GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 1, 2025

Christina Sanders
JC Assisted Living II LLC
Suite 400
250 Monroe Ave. NW
Grand Rapids, MI 49503

RE: License #:	AS410417567
Investigation #:	2025A0356039
	JC Assisted Living II

Dear Ms. Sanders:

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 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. If I am not available and you need to speak to someone immediately, please contact the local office at (616) 356-0100.

Sincerely,

Elizabeth Elliott, Licensing Consultant
Bureau of Community and Health Systems
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 901-0585

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS410417567
Investigation #:	2025A0356039
Complaint Receipt Date:	05/12/2025
Investigation Initiation Date:	05/12/2025
Report Due Date:	07/11/2025
Licensee Name:	JC Assisted Living II LLC
Licensee Address:	250 Monroe Ave. NW, Suite 400 Grand Rapids, MI 49503
Licensee Telephone #:	(616) 500-2190
Administrator:	Christina Sanders
Licensee Designee:	Christina Sanders
Name of Facility:	JC Assisted Living II
Facility Address:	631 3 Mile Rd. NE Grand Rapids, MI 49505
Facility Telephone #:	(616) 278-3868
Original Issuance Date:	09/07/2023
License Status:	REGULAR
Effective Date:	03/07/2024
Expiration Date:	03/06/2026
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL, AGED, ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
The facility is dirty and unkempt.	Yes
Staff used an unapproved assistive device on Resident A.	No

III. METHODOLOGY

05/12/2025	Special Investigation Intake 2025A0356039
05/12/2025	APS Referral Emily Graves, Kent Co, DHHS APS
05/12/2025	Special Investigation Initiated - Telephone Ashton Byrne, NW 180 and Emily Graves, APS, Kent Co. DHHS.
05/12/2025	Contact - Document Received Emails between Ms. Byrne and Ms. Graves.
05/13/2025	Contact - Telephone call received Emily Graves, APS
05/14/2025	Inspection Completed On-site
05/14/2025	Contact - Face to Face Kaylee Noffsinger, DCW and Resident B, Jordan Hurt.
05/14/2025	Contact - Telephone call made Licensee, Christian Sanders.
05/15/2025	Contact - Telephone call received Christina Sanders, Licensee.
05/29/2025	Inspection Completed On-site
05/29/2025	Contact - Face to Face Kaylee Noffsinger, DCW and Resident A, C, D, E.
05/29/2025	Contact-Document Received Reviewed Resident A’s assessment plan for AFC residents.
06/09/2025	Contact-Telephone call received Relative #1

06/11/2025	Contact-Telephone call made Paul Heemstra, Lincoln developmental, teacher.
06/16/2025	Contact-Telephone call received Mr. Heemstra.
06/16/2025	Exit conference-Christina Sanders, Licensee Designee.

ALLEGATION: The facility is dirty and unkempt.

INVESTIGATION: On 05/12/2025, I received an Office of Recipient Rights complaint from Network 180. The complainant reported the living room of the facility was a mess upon entering the home, there were cookie crumbs all over, Resident A cannot eat anything by mouth so having the food remnants available to him could be serious if he eats them. Kent County Department of Health and Human Services, Adult Protective Services, Emily Graves has an open investigation.

On 05/12/2025, I interviewed Ms. Graves via telephone. Ms. Graves confirmed that she has the same complaint information and will conduct an unannounced inspection at the facility within 72 hours.

On 05/13/2025, Ms. Graves contacted me via telephone and reported that she found the house to be in “deplorable condition”. Ms. Graves stated there was fecal material observed on Resident A’s room curtains, rug, windows and toys. Ms. Graves stated there were full garbage bags in the kitchen, the floor was sticky, and the laundry room was full of laundry with fecal material on it from Resident A. Ms. Graves stated the condition the home is in at this time is “terrible”.

On 05/14/2025, I conducted an unannounced inspection at the facility. DCW (direct care worker) Kaylee Noffsinger was working, and we walked around the facility together. There were two bags of garbage sitting in the kitchen of the facility, the floor was sticky throughout the facility kitchen and dining room, and Ms. Noffsinger was working on washing dishes. I inspected Resident A’s room and observed fecal material on the curtains hanging in the windows of the room. I observed smeared fecal material on the windows in Resident A’s room, no sheets on Resident A’s bed and what appeared to be a fecal material stain on Resident A’s carpet at the foot of the bed. The room smelled of urine. I observed toys in the bathroom sink next to Resident A’s room with feces smeared all over the toys. I observed a large toy next to the toilet with fecal material smeared over it, Ms. Noffsinger confirmed that the toys are Resident A’s. I inspected Resident’s B, C, D & E’s rooms and they are adequately clean.

I interviewed Ms. Noffsinger at the facility. Ms. Noffsinger stated Resident A is not difficult to care for and she can provide all the care he requires, but acknowledged she is behind in cleaning. Ms. Noffsinger stated she is unable to reach the curtains

in Resident A's room so she can launder them and stated she required a taller person to get them down for her. Ms. Noffsinger stated she plans to get the garbage into the outside garbage can and clean Resident A's toys that are in the bathroom upon my departure. Ms. Noffsinger stated Resident A has not bothered the garbage bags nor has he tried to get in them to eat anything. Ms. Noffsinger stated they use a gate across the kitchen door when cooking, when they have food in the open or on the dining room table due to Resident A's PICA (an eating disorder where a person compulsively eats things that are not food). Ms. Noffsinger explained they are doing this to keep Resident A safe. Ms. Noffsinger stated she is working on Resident A's laundry but acknowledged she had not got it all done since the inspection by APS the previous day.

On 05/14/2025, I consulted with Christina Sanders, Licensee Designee, via telephone and reported my findings from the unannounced inspection. Ms. Sanders stated she is surprised to hear that the facility was unkempt and stated she has new live-in staff and has not been at the facility for a couple of weeks. Ms. Sanders stated she would follow up immediately.

Historically, each time I have inspected this facility, I have not found the condition of the facility to be poor. The condition of the home on this date was not typical of the way this facility usually is upon inspections both announced and unannounced.

On 05/15/2025, Ms. Sanders reported that she conducted an unannounced inspection on 05/15/2025, she found the same toys in the bathroom sink with fecal material on them. Ms. Sanders stated Resident A's bed was made but she did not see if there were sheets on his bed. Ms. Sanders stated she found fecal matter in Resident A's bedroom on the windows, curtains and carpet. Ms. Sanders reported she found the facility in the same condition as Ms. Graves and I. Ms. Sanders stated she conducted an unannounced inspection at the facility and found the home in the same condition that Ms. Graves and I witnessed on two different dates. Ms. Sanders stated the issue was not resolved until she arrived at the facility and instructed the staff to clean it up.

On 05/29/2025, I conducted an unannounced inspection at the facility. I observed garbage cans on the side of the house that were filled with garbage, there were no garbage bags inside the house. I inspected the bathroom near Resident A's room and there were no toys in the sink or on the floor with fecal material on them. Resident A's bed had sheets on it, the fecal material was cleaned off the windows and curtains but there still was a spot on the carpet at the foot of the bed that appeared to be fecal material smeared into the carpet still. Resident A's room still smelled of urine. The rest of the facility and resident rooms were adequately clean.

On 06/09/2025, I interviewed Relative #1 via telephone. Relative #1 stated the house is adequately clean whenever he has been there and did not see the facility in the unclean state as it was on 05/13/2025 and 05/14/2025. Relative #1 stated he

visits Resident A often and has both announced and unannounced visits at the facility.

On 06/16/2025, Ms. Sanders contacted me and stated she has issued all the residents in this facility with a 30-day notice and stated she plans to close this facility once all the residents are appropriately placed.

APPLICABLE RULE	
R 400.14403	**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:	The complainant reported the facility was a mess, with garbage and food items around the house. Upon an unannounced inspection of the facility on 05/14/2025, I found the condition of the facility to be poor and found the cleanliness of the kitchen, Resident A's room and bathroom unacceptable. Upon an unannounced inspection conducted on 05/29/2025, I found the facility to be in better condition and the issues observed during the inspection on 05/14/2025 resolved. Relative #1 reported that he visits Resident A often in the facility and has never seen the facility dirty or in poor condition. Historically the maintenance of this facility has been adequate, however, the conditions in the facility were found to be unacceptable upon inspection by APS, Licensing and the Licensee Designee on three different dates. Therefore, a violation of this applicable rule is established.
CONCLUSION:	**VIOLATION ESTABLISHED**

ALLEGATION: Staff used an unapproved assistive device on Resident A.

INVESTIGATION: On 05/12/2025, I received an Office of Recipient Rights complaint from Network 180. The complainant reported while at the facility on 05/07/2025, staff changed Resident A's brief, and the complainant noticed Resident A had a band around his stomach. The complainant stated she did not know what the band was and that he had just got home from school and the band must be used at school and not in the facility. The complainant reported she removed the band.

On 05/12/2025, I interviewed Ms. Graves via telephone. Ms. Graves confirmed that she has the same complaint information and will conduct an unannounced inspection at the facility within 72 hours.

On 05/13/2025, Ms. Graves contacted me via telephone and reported that she observed Resident A in the facility, and he did not have a band around his midsection. Ms. Graves stated she interviewed Ms. Noffsinger who reported that she did not know what the band was, that the band was not something they used in the facility, and it was something they use at school, and they did not take it off when Resident A left school for the day. Ms. Graves stated Ms. Noffsinger acknowledged that she left the band on Resident A when he got home from school and when the complainant was at the facility because she did not know what it was and did not know if she should remove it.

Ms. Graves stated she interviewed Paul Heemstra via telephone, Resident A's teacher at Lincoln Development School. Ms. Graves stated Mr. Heemstra reported the band is an approved assistive device used only while Resident A is at school. The band holds Resident A's brief tight against his midsection to prevent him from digging into this brief when he defecates. Ms. Graves stated Mr. Heemstra acknowledged that staff at school must have forgotten to remove the band on the day Resident A went back to the facility with it still around his waist.

On 05/14/2025, I conducted an unannounced inspection at the facility, and interviewed Ms. Noffsinger. Ms. Noffsinger reiterated the same information as reported to Ms. Graves. Resident A was not in the facility on this date and was not observed.

On 05/14/2025, I interviewed Ms. Sanders via telephone. Ms. Sanders confirmed the band was an assistive device used only while Resident A was at school and the band is not used in the facility. Ms. Sanders stated they use adult "onesie" type shirts as an approved assistive device to keep Resident A from digging in his briefs rather than a band.

On 05/29/2025, I conducted an unannounced inspection at the facility. I observed Resident A immediately upon arrival home from school and he did not have a band on. Resident A is unable to provide information pertinent to this investigation due to cognitive impairment.

On 05/29/2025, I reviewed Resident A's assessment plan dated 11/08/2024 and signed by Ms. Sanders and Relative #1. The assessment plan documented the use of a T-shirt onesie as an assistive device. The assessment plan does not include the use of a band around Resident A's midsection as an assistive device.

On 06/09/2025, I interviewed Relative #1 via telephone. Relative #1 confirmed the band is used on Resident A while he is in school to prevent him from digging into his

briefs and staff at school must have accidentally left the band on Resident A when he left school. Relative #1 stated the band is an approved device at school but it is never used in the facility. Relative #1 stated staff at the facility use a onesie T-shirt on Resident A to prevent digging.

On 06/16/2025, I interviewed Paul Heemstra, Lincoln Developmental teacher, via telephone. Mr. Heemstra confirmed the band is an assistive device used only while Resident A is in school and on the day he had it on in the facility, school staff overlooked removing the band before he went home.

On 06/16/2025, I conducted an exit conference with Ms. Sanders and stated she has issued all the residents in this facility with 30-day notice and that she plans to close this facility once all the residents are appropriately placed.

APPLICABLE RULE	
R 400.14306	**Use of assistive devices.**
	(1) An assistive device shall only be used to promote enhanced mobility, physical comfort, and well-being of a resident.
ANALYSIS:	The complainant reported Resident A had a band around his stomach. The complainant stated she did not know what the band was and removed it. Ms. Graves, Ms. Noffsinger and Mr. Heemstra reported the band is an assistive device approved and used on Resident A at school and the band is not used in the facility. Ms. Sanders confirmed the band is an assistive device used only while Resident A is at school and the band is not used in the facility. During an unannounced inspection at the facility, I observed Resident A, and he did not have a band on. Resident A's assessment documented the use of a T-shirt onesie as an assistive device. The plan does not include the use of a band as an assistive device. Relative #1 confirmed that the band was accidentally left on Resident A when he left school and the facility does not use a band for Resident A as an assistive device. It was determined through this investigation that the band found around Resident A's midsection on 05/07/2025 was an

	assistive device used while Resident A is at school and the device is not used in the facility. A violation of this applicable rule is not established.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable corrective action plan, I recommend the license is closed as requested by the Licensee, Christina Sanders.

07/01/2025

Elizabeth Elliott Date
Licensing Consultant

Approved By:

07/01/2025

Jerry Hendrick Date
Area Manager