GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

November 24, 2025

Sondra Yantz
Charter Senior Living of Stepping Stone Falls
4444 W. Court Street
Flint, MI 48532

RE: License #: AH250236841
Investigation #: 2025A0784085
Charter Senior Living of Stepping Stone Falls

Dear Sandra Yantz:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

Please review the enclosed documentation for accuracy and contact me with any questions. If I am not available and you need to speak to someone immediately, please contact the local office at (517) 335-5985.

Sincerely,

Aaron L Clum

Aaron Clum, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 230-2778

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

I. IDENTIFYING INFORMATION

License #:	AH250236841
Investigation #:	2025A0784085
Complaint Receipt Date:	09/16/2025
Investigation Initiation Date:	09/16/2025
Report Due Date:	11/15/2025
Licensee Name:	Flint Michigan Retirement Housing LLC
Licensee Address:	14005 Outlook Street Overland Park, KS 66223
Licensee Telephone #:	(240) 595-6064
Administrator/Authorized Representative:	Sondra Yantz
Name of Facility:	Charter Senior Living of Stepping Stone Falls
Facility Address:	4444 W. Court Street Flint, MI 48532
Facility Telephone #:	(810) 720-5184
Original Issuance Date:	02/01/2001
License Status:	REGULAR
Effective Date:	08/01/2024
Expiration Date:	07/31/2025
Capacity:	114
Program Type:	AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Resident A was not administered medications	Yes
Additional Findings	No

III. METHODOLOGY

09/16/2025	Special Investigation Intake 2025A0784085
09/16/2025	Special Investigation Initiated - Letter Email sent to complainant requesting addional information
09/16/2025	Contact - Telephone call made Attempted with complainant
09/16/2025	Contact - Document Received Email response from complainant
11/24/2025	Exit – Email Report sent

ALLEGATION:

Resident A was not administered medications

INVESTIGATION:

On 9/16/2025, the department received this complaint.

According to the complaint, Resident A was out of the facility and after returning to the facility, Resident A did not receive her medication for two days.

On 9/17/2025, I interviewed staff 1 at the facility. Staff 1 stated she was aware of some concerns that Resident A had recently missed some medications after returning to the facility from being out for a couple of days. Staff 1 stated Resident A had been at the hospital and returned on 9/09/2025 for a couple days before being sent back out again to the hospital on 9/12/2025 related to a fall. Staff 1 stated Resident A returned the same day. Staff 1 stated that she could not be certain, but there appeared to be some mix up when Resident A came back to the facility on 9/09/2025 as her medications may not been entered into the computer system. During the interview, staff 1 called staff 2, who was interviewed via facetime with

staff 1 present. Staff 2 stated she was aware of the concerns that Resident A may have missed some medications when she returned to the facility. Staff 2 stated no medications were missed that were prescribed during that time. Staff 2 stated she was not aware of any medications being left out of the system.

Review of Resident A's medication administration record (MAR) revealed she missed ESCITALOPRAM TAB 10MG, LOSARTRAN POT TAB 50 MG, MEGESTROL AC SUS 40 MG/ML, REXULTI TAB 2MG and VITAMIN D3 TAB 50MCG on 9/10/2025 and 9/11/2025.

Review or Resident A's physician orders revealed all the medications she missed on 9/10/2025 and 9/11/2025 had been prescribed for several months.

APPLICABLE RULE	
R 325.1932	**Resident medications.**
	(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.
ANALYSIS:	The complaint alleged Resident A missed medications on at least two different days. Based on the findings, the allegation is supported.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, it is recommended that the status of the license remain unchanged.

Aaron L Clum 11/06/2025

Aaron Clum Date
Licensing Staff

Approved By:

Andrea L Moore 11/24/2025

Andrea L. Moore, Manager Date
Long-Term-Care State Licensing Section