



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 28, 2025

Daniel Bogosian
Moriah Inc. c/o Dan Bogosian
3200 East Eisenhower Pkwy
Ann Arbor, MI 48108

RE: License #: AM810015275
Investigation #: 2025A0575035
Eisenhower Center - Congregate

Dear Mr. Bogosian:

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.

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) 284-9720.

Sincerely,

Jeffrey J. Bozsik, Licensing Consultant
Bureau of Community and Health Systems
(734) 417-4277

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

I. IDENTIFYING INFORMATION

License #:	AM810015275
Investigation #:	2025A0575035
Complaint Receipt Date:	07/01/2025
Investigation Initiation Date:	07/01/2025
Report Due Date:	07/31/2025
Licensee Name:	Moriah Inc. c/o Dan Bogosian
Licensee Address:	3200 East Eisenhower Pkwy Ann Arbor, MI 48108
Licensee Telephone #:	(734) 677-0070
Administrator:	Daniel Bogosian
Licensee Designee:	Daniel Bogosian
Name of Facility:	Eisenhower Center - Congregate
Facility Address:	3200 E Eisenhower Ann Arbor, MI 48108
Facility Telephone #:	(734) 677-0070
Original Issuance Date:	08/09/1993
License Status:	REGULAR
Effective Date:	06/30/2025
Expiration Date:	06/29/2027
Capacity:	12
Program Type:	PH; DD; MI; TBI

II. ALLEGATION(S)

	Violation Established?
Residents A, B and C were not supervised per their Individual Plan of Service (IPOS)/AFC assessments.	Yes
Residents were verbally and physically abused/mistreated by staff.	No
Residents are not fed and have no access to food after 5:00 p.m.	No
Residents are not bathed.	No
<ul style="list-style-type: none"> Residents have dirty clothing. There are piles of trash in the residents' rooms/facility. There are mice/rodents in the facility. The residents' rooms are not clean. 	No No No No

III. METHODOLOGY

07/01/2025	Special Investigation Intake-2025A0575035
07/01/2025	Special Investigation Initiated - APS
07/01/2025	APS Referral
07/01/2025	Referral - Recipient Rights
07/01/2025	Contact - Telephone call made- Resident A's guardian
07/02/2025	Contact- Telephone call made- (a) Resident B's guardian; (b) Resident C's guardian
07/02/2025	Inspection Completed- On Site inspection-interviews with: (a) direct care staff Jacquan Griggs and (b) Daniel Bogosian, licensee designee
07/07/2025	Contact - Telephone call made-(a) Resident B's guardian; (b) Resident C's guardian; (c) direct care staff Damonte Bean
07/09/2025	Inspection Completed- On-site-interview with: (a) Daniel Bogosian, licensee designee; (b) Resident B
07/09/2025	Inspection Completed-BCAL Sub. Compliance

07/09/2025	Exit Conference with Dan Bogosian
07/10/2025	Contact - Document Received- (a) Resident A and B incident report; (b) APS email regarding Resident C
07/10/2025	Contact- Document requested- FOIA Ann Arbor Police Dept
07/15/2025	Contact-Telephone call made/received- Detective Garrett-Ann Arbor Police Department
07/22/2025	Contact- Inspection Completed-On Site-interviews with (a) Resident D and (b) direct care staff Andrew Sobush

ALLEGATION:

Residents A, B and C were not supervised per their Individual Plan of Service (IPOS)/AFC assessments.

INVESTIGATION:

An APS and ORR referrals were made/received.

The APS referral alleged that:

- (a) Resident B had sexually assaulted Resident A; and
- (b) Resident C licks other residents' clothes and walks around the facility grounds and in the facilities common areas unsupervised. The APS staff provided photos of Resident C walking into the facility's common areas; and
- (c) Residents A, B and C are not supervised according to their respective Individual Plan of Service (IPOS)/AFC Assessments that specify their level of supervision (LOS) time frames.

On 7/1/2025, Daniel Bogosian, licensee designee, reported that Resident A was removed from the facility by his mother and was not available for interview.

On 7/1/2025, I interviewed Resident A's guardian. She stated that Resident A was sexually assaulted by Resident B on 6/26/2025 and was dissatisfied with his placement.

On 7/2/2025 and 7/7/2025 I telephoned Resident B and C's guardians. Resident B's guardian never returned my calls. Resident C's guardian returned my call and stated that Resident C's guardianship had expired and was not renewed.

On 7/7/2025, I interviewed direct care staff Damonte Bean. He stated that he discovered Residents A and B in their shared bedroom after he knocked on the bedroom door with their pants down and with Resident B behind Resident A with his hands on Resident A's genitalia. He stated that he verbally prompted them to cease what they were doing and get dressed. He stated that he estimated the time was between 5:53 p.m. to 6:07 p.m.

On 7/9/2025, I interviewed Resident B. He stated that he didn't like the sexual contact with Resident A. He stated that they only touched body parts, it was Resident A's idea and there were no prior episodes. He acknowledged that the Ann Arbor police had met with him to discuss the incident.

On 7/9/2025, I interviewed Daniel Bogosian. We reviewed Resident A, B and C's IPOSs/AFC Assessments. None of the three residents require 1:1 supervision and they are all left unattended while eating in the dining hall/room.

Resident A's IPOS/assessment stated that he is on a 15 minute LOS, is not sexually inappropriate with others, and masturbates privately. On 6/19/25 and on 6/26/25 his LOS checks of every 15 minutes were documented.

Resident B's IPOS/assessment stated that he controls his sexual behavior and is on a 10 minute LOS. On 6/19/25 and 6/26/25 his LOS checks of every 10 minutes were documented.

Finally, Resident C's IPOS/assessment stated that he is on a 15 minute LOS. Resident C has a paid job on the Eisenhower campus collecting trash throughout the facilities. He freely walks about the different facilities and also walks into residents' rooms to empty trash cans. On 6/19/25 and 6/26/25 his LOS checks were documented.

On 7/9/2025, I interviewed Daniel Bogosian and he stated that given Resident A's documented sexual history, Resident A was the most likely perpetrator of the sexual encounter between Residents A and B. Further, he acknowledged that Resident C has a habit of approaching people and telling them he is going to "lick" them. Daniel Bogosian stated that if you decline his advance he will not bother and that the "licks" are comprised of him licking your shirt or coat and are not of an aggressive or sexual nature. Likewise, Daniel Bogosian acknowledged that Resident C probably does go into other resident rooms, which he is not supposed to do on his trash collecting job. Furthermore, Finally, Daniel Bogosian stated that although the residents' LOS checks are documented, it's unlikely that the staff are actually checking them per their respective LOS requirements.

On 7/9/2025, I conducted an exit conference with Daniel Bogosian.

On 7/15/2025, Detective Garret responded to my telephone call and my FOIA request of 7/10/2025 which was denied pending the ongoing investigation. He

stated that the DNA tests would take up to 6 months for results. He stated that when he interviewed both Resident A and B on 6/27/2025 they denied any sexual penetration during the alleged sexual abuse incident.

APPLICABLE RULE	
R 400.14303	Resident care; licensee responsibilities.
	(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.
ANALYSIS:	<p>The preponderance of credible evidence is that:</p> <ul style="list-style-type: none">(a) Resident B did not sexually assault Resident A. It is more accurately described as a consensual act;(b) Resident C does attempt to "lick" other residents/staff and does walk about the Eisenhower complex unsupervised contrary to his IPOS/assessment LOS requirement, and(c) None of these three residents (A, B and C) are supervised per their respective IPOS/assessment LOS requirements despite the staff documentation that they are supervised accordingly/appropriately. <p>Therefore, the licensee did not provide supervision as defined in the act and as specified in the resident's written assessment plan.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Residents were verbally and physically abused/mistreated by staff.

INVESTIGATION:

On 7/2/2025 and on 7/9/2025, I was on site in the facility and did not observe any residents with any unexplained bruises or abrasions. I interviewed direct care staff Jacquan Griggs who stated he knew of no staff abusing residents. Furthermore, Dan Bogosian stated that there have been no incident reports of staff mistreating residents.

On 7/22/2025, I interviewed Resident D, who does not have a court appointed guardian. He stated that he has never witnessed anyone verbally and/or physically abusing residents.

On 7/22/2025, I interviewed direct care staff Andrew Sobush. He stated that a couple of months ago he witnessed what he considered as verbal abuse of a resident. He stated that it was discussed by the team and an incident report was written. Other than that incident, he stated that he has not witnessed any staff verbally and or physically abusing any residents.

On 7/22/2025, I requested Dan Bogosian to look up a copy of the incident report as described by Andrew Sobush. He stated that he could not find any incident reports over the last 3 months about the incident described by Andrew Sobush.

APPLICABLE RULE	
R 400.14308	Resident behavior interventions prohibitions.
	(1) A licensee shall not mistreat a resident and shall not permit the administrator, direct care staff, employees, volunteers who are under the direction of the licensee, visitors, or other occupants of the home to mistreat a resident. Mistreatment includes any intentional action or omission which exposes a resident to a serious risk or physical or emotional harm or the deliberate infliction of pain by any means.
ANALYSIS:	I observed no evidence to support this allegation that did not include any resident names, dates or staff names. Therefore, the licensee did not mistreat any residents and did not permit the administrator, direct care staff, employees, volunteers who are under the direction of the licensee, visitors, or other occupants of the home to mistreat any residents.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Residents are not fed and have no access to food after 5:00 p.m.

INVESTIGATION:

On 7/9/2025, Dan Bogosian emailed me the dining hall hours. Breakfast is served from 8:00 a.m.-9:00 a.m., lunch is served from 12:00 noon-1:00 p.m., and dinner is served from 4:30 p.m.-6:00 p.m. Additionally, I've previously toured the dining hall and kitchen and found the kitchen to be well maintained and the food to be nutritious.

On 7/22/2025, I interviewed Resident D. He stated that the residents get 3 meals/day and in the evening they can eat snacks or get a takeout order.

On 7/22/2025, I interviewed direct care staff Andrew Sobush. He stated that residents get 3 meals/day and snacks after 5:00 p.m. or they can use Door Dash.

APPLICABLE RULE	
R 400.14313	Resident nutrition.
	(1) A licensee shall provide a minimum of 3 regular, nutritious meals daily. Meals shall be of proper form, consistency, and temperature. Not more than 14 hours shall elapse between the evening and morning meal.
ANALYSIS:	This allegation did not name any residents or dates of occurrence. Since there is a well-maintained dining hall with posted hours for resident meals with no more than 14 hours between the evening and morning meals then I observed no evidence to support this allegation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Residents are not bathed.

INVESTIGATION:

On 7/2/2025, I toured the facility and observed several residents. None of them looked “dirty” and Dan Bogosian stated that since the residents in this facility are higher functioning, there is no bathing schedule per se, the residents are verbally prompted to take daily bathes/showers.

On 7/22/2025, I interviewed Resident D. He stated that he takes a bath daily and does not know of any residents who do not bathe regularly.

On 7/22/2025, I interviewed direct care staff Andrew Sobush. He stated that residents bathe daily.

APPLICABLE RULE	
R 400.14314	Resident hygiene.
	(1) A licensee shall afford a resident the opportunity, and instructions when necessary, for daily bathing and oral and personal hygiene. A licensee shall ensure that a resident bathes at least weekly and more often if necessary.
ANALYSIS:	This allegation did not name any residents and I observed no evidence to support this allegation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Residents have dirty clothing.

INVESTIGATION:

On 7/2/2025, I did not observe any residents wearing dirty clothing. I toured the laundry facilities and found the resident laundry being washed and dried. Also, Dan Bogosian stated that some of the residents are being trained to do their own laundry as a means of preparing them to live independently.

On 7/22/2025, I interviewed Resident D. He stated that he does his own laundry and always has clean clothes.

On 7/22/2025, I interviewed direct care staff Andrew Sobush. He stated that residents do their own laundry or staff assist them. He stated that he does not know of any residents who have dirty clothing.

APPLICABLE RULE	
R 400.14314	Resident hygiene.
	(5) A licensee shall afford a resident with opportunities, and instructions when necessary, to routinely launder clothing. Clean clothing shall be available at all times.
ANALYSIS:	This allegation did not name any residents and I observed no evidence to support this allegation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

There are piles of trash in the residents' rooms/facility.

INVESTIGATION:

On 7/2/2025, I toured the Eisenhower Center Congregate facility and did not observe any piles of trash in the residents' rooms or the common areas of the facility. I observed the trash containers outside of the facility to have lids and be well maintained.

On 7/22/2025, I interviewed Resident D. He stated that he cleans his own room.

On 7/22/2025, I interviewed direct care staff Andrew Sobush. He stated that staff work with residents who have unkept rooms to assist them in keeping their space clean/orderly.

APPLICABLE RULE	
R 400.14401	Environmental health.
	(4) All garbage and rubbish that contains food waste shall be kept in leakproof, nonabsorbent containers. The containers shall be kept covered with tight-fitting lids and shall be removed from the home daily and from the premises at least weekly.
ANALYSIS:	I observed no evidence to support this allegation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

There are mice/rodents in the facility.

INVESTIGATION:

On 7/2/2025, Dan Bogosian emailed me the most recent quarterly pest control service ticket. It is dated 7/2/2025 from the Wingman Pest Control service and details setting mouse bait and checking for roaches and flies. No mice were found as noted in the report.

On 7/22/2025, I interviewed Resident D. He stated that sometimes he has seen a mouse usually near the South Main building where the kitchen/dining area is located.

On 7/22/2025, I interviewed direct care staff Andrew Sobush. He stated that he has not seen any mice recently.

APPLICABLE RULE	
R 400.14401	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:	Since the Wingman Pest Control company services the Eisenhower Center Congregate facility quarterly, then the Eisenhower Center has a regular pest control program maintained as necessary and carried out in a manner that continually protects the health of residents.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

The residents' rooms are not clean.

INVESTIGATION:

On 7/2/2025, I toured the facility and did not observe unclean resident bedrooms or unclean common areas outside of the bedrooms.

On 7/22/2025, I interviewed Resident D. He stated that he cleans his room and has no knowledge of the other rooms.

On 7/22/2025, I interviewed direct care staff Andrew Sobush. He stated that the resident rooms are cleaned either by staff, residents or both.

APPLICABLE RULE	
R 400.14403	Maintenance of premises.
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

ANALYSIS:	This allegation did not name any residents and I observed no evidence to support this allegation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in the license status.



Jeffrey J. Bozsik
Licensing Consultant

Date: 7/22/2025

Approved By:



Ardra Hunter
Area Manager

Date: 7/28/2025