



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

May 30, 2025

Sondra Yantz  
Charter Senior Living of Stepping Stone Falls  
4444 W. Court Street  
Flint, MI 48532

RE: License #: AH250236841  
Investigation #: 2025A1035047  
Charter Senior Living of Stepping Stone Falls

Dear Sondra Yantz:

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.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

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.

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) 335-5985.

Sincerely,

Jennifer Heim, Licensing Staff  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
Lansing, MI 48909  
(313) 410-3226  
enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH250236841
<b>Investigation #:</b>	2025A1035047
<b>Complaint Receipt Date:</b>	04/07/2025
<b>Investigation Initiation Date:</b>	04/07/2025
<b>Report Due Date:</b>	06/07/2025
<b>Licensee Name:</b>	Flint Michigan Retirement Housing LLC
<b>Licensee Address:</b>	14005 Outlook Street Overland Park, KS 66223
<b>Licensee Telephone #:</b>	(240) 595-6064
<b>Administrator/ Authorized Representative:</b>	Sondra Yantz
<b>Name of Facility:</b>	Charter Senior Living of Stepping Stone Falls
<b>Facility Address:</b>	4444 W. Court Street Flint, MI 48532
<b>Facility Telephone #:</b>	(810) 720-5184
<b>Original Issuance Date:</b>	02/01/2001
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	08/01/2024
<b>Expiration Date:</b>	07/31/2025
<b>Capacity:</b>	114
<b>Program Type:</b>	AGED ALZHEIMERS

## II. ALLEGATION(S)

	Violation Established?
Resident A is not receiving quality of care. Resident A is unable to access call light. Resident A's room is dirty and unkept.	Yes
Additional Findings: Multiple stains are noted on carpet. Foul urine odor in the hallway.	Yes

The complainant identified some concerns that were not related to licensing rules and statutes for a home for the aged. Therefore, only specific items pertaining to homes of the aged provisions of care were considered for investigation. The following items were that that could be considered under the scope of licensing.

## III. METHODOLOGY

04/07/2025	Special Investigation Intake 2025A1035047
04/07/2025	Special Investigation Initiated - Letter
05/19/2025	Contact - Face to Face
05/28/2025	Inspection Complete BCAL Sub Compliant.
05/30/2025	Exit Conference.

### ALLEGATION:

Resident A is not receiving quality of care. Resident A is unable to access call light. Resident A's room is dirty and unkept.

### INVESTIGATION:

On April 7, 2025, the Department received a complaint through the online complaint system which states,

"The staff have been dropping Resident A when they pick her up. Resident A was sent to the hospital and never the facility never notified POA. The home does not clean Resident A's room. Resident A is not being taken care of the way she should be."

On May 19, 2025, an onsite investigation was conducted. While onsite I interviewed Staff Person (SP)1 who states she has been working with Resident A's POA to meet the needs of Resident A. SP1 continues to state many of Family A's concerns are related to issues that occurred with prior ownership. Family A stated concerns related to soiled flooring in Resident A's room and the facility changed the carpet to new flooring promptly after the concern was voiced.

While onsite, I interviewed Family A who states concerns related to Resident A not being dressed daily, not being repositioned in bed, not receiving assistance with meals, being left in bed, the room being filthy, and staff not putting Resident A's personal items away after being used. Family A states there was food under Resident A's bed for two weeks prior to being cleaned up. Family A states there had been a hanger on the floor for four days, no trash bags in the trash can, and the facility took away Resident A's call pendant therefore there is no way she can call for help.

While onsite, I interviewed SP2 who states she's been working with family A to meet the needs of Resident A. SP2 states she updated Resident A's service plan. SP2 unaware of Resident A being "dropped" and sent to the hospital.

While onsite, I interviewed SP3 who states resident rooms are cleaned weekly and as needed. The cleaning focus is on the bathroom and baseboards. A deep clean is conducted when a resident moves out.

While onsite, I interviewed SP4 who states she does her best to meet the needs of Resident A. SP4 states Family A comes in and feeds Resident A breakfast and lunch and staff members feed Resident A dinner. Resident A receives showers/ bed baths from a hospice aide.

Through direct observation, Resident A observed resting in bed. Resident A appeared well groomed. Resident A's room had random items placed on floor, clothes balled up and placed on chair, shirt balled up and placed on dresser next to the T.V., random hanger placed under the T.V., significant dust on bed frame, the call light was out of reach of Resident A, and the air mattress set to 350lbs.

Through record review Resident A. Service plan indicates Resident A requires a two person assist with Hoyer lift for transfers, staff assistance with meals, safety checks 4 times a shift. Housekeeping Assistance states "staff will offer to assist resident A when they need to perform housekeeping to tidy living quarters. Weekly vacuum, dust, bathroom, and trash, blinds to be opened every morning and closed every night."

<b>APPLICABLE RULE</b>	
<b>R 325.1921</b>	<b>Governing bodies, administrators, and supervisors.</b>
	<p><b>(1) The owner, operator, and governing body of a home shall do all of the following:</b></p> <p><b>(b) Assure that the home maintains an organized program to provide room and board, protection, supervision, assistance, and supervised personal care for its residents.</b></p>
<b>ANALYSIS:</b>	<p>The facility was unable to provide progress notes for Resident A. The facility was unable to provide information related to Resident A falling and being sent to the hospital.</p> <p>Through direct observation of Resident A's room has clutter on the floor, balled up clothes noted on chair and dresser, significant dust was observed on bed frame, call light out of reach, and air mattress set to 350lbs. Residents approximate weight is 150lbs.</p> <p>Based on the information noted above this allegation has been substantiated.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

### **ADDITIONAL FINDINGS:**

Multiple stains are noted on carpet. Foul urine odor in the hallway.

### **INVESTIGATION:**

Through direct observation, there were multiple stains noted on carpet, frayed carpet noted in entryways of three rooms, and there was foul urine smell noted within the 1200 hallway.

<b>APPLICABLE RULE</b>	
<b>R 325.1979</b>	<b>General maintenance and storage.</b>
	<b>(1) The building, equipment, and furniture shall be kept clean and in good repair.</b>

<b>ANALYSIS:</b>	Multiple stains noted on carpet. Carpet noted to be tattered in multiple doorway entrance to rooms. Foul urine odor within the 1200 hallway.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend the status of this license remains unchanged.



05/27/2025

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Jennifer Heim, Health Care Surveyor      Date  
Long-Term-Care State Licensing Section

Approved By:



05/28/2025

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Andrea L. Moore, Manager      Date  
Long-Term-Care State Licensing Section