



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

January 21, 2026

Tammi Carey  
Carey's Young at Heart LLC  
2167 Vernor Road  
Lapeer, MI 48446

RE: License #: AL790342299  
Carey's Young at Heart  
1341 S Colling Road  
Caro, MI 48723

Dear Tanni Carey:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. 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) 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 #:** AL790342299

**Licensee Name:** Carey's Young at Heart LLC

**Licensee Address:** 2167 Vernor  
Lapeer, MI 48446

**Licensee Telephone #:** (810) 656-3568

**Licensee/Licensee Designee:** Tammi Carey

**Administrator:** Tammi Carey

**Name of Facility:** Carey's Young at Heart

**Facility Address:** 1341 S Colling Road  
Caro, MI 48723

**Facility Telephone #:** (810) 656-3568

**Original Issuance Date:** 07/26/2013

**Capacity:** 20

**Program Type:** MENTALLY ILL  
AGED  
ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/20/2026

Date of Bureau of Fire Services Inspection if applicable: 03/10/2025

Date of Health Authority Inspection if applicable: 10/20/2025

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 4

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.  
No IR's to review
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:  
01/10/2024-R403(1) N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes  (please explain) No  N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility is in compliance with all applicable rules and statutes.

### IV. RECOMMENDATION

I recommend issuance of a 2-year regular adult foster care license.

*Sabrina McGowan* January 21, 2026

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Sabrina McGowan  
Licensing Consultant

Date