



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

February 21, 2023

Shapoor Ansari  
A.L.C.C. Inc.  
1543 Island Lane  
Bloomfield Hills, MI 48302

RE: License #: AL580382350  
**Alice Lorraine Care Center - 2**  
**2590 N. Monroe Street**  
**Monroe, MI 48162**

Dear Mr. Ansari:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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 (313) 456-0380.

Sincerely,

A handwritten signature in blue ink that reads "Pandrea Robinson". The signature is written in a cursive, flowing style.

Pandrea Robinson, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 319-9682

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

**I. IDENTIFYING INFORMATION**

**License #:** AL580382350

**Licensee Name:** A.L.C.C. Inc.

**Licensee Address:** 1543 Island Lane  
Bloomfield Hills, MI 48302

**Licensee Telephone #:** (734) 620-1000

**Licensee/Licensee Designee:** Shapoor Ansari

**Administrator:** Starlyn Lay

**Name of Facility:** Alice Lorraine Care Center - 2

**Facility Address:** 2590 N. Monroe Street  
Monroe, MI 48162

**Facility Telephone #:** (734) 243-4000

**Original Issuance Date:** 09/21/2016

**Capacity:** 18

**Program Type:** AGED  
ALZHEIMERS

**II. METHODS OF INSPECTION**

Date of On-site Inspection(s): 02/17/2023

Date of Bureau of Fire Services Inspection if applicable: 02/16/2023

Date of Health Authority Inspection if applicable: 02/17/2023

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 7

No. of others interviewed [redacted] Role: [redacted]

- 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.  
Residents had eaten prior to 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 determined to be in substantial compliance with rules and requirements.

This facility was found to be in non-compliance with the following rules:

**R 400.15403            Maintenance of premises.**

**(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.**

At the time of inspection, I observed the walls throughout the facility not in good repair and in need of painting. There were area's where the walls had been plastered and not sanded and repainted. There were areas that were repaired and sanded and not painted. There were also areas that were re-painted but were blotchy and in need of painting.

### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.



Pandrea Robinson  
Licensing Consultant

02/21/23  
Date