GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 23, 2025

Kathleen Greene
Lakeshore Caring Corp.
4851 Lakeshore, Bldg A
Fort Gratiot, MI 48059

RE: License #: AL740007429
Investigation #: 2025A0580023
Lakeshore Woods

Dear Kathleen Greene:

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.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (517) 643-7960.

Sincerely,

Sabrina McGowan, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(810) 835-1019

enclosure

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

## I. IDENTIFYING INFORMATION

| | |
|---|---|
| **License #:** | AL740007429 |
| | |
| **Investigation #:** | 2025A0580023 |
| | |
| **Complaint Receipt Date:** | 02/26/2025 |
| | |
| **Investigation Initiation Date:** | 02/27/2025 |
| | |
| **Report Due Date:** | 04/27/2025 |
| | |
| **Licensee Name:** | Lakeshore Caring Corp. |
| | |
| **Licensee Address:** | 4851 Lakeshore, Bldg A<br>Fort Gratiot, MI 48059 |
| | |
| **Licensee Telephone #:** | (810) 385-3185 |
| | |
| **Administrator:** | Kathleen Greene |
| | |
| **Licensee Designee:** | Kathleen Greene |
| | |
| **Name of Facility:** | Lakeshore Woods |
| | |
| **Facility Address:** | 4851 Lakeshore Road<br>Fort Gratiot, MI 48059 |
| | |
| **Facility Telephone #:** | (810) 385-3185 |
| | |
| **Original Issuance Date:** | 03/30/1992 |
| | |
| **License Status:** | REGULAR |
| | |
| **Effective Date:** | 02/18/2024 |
| | |
| **Expiration Date:** | 02/17/2026 |
| | |
| **Capacity:** | 20 |
| | |
| **Program Type:** | PHYSICALLY HANDICAPPED<br>AGED<br>TRAUMATICALLY BRAIN INJURED |

| | |
|---|---|
| | ALZHEIMERS |

## II. ALLEGATION(S)

| | **Violation Established**? |
|---|---|
| Residents are being moved due to a water pipe busting. | Yes |

## III. METHODOLOGY

| | |
|---|---|
| 02/26/2025 | Special Investigation Intake<br>2025A0580023 |
| 02/27/2025 | Special Investigation Initiated - Telephone<br>Call to Director to determine which facility had a pipe burst. |
| 02/27/2025 | Contact - Document Received<br>Document requested was received. |
| 03/03/2025 | Inspection Completed On-site<br>Interview with the owner, Steve Larson, Executive Director, Angela Ibarra and staff, Kaitlyn Symon. |
| 03/05/2025 | Contact - Document Received<br>Email from Director Ibarra. |
| 04/16/2025 | Contact - Telephone call made<br>Call to Director Ibarra. |
| 04/16/2025 | Inspection Completed On-site<br>Facetime video observation of facility. |
| 04/22/2025 | Exit Conference<br>Exit with Owner, Steven Larsen |

**ALLEGATION:**

**Residents are being moved due to water pipe bursting.**

**INVESTIGATION:**

On 02/26/2025, I received a complaint via LARA-BCHS-Complaints, alleging a water main break occurred at the facility. There are 2 AFC's and 1 Home for the Aged facility located on this property.

On 02/27/2025, I placed a call to the facility director to identify which property, if any, did the water main break occur. Newly designated Director, Charity Mosher, confirmed that there was a water main break at Lakeshore Woods. It is her understanding that the water main break, caused within the fire suppression system, was due to a bolt that was over-tightened, causing it to bend under the water pressure. 10 resident rooms, along with their private bathrooms, received water damage. A water restoration company has been hired to dry out the rooms. Walls and flooring need replacing as well. Most of the displaced residents have buddied up with other residents, until the construction is complete. Some of the residents are being temporarily housed at the other licensed AFC, Lakeshore Woods II, which is interconnected.

On 03/03/2025, I conducted an unannounced onsite at Lakeshore Woods. Contact was made with staff, Kaitlyn Symon, and Angela Ibarra. Angela Ibarra stated that she has been named as the new director due to the sudden departure of recently hired director, Charity Mosher. There are currently 18 residents in the facility. Director Ybarra stated that all the moisture has been removed from the rooms. The painting and repairs have begun. Upon walking through the facility, I observed several rooms in various stages of repair. The rooms have been repainted. Wood to the bedroom and bathroom floors has been repaired. Plank flooring is partially installed in some rooms, while others contain exposed wood flooring, with planks yet to be installed. Door frame trimmings are also missing. The old flooring in the shower room, used by all residents, is in the process of being torn out and is off limits to all residents. Flooring in the laundry room was affected as well; however, the room is still accessible to staff.

Residents were observed throughout the facility in their bedrooms and in the common room areas. Displaced residents were observed with beds temporarily set up in the beauty room as well as a room identified as the activity room.

Corporation Owner, Steve Larsen, stated that he did not opt to send the displaced residents to a hotel because it did not make sense to go to a hotel when he has 2 other buildings located on the property. Owner Larsen stated that he will look into applying for a Homes for the Aged license to avoid capacity violations.

On 03/05/2025, I received an email from Angela Ibarra indicating that there are 6 residents, from rooms114-118 and room 120, that remain displaced from their bedrooms.

On 04/16/2025, I spoke with Angela Ybarra who indicated that all the residents that were displaced have been able to return to their rooms. While 1 shower/full bathroom room is available for the residents use, the other full bathroom in the facility continues to be non-operational due to the floor still needing repair. Director Ybarra stated that the repairmen are waiting on transition pieces needed to connect the flooring in the main bathroom, as well as the entry foyer and hallways. Residents' rooms contain their own sink and toilet, which the residents can access. A Facetime video observation was scheduled for later that day.

On 04/16/2025, I conducted a follow-up Facetime video walk-through of Lakeshore Woods. During the video I observed bedrooms that were previously under construction are all completed and occupied by residents. New flooring, beds, bedding, and other required bedroom furnishings were observed in the rooms. I also observed the door frame trimming(s) to some of these rooms have not yet been replaced. In addition, flooring has not been repaired in the main entry foyer and throughout the hallway, exposing cement.

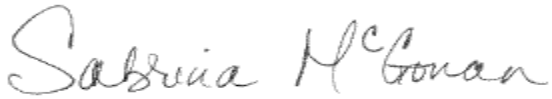
O4/21/2025, I conducted an exit conference with Corporation Owner Larsen who shared that it has been determined that the pipe bursting was due to an engineering error. As a result his insurance company will be pursuing legal action against the builders of the facility and the subcontractors. Larsen anticipates the remainder of the repairs to be completed within 60 days.

| **APPLICABLE RULE** | |
|---|---|
| **R 400.15403** | **Maintenance of premises.** |
| | **(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.** |
| **ANALYSIS:** | It was alleged that residents were moved due to the water pipe bursting in the facility.<br><br>Director, Charity Mosher, confirmed that there was a water main break at Lakeshore Woods where 10 resident rooms were affected. Upon walking through the facility, I observed several rooms in various stages of repair. Displaced residents were observed with beds temporarily set up in the beauty room as well as a room identified as the activity room.<br><br>Owner Larsen stated that he did not opt to send the displaced residents to a hotel because it did not make sense to go to a hotel when he has 2 other buildings located on the property. Owner Larsen stated that he will look into applying for a Homes for the Aged license to avoid capacity violations. |

| | |
|---|---|
| | During the follow-up Facetime video walk-through of Lakeshore Woods, I observed that bedrooms that were previously under construction are all completed and occupied by residents. New flooring, beds, bedding, and other required bedroom furnishings were observed in the rooms. Door frame trimming(s) to some of these rooms have not yet been replaced. In addition, flooring has not been repaired in the main entry foyer and throughout the hallway, exposing cement.<br><br>Based upon my investigation, which consisted of interviews with facility staff members and the Corporation Owner, Steven Larsen, as well my observation of the facility, there is evidence to substantiate the allegation. |
| **CONCLUSION:** | **VIOLATION ESTABLISHED** |

## IV. RECOMMENDATION

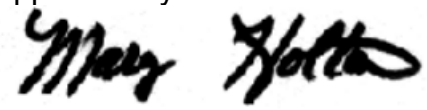
Upon the receipt of an approved corrective action plan, no change to the status of the license is recommended.



April 22, 2025

Sabrina McGowan — Date
Licensing Consultant

Approved By:



April 23, 2025

Mary E. Holton — Date
Area Manager