



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

February 6, 2026

Jeanine VanNatter  
CP Traverse Bay Leaseco LLC  
800 Center Place  
Traverse City, MI 49686

RE: License #: AL280335945  
**Boardman Lake Glens: Highlander**  
**800 Centre Place**  
**Traverse City, MI 49686**

Dear Ms. VanNatter:

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: An on-site inspection will be conducted.

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 (616) 356-0100.

Sincerely,

A handwritten signature in cursive script that reads "Adam Robarge".

Adam Robarge, Licensing Consultant  
Bureau of Community and Health Systems  
701 S. Elmwood, Suite 11  
Traverse City, MI 49684  
(231) 350-0939

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

**I. IDENTIFYING INFORMATION**

**License #:** AL280335945

**Licensee Name:** CP Traverse Bay Leaseco LLC

**Licensee Address:** 1480 Clark Lake Rd.  
Brighton, MI 48114

**Licensee Telephone #:** (231) 941-1919

**Licensee Designee:** Jeanine VanNatter, Designee

**Administrator:** Jeanine VanNatter

**Name of Facility:** Boardman Lake Glens: Highlander

**Facility Address:** 800 Centre Place  
Traverse City, MI 49686

**Facility Telephone #:** (231) 947-9472

**Original Issuance Date:** 08/10/2021

**Capacity:** 20

**Program Type:** AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/26/2026

Date of Bureau of Fire Services Inspection if applicable: 09/2/2025

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 4  
No. of residents interviewed and/or observed 12  
No. of others interviewed 1 Role: Licensee Designee

- 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. Funds not kept
- 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 400.645 Environmental health.**

(3) A licensee shall provide hot and cold running water under pressure. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the fixture.

The water temperature in two resident rooms was measured at 122 and 123 degrees Fahrenheit respectively.

**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.

The rear emergency exits had not been cleared of snow at the time of the inspection.

A corrective action plan was requested and approved on 01/26/2026. 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.

Technical assistance provided:

- Medical orders must be on-site for residents who administer their own topical medication.
- Resident refrigerators and medication refrigerators must be equipped with thermometers.

**IV. RECOMMENDATION**

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



2/6/2026

Adam Robarge  
Licensing Consultant

Date