



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

January 29, 2026

John Mos
Infinite Care, LLC
PO Box 327
2844 Livernois Rd
Troy, MI 48099

RE: License #: AS630386851
Lochmoor Home
29490 Lochmoor
Farmington Hills, MI 48334

Dear John Mos:

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:

- You are to submit documentation of compliance.
- You are to submit a Statement of Correction.

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 (248) 972-9136.

Sincerely,

A handwritten signature in dark ink that reads "Frodet Dawisha". The signature is written in a cursive style with a light green highlight behind the name.

Frodet Dawisha, Licensing Consultant
Bureau of Community and Health Systems
3026 W. Grand Blvd., Ste 9-100
Detroit, MI 48202
(248) 303-6348

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

I. IDENTIFYING INFORMATION

License #:	AS630386851
Licensee Name:	Infinite Care, LLC
Licensee Address:	29490 Lochmoor Farmington Hills, MI 48334
Licensee Telephone #:	(888) 255-5426
Licensee/Licensee Designee:	John Mos
Administrator:	Simion Pop
Name of Facility:	Lochmoor Home
Facility Address:	29490 Lochmoor Farmington Hills, MI 48334
Facility Telephone #:	(888) 255-5426
Original Issuance Date:	08/03/2017
Capacity:	4
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/29/2026

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 4

No. of others interviewed 2 Role: LD/Admin

- 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. did not occur during inspection
- 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.

During the on-site inspection on 01/29/2026, the hot water was outside the safe range of 105°-120° Fahrenheit in the kitchen (129.6°), bathroom #1 (129.6°), and bathroom #2 (129.6°).

R 400.647	Safety and maintenance of premises.
	(5) Floors, walls, and ceilings must be cleanable, maintained clean, and in good repair.

During the on-site inspection on 01/29/2026, the ceiling in bathroom #1 had a large crack and was not in good repair.

REPEAT VIOLATION ESTABLISHED: LSR dated 01/31/2024, CAP dated 01/31/2024

R 400.665	Food service.
	(9) Kitchen hoods or canopies must be equipped with filters. Filters must be maintained in an efficient condition and always clean.

During the on-site inspection on 01/29/2026, the filter used for the over was ripped and not in good condition.

R 400.675	Resident medications.
	(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident: (b) Complete an individual medication log that contains all of the following: (v) Initials of the individual who administered the medication at the time given.

During the on-site inspection on 01/29/2026, I reviewed Resident A's medications and medication logs and found the following errors:

- **Trazodone 100MG TAB:** take two tablets by mouth at bedtime as needed for 30 days was given on 01/17/2026 and on 01/18/2026, but staff did not initial the medication log

R 400.675	Resident medications.
	(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident: (c) Record the reason for each administration of medication that is prescribed on an as needed basis.

During the on-site inspection on 01/29/2026, I reviewed Resident A's medications and medication logs and found the following errors:

- **Vistaril 25MG CAP:** take one capsule by mouth three times a day for anxiety as needed was given 33 times, but staff did not record the reason for this as needed medication 13 times.

A corrective action plan was requested and approved on 01/29/2026. 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.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.



01/29/2026

Frodet Dawisha
Licensing Consultant

Date