



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 11, 2025

Appolonia Okonkwo
Lakeside Manor Inc
8790 Arlington
White Lake, MI 48386

RE: License #: AL630086778
Investigation #: 2025A0605009
Lakeside Manor Inc

Dear Appolonia Okonkwo:

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.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan.

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 (248) 972-9136.

Sincerely,

A handwritten signature in dark ink, reading "Frodet Dawisha". The signature is written in a cursive, flowing style. The name "Frodet" is written in a larger, more prominent script than "Dawisha".

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

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL630086778
Investigation #:	2025A0605009
Complaint Receipt Date:	04/07/2025
Investigation Initiation Date:	04/07/2025
Report Due Date:	06/06/2025
Licensee Name:	Lakeside Manor Inc
Licensee Address:	8790 Arlington White Lake, MI 48386
Licensee Telephone #:	(248) 666-9010
Administrator/Licensee Designee:	Appolonia Okonkwo
Name of Facility:	Lakeside Manor Inc
Facility Address:	8790 Arlington White Lake, MI 48386
Facility Telephone #:	(248) 666-9010
Original Issuance Date:	11/13/2000
License Status:	REGULAR
Effective Date:	07/07/2023
Expiration Date:	07/06/2025
Capacity:	20
Program Type:	MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
During a Bureau Fire Safety (BFS) inspection, bats and bat droppings were observed in the attic of this facility. Bats are dying in the attic and not being removed. Licensee designee Appolonia Okonkwo does not want to spend money to remedy the issue. There is concern for the resident's wellbeing.	Yes
Additional Findings	Yes

III. METHODOLOGY

04/07/2025	Special Investigation Intake 2025A0605009
04/07/2025	Special Investigation Initiated - Telephone Call with Don Christenson, Bureau of Fire Safety (BFS) regarding allegations
04/07/2025	APS Referral Adult Protective Service (APS) referral made
04/07/2025	Contact - Document Received APS denied referral
04/08/2025	Inspection Completed On-site Conducted unannounced on-site investigation
04/23/2023	Contact - Telephone call made With Nancy Huntington
04/28/2025	Contact - Face to Face Met with Nancy Huntington
04/28/2025	Contact - Telephone call made Interviewed direct care staff (DCS) regarding allegations
05/07/2025	Contact - Telephone call made With DCS
05/07/2025	Contact - Face to Face Made with licensee designee Appolonia Okonkwo

05/14/2025	Contact - Document Sent Email to licensee designee Appolonia Okonkwo
05/21/2025	Contact - Telephone call made With Nancy Huntington
05/21/2025	Contact – Telephone call made Left message for DCS
05/21/2025	Contact – Telephone call received Follow-up with DCS
05/29/2025	Contact – Telephone call made Tony with One Man Two Hands
06/11/2025	Exit Conference I conducted the exit conference with licensee designee Appolonia Okonkwo with my findings.

ALLEGATION:

During a Bureau Fire Safety (BFS) inspection, bats and bat droppings were observed in the attic of this facility. Bats are dying in the attic and not being removed. Licensee designee Appolonia Okonkwo does not want to spend money to remedy the issue. There is concern for the resident’s wellbeing.

INVESTIGATION:

On 04/07/2025, intake #205016 was assigned for investigation due to bats and bat droppings found in the attic of this facility.

On 04/07/2025, I interviewed via telephone Don Christensen with BFS regarding their inspection. According to Mr. Christensen, bat guano (droppings) was observed in the attic of this facility, and it was reported to Mr. Christensen that the owner of this home, who is licensee designee Appolonia Okonkwo was aware of the bat guano, but due to the remedy being “too expensive,” Ms. Okonkwo was not addressing the issue. Mr. Christensen stated that it was “unsafe,” for staff and the residents if the bat guano is not removed and the bat issue not remedied should anyone access the attic.

On 04/08/2025, I conducted an unannounced on-site investigation. DCS Jana Charbonneau and Residents A, B, C, D, E, F, G, H, I, and J was present. DCS Noelle Heller arrived at the home soon after. I interviewed Jana regarding the allegations. Jana has been working for this facility since October 2024. They work part-time during the day and afternoon shifts. Jana heard from DCS Noelle that there were bats in the attic about a month ago. Noelle told Jana she observed bat droppings in the attic and that no

residents should be allowed to go into the attic. The attic is used only for storage. Jana believes that the home manager (HM) Nancy Huntington is aware of the issue but does not know what the facility is doing to address the issue. Jana and I walked to the upper level of the facility to the attic. Jana used a key to unlock the door and there was a strong odor coming from the attic. Due to health and safety concerns, I did not go into the attic to observe the bat guano.

On 04/08/2025, DCS Noelle Heller arrived at the facility. She was interviewed regarding the allegations. Noelle has been working at this facility for about three years. She too works days and afternoon shifts. Bats were observed in the attic last summer and the owner/licensee designee Appolonia Okonkwo was aware of the issue and hired a company to place sonar traps and moth balls in the attic. Noelle does not have the name of the company nor was there any paperwork provided. She is unsure if the sonar traps and moth balls addressed the bat issue, but she has not seen any bats nor any bat guano in the attic.

On 04/08/2025, I interviewed Resident A regarding the allegations. Resident A has never been in the attic, so she does not know if there are bats there. She had not heard anyone say there were bats or bat guano in the attic.

On 04/08/2025, I interviewed Resident B regarding the allegations. Resident B has not seen any bats because he does not go into the attic. He too has not heard anyone say they saw bats or bat guano.

On 04/08/2025, I interviewed Resident C regarding the allegations. Resident C has not seen bats, nor has he been in the attic. He has not heard any staff or anyone else say there were bats or bat guano in the attic.

On 04/08/2025, I was unable to interview Resident D as I observed him sleeping in his bedroom. I tried to wake him; he mumbled something and then went back to sleep.

On 04/08/2025, I interviewed Resident E regarding the allegations. Resident E has not seen, nor has she heard any bats in the facility. She has not been in the attic, so she does not know anything about the bats. She has not heard any staff or anyone else talk about seeing bats or bat guano.

On 04/08/2025, I interviewed Resident F regarding the allegations. Resident F has not heard or seen bats nor bat guano in the attic because she does not have access to the attic. She has not heard any staff, or anyone talk about seeing bats or bat guano.

On 04/08/2025, I interviewed Resident G regarding the allegations. Resident G denied knowing anything about bats or bat guano in the attic. They have not heard any staff talk about bats.

On 04/08/2025, I interviewed Resident H regarding the allegations. Resident H denied knowing anything about bats or bat guano in the attic. They had no additional information to offer.

On 04/08/2025, I interviewed Resident I regarding the allegations. Resident I denied knowing anything about bats or bat guano in the attic. They too had no additional information to offer.

On 04/08/2025, I interviewed Resident J regarding the allegations. Resident J denied knowing anything bats or bat guano in the home. They had no additional information to offer.

On 04/23/2025, I interviewed HM Nancy Huntington via telephone regarding the allegations. The attic is used for storage. Last fall, Ms. Huntington was in the attic and found bat guano throughout the attic. She advised licensee designee Appolonia Okonkwo about this issue. Ms. Okonkwo advised Ms. Huntington to get quotes for addressing the bat guano, which Ms. Huntington did. She had two different quotes. One was \$6000 and the other was \$2000. She provided this information to Ms. Okonkwo who stated, "too much." Ms. Okonkwo brought in "her own people," to address the issue. Ms. Huntington did not know who the individuals were that came into the facility, but stated that the individuals put "moth balls," in the attic but the individuals did not address the bat guano issue. BFS conducted their annual inspection and found bat guano in the attic and brought the issue to Ms. Huntington's attention, who again advised Ms. Okonkwo. On 04/18/2025, three guys showed up in gear, went into the attic cleaned it up but never provided Ms. Huntington with any paperwork showing what was done. Ms. Huntington went into the attic and saw that all the bat guano was cleaned up; however, she is unsure if these "guys," were from a licensed company or just guys that Ms. Okonkwo knew.

On 04/28/2025, I met with the HM Nancy Huntington at this facility. Ms. Huntington did not have any paperwork to provide regarding the bat issue that was addressed. She stated that the only reason the bat guano was cleaned up was because licensing is now involved with this investigation. There have been several concerns about Ms. Okonkwo not following through with repairs that need to be completed within this facility.

Note: I observed no bat guano in the attic.

On 04/28/2025, I interviewed via telephone DCS Andrew Knowles via telephone regarding the allegations. Andrew has been working at this facility since 2017. He works the midnight shift. He has no knowledge about bats or bat guano other than seeing a note posed on the window about "how to remove bat guano safely." He is unsure who put the note up but stated he has never seen bats nor heard bats in this facility.

On 04/28/2025, I interviewed DCS Monica Siple regarding the allegations. Monica was working fulltime at this facility until the new licensee designee, Appolonia Okonkwo took

over. She is now only there to cut the residents' hair. About a few years ago there was a bat problem, and the exterminator came out, but when quotes for the cost of the remedy were told to Ms. Okonkwo, she did not "deem it a necessity," so nothing was done. Monica described Ms. Okonkwo as "kind of sketchy." She is unsure if the bat issue has been resolved.

On 04/28/2025, I interviewed DCS Elijah Heller via telephone regarding the allegations. Elijah has been working at this facility for two years. He works both morning and afternoon shifts. There were bats and bat guano in the attic, but he has never seen them. He has only heard about the issue and is unsure if the bat guano was addressed.

On 04/28/2025, I interviewed DCS Carlee Ragatz via telephone regarding the allegations. Carlee has been working at this facility since 2017. She works Thursdays/Fridays/Sundays. About two-three months ago, Carlee went into the attic to grab something and found a dead bat and bat guano throughout the attic. Carlee reported this to the HM Nancy Huntington who then called for quotes on remedying the bat issue, but Ms. Okonkwo said, "too expensive," and did nothing. Once licensing became involved, then Ms. Okonkwo had some guys clean the bat guano from the attic. Carlee is unsure if the "guys," were from a licensed company or not.

On 04/28/2025, I interviewed DCS Jesse Heller via telephone regarding the allegations. Jessie began working at this facility in July 2024. He works a double on Saturdays/Mondays and a single shift on Wednesdays. He heard about the bats and bat guano found in the attic, but he has never observed it. No one is allowed in the attic due to the bat issue. About a couple of days ago, he believed Ms. Okonkwo sent guys to the facility to clean the bat guano, but he has no information regarding the cleanup.

On 04/28/2025, I interviewed DCS Tad Ragatz via telephone regarding the allegations. Tad has been working on/off at this facility for about seven years. He works Fridays/Saturdays. He heard from coworkers that there were bats and bat guano in the attic. The attic is only used for storage so there is no reason for any residents to access the attic which they do not because it is locked. He stated, "Appolonia sent some of her people who threw moth balls in the attic only, but then when licensing came out to investigate the home, she (Appolonia) had someone clean it up."

On 05/07/2025, I interviewed licensee designee Appolonia Okonkwo face-to-face at this facility. Ms. Okonkwo stated that there was a bat issue in the attic, but that this has been addressed. She stated that a licensed company cleaned it up and she will provide me with the invoice.

On 05/26/2025, I received an invoice via email from Appolonia Okonkwo regarding the bat cleanup. The invoice was from One Man Two Hands dated 05/20/2025. This facility's address was on the invoice and according to the invoice, the following work was completed: replacement of two sinks, glazing of one tub, painting of four rooms, sanitation of attic, installation of three interior locks screen, replacement complete demolition of one room and drywall replacement of light and plug covers, repair of pipes

in wall. Total amount \$3,650 minus cash payment of \$2,600 leaving balance due of \$1,050.

On 05/29/2025, I contacted Tony with One Man Two Hands who according to the invoice dated 05/20/2025 completed sanitation of the attic. Tony stated he is a licensed contractor and only painted this facility and cleaned the attic. When asked if he is a licensed pest exterminator, he stated he was busy and would call back soon. I left him a voice mail message, but Tony never called back.

APPLICABLE RULE	
R 400.15401	Environmental health.
	(5) An insect, rodent, or pest control program shall be maintained as necessary and shall be carried out in a manner that continually protects the health of residents.
ANALYSIS:	Based on my investigation and information gathered, there were bats and bat guano in the attic of this facility and licensee designee, Appolonia Okonkwo did not remedy this issue until licensing investigated this issue. The HM and DCS reported that there were dead bats and guano found in the attic months ago and this issue was brought to the attention of Ms. Okonkwo along with quotes from pest control. Ms. Okonkwo deemed it not necessity to remedy the bat issue until after this investigation was brought to her attention. I received an invoice from Ms. Okonkwo for "sanitation of attic," but when speaking with Tony, the owner of this company, he did not confirm he was a licensed pest exterminator.
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 04/28/2025, during my face-to-face contact with HM Nancy Huntington, I was informed that there is no transportation van to transport residents to their medical appointments or outings. Ms. Huntington and DCS Noelle Heller have been transporting residents using their own personal vehicles and own personal money for gas due to Ms. Okonkwo not providing any funds for a van or gas.

On 05/07/2025, I discussed these allegations with Dr. Marlana Geha who is the professional guardian for Residents A, B, H, J, K, and L and she is also the case manager for Residents D and C. She visits all these residents weekly and has concerns that there is no transportation van for them. Staff use their own personal vehicles to transport these residents to their medical appointments and outings so without staff,

these residents would not be able to attend any appointments or outings. Dr. Geha is concerned that if these staff members are not working at this facility, then it would be unclear if care would be provided for these residents because of the new owner Appolonia Okonkwo.

On 05/07/2025, I discussed these allegations with Appolonia Okonkwo. She stated that she did not know she must provide transportation to the residents even though she has been the licensee designee for a couple of years. Ms. Okonkwo stated she will purchase a van for transportation of residents to their medical appointments and outings.

APPLICABLE RULE	
R 330.1805	Accessibility.
	Common use areas of the facility are accessible to all clients in residence, or an individual plan of service addresses the removal of imposed restrictions. The facility shall be capable of meeting the transportation needs of all clients the facility accepts for service.
ANALYSIS:	Based on my investigation and information gathered, Appolonia Okonkwo was not meeting the transportation needs of all residents at this facility as there was no transport van. The HM Nancy Huntington and other staff were utilizing their own personal vehicles for transport. Ms. Okonkwo confirmed that there is no transport vehicle for the residents.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 04/28/2025, during my interview with HM Nancy Huntington, I was informed that Ms. Huntington and DCS Andrew Knowles' payroll checks bounced. Ms. Huntington's payroll checks in the amount of \$2186.05 bounced and Andrew's payroll checks in the amount of \$1400 bounced. Ms. Huntington called Appolonia Okonkwo advising her of the payroll checks bouncing and Ms. Okonkwo advised Ms. Huntington that she would take care of the issue and pay both her and Andrew the money which she did. In addition, Ms. Huntington reported that she and other staff are using their own personal money for gas and to purchase groceries because Ms. Okonkwo does not seem to have funds. In addition, there are several repairs to this home that need to be completed such as the roof, ceilings have water damage because of the roof but Ms. Okonkwo says, "it's too expensive," so no repairs have been completed.

On 04/28/2025, I interviewed Andrew Knowles regarding the allegations. Andrew was upset that his payroll checks bounced when he tried cashing his check. It was about \$1400, so he called Ms. Huntington and informed her what happened. She advised him

to call Noelle who takes care of writing the checks which he did. Noelle called Ms. Okonkwo who stated she will come in tomorrow with a check; however, now he was dealing with another issue regarding Ms. Okonkwo. Andrew stated that he must pay child support and Michigan Department of Health and Human Services (MDHHS) retrieves this money from his paycheck. However, there have been numerous times when MDHHS goes to retrieve the money from his paycheck, but the money is not available. He was being penalized for not paying for child support. He brought this to Ms. Okonkwo's attention, but it has happened more than once.

On 04/28/2025, I interviewed Noelle Heller regarding these allegations. Noelle does payroll biweekly when she writes out the payroll checks for all staff. Andrew called her saying his payroll checks bounced in the amount of \$1400. Noelle called Ms. Okonkwo advising her that both Andrew and Ms. Huntington's checks bounced, she stated she would be in the next day to pay which she did. This was an isolated incident; however, there was an issue with Ms. Okonkwo who was not paying payroll taxes last year. There were always insufficient funds to cover payroll taxes last year which also impacted Andrew who pays child support. Andrew had issues on four different occasions with MDHHS trying to withdraw child support from his payroll check, but there were insufficient funds. When the payroll tax was becoming an issue, the government made Ms. Okonkwo get a payroll company, which she did named Gusto. Payroll checks are printed at the facility, so Ms. Okonkwo is responsible for paying payroll taxes, which she is still behind because of insufficient funds.

On 04/28/2025, I followed up the HM Nancy Huntington who stated that in 2023 about a year after Ms. Okonkwo purchased this home and business, the previous licensee designee Marilyn Jenkins, received a letter every other month from the Internal Revenue Service (IRS). The letter stated that Ms. Jenkins owned the IRS \$11,000 in unpaid taxes. Ms. Jenkins paid the amount but then realized these were unpaid taxes by Ms. Okonkwo. It is unclear whether taxes have been paid since.

On 05/07/2025, I received a text message from Nancy Huntington stating that Andrew Knowles' payroll check bounced again and so did Jana Charbonneau's check.

On 05/07/2025, I discussed these allegations with Appolonia Okonkwo face-to-face at the facility. Ms. Okonkwo stated that she did not have sufficient funds in the payroll account because her husband, Ben Okonkwo, took the residents' rent checks and instead of depositing them at the bank, he used the ATM machine. While he was depositing the checks into the ATM machine, the machine jammed so he was unable to deposit all the checks. I asked her why he did not go into the bank to deposit the checks, and she stated, "he didn't say why he didn't go into the bank." She stated, "I have the money to run it," and agreed to submit her personal bank statements for the last six months for my review. Ms. Okonkwo was unable to provide any information regarding staff using their own personal money to purchase gas and groceries. She kept saying, "I'm just going to let all the staff go because they're all family and I'm going to hire my own staff." Then she said, "I have six other homes I run and never had this issue before." Ms. Okonkwo was asked about the facility needing repairs and she

stated, "I bought the house like this so that's why it looks like that." When advised she is responsible for the facility's maintenance including repairs, she stated, "I will get my guys to do it." She stated the "guys," were licensed but was unable to provide me with their information.

On 05/21/2025, I contacted DCS Jana Charbonneau via telephone regarding these allegations. Jana reported that two payroll checks bounced; one for pay period 04/04/2025-04/17/2025 in the amount of \$648.13 and another for pay period 04/18/2025-05/01/2025 in the amount of \$1,338.62. Jana received a letter from the bank stating that the checks bounced due to insufficient funds. The HM Nancy Huntington was notified. Ms. Huntington called Ms. Okonkwo who arrived at the home on 05/20/2025 and paid Jana \$2000 in cash. Ms. Okonkwo did not say why the checks bounced.

On 05/26/2025, I received an email from Appolonia Okonkwo with a letter dated 05/17/2025 from Citizens Bank regarding her personal account. Instead of Ms. Okonkwo submitting six months of her bank statements, she sent a signed letter by the bank manager stating there is \$20,046.81 in Ms. Okonkwo's personal checking account.

APPLICABLE RULE	
R 400.14201	Qualifications of administrator, direct care staff, licensee, and members of the household; provision of names of employee, volunteer, or member of the household on parole or probation or convicted of felony; food service staff.
	(2) A licensee shall have the financial and administrative capability to operate a home to provide the level of care and program stipulated in the application.
ANALYSIS:	Based on my investigation and information gathered, it appears that licensee designee, Appolonia Okonkwo, does not have the financial capability to operate a home. The HM Nancy Huntington and DCS Andrew Knowles and Jana Charbonneau's payroll checks bounced in April 2025 and in May 2025. Staff are using their own personal money for gas and groceries for this facility and there are a significant number of repairs that are needed such as replacement of the roof, which Ms. Okonkwo has not addressed since purchasing this home in 2022.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 04/28/2025, the HM Nancy Huntington reported that she went to Bank of America to withdraw resident's personal funds but was informed that licensee designee Appolonia Okonkwo closed the bank account withdrawing \$3227.02. Ms. Huntington was also

informed by the bank teller that Ms. Okonkwo withdrew \$500 from an ATM located in Detroit. Each resident does not have their own personal bank account. All the residents' share one account for their personal funds; therefore, it is unclear what amount of the \$3772.02 belongs to which resident. Ms. Huntington receives two checks from the guardians for the residents; one check is the cost of care, and the other is their personal funds. Ms. Okonkwo picks up the cost of care checks and then Ms. Huntington deposits the personal funds checks in the one bank account at Bank of America. Whenever residents need personal funds, she goes to the bank and withdraws the money. Ms. Huntington keeps a ledger of all the personal funds of each resident and documents on the fund's part II their spenddown. After the account was closed by Ms. Okonkwo, Ms. Huntington called Ms. Okonkwo advising Ms. Okonkwo that she was "committing fraud and stealing from the residents." Ms. Okonkwo told Ms. Huntington she was not going to add her on the account. Ms. Okonkwo would arrive at the facility with "stacks of cash," and would give that cash to Ms. Huntington. Ms. Huntington would then give the residents' their money to spend and document this on the ledger and then on the fund's part II. This process continued until Ms. Okonkwo opened a new back account with Ms. Huntington's name allowing her access to the residents' personal funds. Ms. Huntington stated that a total of \$6951.02 was the number of residents' personal funds from 11/01/2024-01/21/2025; however, after she reviewed the ledger, there was \$1775 missing from the residents' funds that she never received from Ms. Okonkwo. She reported this to Veteran Affairs (VA), but because each resident did not have their own personal account, the VA was unable to prove that Ms. Okonkwo misused anyone's funds; therefore, there was no investigation.

I received from Ms. Huntington Bank of America statements on the new account that Ms. Okonkwo opened on 10/30/2024. The account was established on 10/30/2024 and according to the statement, \$3227.02 was transferred into this account. This was the amount that was withdrawn when the initial account was closed and, on this date, an additional \$2050.00 was deposited into this account totaling \$5277.02. After reviewing the bank statements from 10/30/2024-04/30/2025; there were several withdrawals in large amounts each month. There is no additional information regarding the withdrawals, just the amount that was withdrawn each month. The following are withdrawals for each month:

- 10/2024- \$1500
- 11/2024- \$6100
- 12/2024- \$2750
- 01/2025- \$1775
- 02/2025- \$2230
- 03/2025- \$4200
- 04/2025- \$2650

Note: It was difficult to determine whether all the withdrawals of the residents' personal funds were given to Ms. Huntington for each resident due to each resident not having their own personal bank account. I reviewed the residents' fund's part II forms and Ms. Huntington has documented the spenddown, but it is unclear if any of the residents' funds were misused due to each resident not having their own bank account.

On 05/07/2025, I interviewed professional guardian Dr. Marlana Geha regarding these allegations. Ms. Geha stated that she has not noticed any of the residents' personal funds misused by this facility. She makes two checks out: one for cost of care and the other for the residents' personal allowance. Ms. Geha receives a fund's part II sheet for each resident she is responsible for and according to the records, there are no funds missing. She stated, "If a resident was missing their funds, I'd be the first to hear about it. These residents know what they get and are not afraid to call me immediately and complain about it." She reported no concerns regarding any of the residents' funds.

On 05/07/2025, I interviewed licensee designee Appolonia Okonkwo regarding these allegations. Ms. Okonkwo stated that the residents' guardians write two checks: one for rent and the other for the residents' personal allowance. She picks up the rent checks and Ms. Huntington deposits all the personal funds check into one bank account. Ms. Huntington then was withdrawing from this account for the residents. However, Ms. Okonkwo saw that there were large amounts of money being withdrawn so she closed the initial bank account believing that Ms. Huntington was misusing the residents' funds. Ms. Okonkwo stated she believed each resident received around \$40 but then learned that some of the residents were receiving hundreds of dollars in personal funds and this concerned her. Ms. Okonkwo did not bring these concerns to anyone but closed the account and opened another account without Ms. Huntington having access. Ms. Okonkwo stated that she did withdraw \$500 from an ATM in Detroit, but that the \$500 was given to Ms. Huntington for the residents. Ms. Okonkwo transferred the rest of the money to the new Bank of America account. She then began picking up both the cost of care checks and personal allowance checks from this facility monthly. She deposited the residents' personal allowance money into the new account. Ms. Huntington would contact her weekly requesting residents' funds, so Ms. Okonkwo withdraws the cash and gives it to Ms. Huntington. Ms. Okonkwo does not know if Ms. Huntington uses the residents' monies appropriately because she does not review any of the fund's part II forms. She just hands the cash to Ms. Huntington who is responsible for keeping records. Ms. Okonkwo denied misusing any of the residents' funds and stated that she was not aware that each resident must have their own personal bank account because she has never done that at any of her other group homes. Ms. Okonkwo stated that she will work with Ms. Huntington and the residents' guardians to see if each resident can get their own bank account.

APPLICABLE RULE	
R 400.15315	Handling of resident funds and valuables.
	(10) A licensee, administrator, direct care staff, other employees, volunteers under the direction of the licensee, and members of their families shall not accept, take, or borrow money or valuables from a resident, even with the consent of the resident.

ANALYSIS:	Based on my investigation and information gathered, I am unable to determine if licensee designee Appolonia Okonkwo was taking personal funds from any of the residents. All the residents' personal allowances were deposited into one bank account with Bank of America. Even though the HM Nancy Huntington was keeping a ledger and a fund's part II form for each resident, it is unclear if the residents' funds were being misused. Ms. Okonkwo did close the original resident's bank account on 10/30/2024; however, she had the monies transferred to another bank account she established on 10/30/2024. There were several large withdrawals each month from the new account; however, according to the ledgers kept by Ms. Huntington, the monies were given to each resident.
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.15315	Handling of resident funds and valuables.
	(9) A resident's account shall be individual to the resident. A licensee shall be prohibited from having any ownership interest in a resident's account and shall verify such in a written statement to the resident or the resident's designated representative.
ANALYSIS:	Based on my investigation and information gathered, Residents A, B, C, D, F, G, H, I and J did not have their own individual bank accounts for their personal funds. All the residents' personal allowances were being deposited into one back account.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

During the on-site investigation on 04/08/2025, there was a strong urine smell on the second floor of this facility. DCS Jana Charbonneau stated that the urine smell was coming from the bathroom in the hallway of the second floor as residents were "peeing on the floor." I observed the bathroom, and the odor was so strong that I had to step away as my eyes began tearing. The bathroom floors were sticky and the panel behind the toilet was separating from the wall. Jana stated staff always clean the bathroom but because the urine is imbedded into the floor and walls, the smell does not go away. The HM Nancy Huntington is aware of this issue, but Jana does not know if the licensee designee Appolonia Okonkwo is aware.

During this on-site I observed the following: kitchen cabinet missing; missing mattress in bedroom #6, blinds broken in bedroom #6, ceiling cracked and in need of repair in bedroom #7 and in apartment A1.

On 04/23/2025, I contacted the HM Nancy Huntington regarding the allegations. Ms. Huntington is aware of the strong urine smell in the bathroom on the second floor. She has informed Ms. Okonkwo that the bathroom floors need replacing as does the wall behind the toilet. Staff are using strong chemicals to clean the bathroom but because Resident C continues to pee on the floor, the smell continues. Ms. Okonkwo had “guys,” come to the facility and pulled the floor up and replaced it with tile and then the “guys,” put a panel on the wall, but the repairs were not done correctly. Ms. Huntington is unsure if the “guys,” were with a licensed company, but she spoke with Ms. Okonkwo advising her that the repairs were not completed properly. Ms. Okonkwo told her she will send the “guys,” back to complete the repairs properly.

On 04/28/2025, I conducted another on-site visit at this facility. I met with the HM Nancy Huntington regarding these issues. The mattress was thrown out after a resident moved out of the bedroom #6. Bedroom #6 was dirty and there was debris on the floor. Ms. Huntington stated that she has been trying to get Ms. Okonkwo to complete these repairs but Ms. Okonkwo continues to say, “too expensive,” and then sends out “guys,” to make repairs to the home but the repairs are not done properly. Ms. Huntington showed me the bedrooms that were being painted, and I observed paint all over the hallway floor of the second floor. I observed the ceilings in need of repairs in bedroom #7 and in apartment A1 which according to Ms. Huntington is caused by the leaking roof. I went outside and observed that there appeared to be some damage near the chimney of the roof. Ms. Huntington stated she reported all these issues to Ms. Okonkwo, but nothing is getting done.

On 04/28/2025, I interviewed DCS Andrew Knowles regarding these allegations. Andrew is aware of the urine smell in the bathroom on the second floor. He and other staff clean the bathroom, but residents continue to urinate on the floor. Ms. Okonkwo brought “guys,” to make repairs but the repairs were not completed properly. The ceilings in bedroom #7 is leaking because of the roof. He stated the repairs have not been completed.

On 04/28/2025, I interviewed DCS Monica Siple regarding the allegations. Monica stated that there are several repairs that need to be completed in this facility, but Ms. Okonkwo is not completing them. The bathroom on the second-floor needs repair due to the urine smell, the ceilings in bedroom #7 and in the apartment upstairs need repair because of something leaking. Monica stated that her husband was the maintenance person doing the repairs at this facility, but since the new licensee Appolonia Okonkwo refused to pay him for the work he was doing, he quit.

On 04/28/2025, I interviewed DCS Carlee Ragatz regarding the allegations. Carlee stated she is aware of all the repairs that need to be completed at this facility. The bathroom on the second floor and the ceilings in the bedrooms due to a leak. She

recalls the HM Nancy Huntington writing all the items down that needed repair and giving the list to Ms. Okonkwo who stated, "I don't have money for that." Since Ms. Okonkwo purchased this facility, she does not want to make any repairs.

On 04/28/2025, I interviewed DCS Jesse Heller regarding the allegations. Jesse is aware of the issues with this facility; ceilings need fixing as well as the bathroom on the second floor. He stated that the HM Nancy Huntington reports these things to licensee Appolonia Okonkwo, but he does not know what Ms. Okonkwo says. He stated, "all I know is that Appolonia rarely comes to this home but Nancy and Noelle keeping telling Appolonia what needs to be fixed, and she doesn't fix it."

On 04/28/2025, I interviewed DCS Tad Ragatz regarding the allegations. Tad stated that the second-floor bathroom has been an issue for a long time because the residents urinate on the floor. Staff clean it but due to the urine on the floor, the smell does not go away. The repairs were completed but not properly by the "guys," that Ms. Okonkwo brings to the home. It is unclear if they are licensed or not. The ceilings are leaking in this facility due to the roof, but Ms. Okonkwo does not want to spend the money, so it continues to leak.

On 05/07/2025, I interviewed licensee designee Appolonia Okonkwo regarding the allegations. Ms. Okonkwo stated that the bathroom upstairs has been repaired by licensed contractors. She was unable to provide me with their contact information or any paperwork showing the repairs were completed. She will send the invoice via email. When asked about the leaking roof and ceilings in some of the bedrooms that need repairs, she stated, "I bought the house like this," but provided no additional information other than, "I'll have the guys fix it." She was informed that the "guys," who she hired to paint the bedrooms have spilled paint all over the hallway and bedroom floors. Again, she stated, "I'll have the guys fix it."

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:	Based on my investigation and information gathered, the home is not constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of the residents. The kitchen cabinet was missing. The blinds in bedroom #6 are broken. The bathroom on the second floor is not repaired properly as the panel on the wall is separating.
CONCLUSION:	REPEAT VIOLATION ESTABLISHED Reference SIR #2022A0612004 dated 06/01/2022; CAP dated 09/07/2022

APPLICABLE RULE	
R 400.15403	Maintenance of premises.
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.
ANALYSIS:	Based on my observations during my on-site visits on 04/08/2025 and 04/28/2025, the housekeeping standards are not clean and orderly in appearance. The upstairs bathroom smelled of urine, bedroom #6 was dirty with debris on the floor.
CONCLUSION:	REPEAT VIOLATION ESTABLISHED Reference LSR dated 06/27/2023, CAP dated 07/31/2023

APPLICABLE RULE	
R 400.15403	Maintenance of premises.
	(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.
ANALYSIS:	During my on-site visit on 04/28/2025, I observed some damage near the chimney of the roof. The roof is causing leaking into the facility as evident by the ceilings in need of repair in bedroom #7 and in apartment A1.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
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.
ANALYSIS:	During the on-site on 04/28/2025, there was paint on the floor of the hallway after Ms. Okonkwo had "guys," paint the bedrooms. The ceilings in bedroom #7 and in apartment A1 were leaking and in need of repair.
CONCLUSION:	REPEAT VIOLATION ESTABLISHED Reference SIR #2020A0991043 dated 09/23/2020, CAP dated 12/10/2020

APPLICABLE RULE	
R 400.15403	Maintenance of premises.
	(7) All water closet compartments, bathrooms, and kitchen floor surfaces shall be constructed and maintained so as to be reasonably impervious to water and to permit the floor to be easily kept in a clean condition.
ANALYSIS:	During the on-site visit on 04/08/2025 the bathroom floor was sticky due to residents urinating on the floor.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.15410	Bedroom furnishings.
	(5) A licensee shall provide a resident with a bed that is not less than 36 inches wide and not less than 72 inches long. The foundation shall be clean, in good condition, and provide adequate support. The mattress shall be clean, comfortable, in good condition, well protected, and not less than 5 inches thick or 4 inches thick if made of synthetic materials. The use of a waterbed is not prohibited by this rule.
ANALYSIS:	The mattress in bedroom #6 was missing and there was only a boxspring.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

During the on-site investigation on 04/08/2025, I observed Residents G and I using a cane to ambulate. This facility is not wheelchair accessible. Resident G was interviewed and stated that he has been using a cane for about two-years. He is large in stature and stated without the cane, he has difficulty walking and climbing stairs. His bedroom is located on the second floor. I interviewed Resident I who has been using a cane since she moved in four years ago. She too needs the cane to ambulate, and her bedroom is on the second floor.

On 04/23/2025, I interviewed the HM Nancy Huntington regarding the allegations. Resident G began using the cane when he put on about 100 pounds since moving into this facility. He has knee and foot issues. He went to the VA one day and returned with the cane. The cane is in his assessment plan. Resident I does not need a cane but one

day showed up with it. She is unclear where Resident I got the cane from but there is no script. I reviewed both Resident G's and Resident I's assessment plans. Resident G's assessment plan dated 11/06/2024 stated that Resident G "uses a cane." Resident I's assessment plan dated 11/06/2024 stated, Resident I "sometimes uses a cane." Ms. Huntington acknowledged that this facility is not wheelchair accessible, and this facility is no longer an appropriate placement for these residents.

On 04/28/2025, I interviewed all the DCS regarding these allegations and all the staff stated that both Resident G and Resident I use a cane to ambulate.

On 05/07/2025, I interviewed licensee designee Appolonia Okonkwo regarding the allegations. She stated, "I talked to Nancy and Noelle and both stated, Residents G and I can walk without the cane." She acknowledged that this facility is not wheelchair accessible, and that this facility is no longer an appropriate placement for these residents.

On 06/11/2025, I conducted the exit conference with licensee designee Appolonia Okonkwo via telephone. Ms. Okonkwo acknowledged my findings and recommendations. She stated she did not have any additional information to offer or any questions.

APPLICABLE RULE	
R 400.15405	Living space.
	(3) Living, dining, bathroom, and sleeping areas used by residents who have impaired mobility shall be accessible and located on the street floor level of the home that contains the required means of egress.
ANALYSIS:	Based on my investigation and information gathered, Residents G and I have mobility issues as both use a cane and their bedrooms are not located on the street level of the home. Both of their bedrooms are located upstairs. This facility is not wheelchair accessible.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.15408	Bedrooms generally.
	(9) A resident who has impaired mobility shall not sleep in or be assigned a bedroom that is located above the street floor of the home.

ANALYSIS:	Based on my investigation and information gathered, Resident G's and Resident I's is impaired as both use a cane to ambulate. Their bedrooms are located on the second floor which is above the street floor of this facility.
CONCLUSION:	REPEAT VIOLATION ESTABLISHED Reference SIR #2022A0605043 dated 09/06/2022, CAP dated 11/17/2022

IV. RECOMMENDATION

Contingent upon receiving an acceptable corrective action plan, I recommend a 6-month provisional license.

Frodet Dawisha

06/11/2025

Frodet Dawisha
Licensing Consultant

Date

Approved By:

Denise Y. Nunn

06/11/2025

Denise Y. Nunn
Area Manager

Date