/2023, stated that the licensee agrees to maintain cash funds under \$200.00, effective in 30 days.

**R 400.15401**

**Environmental health.**

**(7) Each habitable room shall have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. During fly season, from April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes shall be supplied with a standard screen of not less than 16 mesh.**

Resident bedroom window did not have a screen.

**R 400.15403**

**Maintenance of premises.**

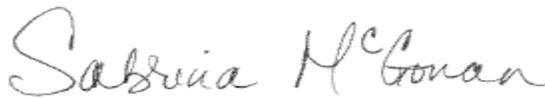
**(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.**

Wall plaster in kitchen/dining area has hole(s), in need of repair.

A corrective action plan was requested and approved on 09/11/2025. It is expected that the corrective action plan be implemented within 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

Contingent upon receipt of an passing Bureau of Fire Services inspection, renewal of the license is recommended.



September 15, 2025

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Sabrina McGowan  
Licensing Consultant

Date