



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

August 27, 2025

Sondra Yantz
KJB TENANT BAY CITY LLC
Suite K
1584 Charlotte Circle
Naperville, IL 60564

RE: License #:	AL090393451
Investigation #:	2025A0123044
	Charter Senior Living at Bay City 1

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.
- 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,

A handwritten signature in cursive script, appearing to read "Shamidah Wyden".

Shamidah Wyden, Licensing Consultant
Bureau of Community and Health Systems
411 Genesee
P.O. Box 5070
Saginaw, MI 48607
989-395-6853

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL090393451
Investigation #:	2025A0123044
Complaint Receipt Date:	07/17/2025
Investigation Initiation Date:	07/18/2025
Report Due Date:	09/15/2025
Licensee Name:	KJB TENANT BAY CITY LLC
Licensee Address:	1584 Charlotte Circle Suite K Naperville, IL 60564
Licensee Telephone #:	(989) 778-1713
Administrator:	June Nadolny-Jeffs
Licensee Designee:	Sondra Yantz
Name of Facility:	Charter Senior Living at Bay City 1
Facility Address:	568 North Pine Road Bay City, MI 48708
Facility Telephone #:	(989) 778-1713
Original Issuance Date:	08/02/2018
License Status:	REGULAR
Effective Date:	02/02/2025
Expiration Date:	02/01/2027
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
Resident A is being financially exploited and is charged extra for home repairs.	No
Resident A has purchased items for the facility.	Yes
Kitchen staff have not been removing spoiled food from the kitchen. Residents have been getting ill lately, complaining of stomach pain. Multiple residents have been sent to the hospital due to this.	No
The facility has issues with cockroaches throughout the facility.	No
The facility is hiring incompetent staff who are on drugs. There is concern for the care of the residents.	No

III. METHODOLOGY

07/17/2025	Special Investigation Intake 2025A0123044
07/17/2025	Contact - Telephone call received I received a voicemail from June Nadolny-Jeffs requesting a return call.
07/17/2025	APS Referral Information received regarding APS referral.
07/18/2025	Special Investigation Initiated - Telephone I returned June Nadolny-Jeffs phone call.
07/21/2025	Contact - Telephone call made I spoke with APS investigator Bethany Hornbacher.
07/24/2025	Inspection Completed On-site I conducted an unannounced on-site at the facility.
07/29/2025	Contact - Telephone call made I interviewed licensee designee Sondra Yantz.
08/14/2025	Inspection Completed On-site I conducted an unannounced follow-up at the facility.

08/15/2025	Contact- Telephone received I received a phone call from administrator June Nadolny-Jeffs.
08/22/2025	Contact- Telephone call made I interviewed staff Paige Thomas via phone.
08/22/2025	Exit Conference I conducted an exit conference with designated person/administrator June Nadolny-Jeffs.

ALLEGATION:

- **Resident A is being financially exploited and is charged extra for home repairs.**
- **Resident A has purchased items for the facility.**

INVESTIGATION: On 07/17/2025, I received a voicemail from administrator June Nadolny-Jeffs stating that APS (Adult Protective Services) visited the facility the day prior, and she was requesting a return call. On 07/18/2025, I returned Administrator Nadolny-Jeffs call. She stated that APS investigator Bethany Hornbacher met with nursing director Sarah Thompson, LPN regarding allegations reported about Resident A. Administrator Nadolny-Jeffs stated that Resident A took their personal tools, went into the facility's kitchen and took apart a brand new \$2,500 garbage disposal and broke it. The repair costs were \$80, and Resident A was charged for it.

On 07/21/2025, I made a call to Bethany Hornbacher, APS investigator. Bethany Hornbacher stated that she did an on-site at the facility and has no concerns. Bethany Hornbacher interviewed staff and they denied the allegations. Resident A has plans to move to California. Bethany Hornbacher stated that she spoke with Resident A who stated that they can afford to live at the facility but will be moving on 09/30/2025. Bethany Hornbacher stated that she is not substantiating her investigation, and that Resident A denied all of the allegations.

On 07/24/2025, I conducted an unannounced on-site at the facility. I conducted the following interviews with staff and residents:

Administrator June Nadolny-Jeffs was interviewed. June Nadolny-Jeffs denied the allegations. June Nadolny-Jeffs stated that Resident A has not been charged for any repairs in their room, only for the garbage disposal that Resident A broke. June Nadolny-Jeffs stated that the garbage disposal was installed a week prior, and Resident A went on their own, took it apart, and pried it apart with pliers and broke it. Administrator Nadolny-Jeffs stated Resident A has a garden on the premises, by their own choice which was established before she started working in the facility. Resident A has their own personal gardening tools and tractor. Resident A also has their own vehicle. June Nadolny-Jeffs denied having any knowledge that residents have made any purchases for the facility.

Nursing director Sarah Thompson, LPN was interviewed. Sarah Thompson stated that Resident A went into the kitchen on their own, taking apart the garbage disposal. Resident A also took the sink apart in their room but was not charged for breaking the sink in the room, but did have to pay for the broken clip on the brand-new garbage disposal. It was a \$80 repair. Resident A never said anything about the charge. Sarah Thompson stated that Administrator Nadolny- Jeffs also spoke with the family about the situation. Sarah Thompson stated that as far as she knows, Resident A is still living here and paying their bills. Sarah Thompson denied that any residents make purchases for the facility.

Staff Shardae Thomas, a cook, was interviewed in the kitchen. Staff Thomas stated that another cook informed her that Resident A broke the garbage disposal. Resident A took it apart and could not fix it. Staff Thomas denied having any knowledge of residents being forced to purchase items for the facility.

Staff Rosalie Guzman was interviewed and denied the allegations. Staff Guzman denied having any knowledge of Resident A being forced to purchase anything for the facility.

Resident B denied that the facility makes them or anyone else pay for things they should not pay for. Resident B stated the staff are meeting their needs, and they like living here.

Resident A stated there was a spoon stuck in the garbage disposal, so they (Resident A) went into the kitchen to address it, and the whole thing dropped to the floor. Resident A said the repair was \$80 and was not a big deal. Resident A stated that when they take things into their own hands, the facility gets upset about it. Resident A denied being financially abused, and stated they started their garden with their own money. Resident A stated that they also bought two washers and two dryers with their own money as well, several years ago. Resident A expressed that they felt management was taking too long to replace the washers and dryers, so they ordered them for the facility and had them delivered.

On 07/29/2025, I made a call to licensee designee Sondra Yantz. LD Yantz stated that about two years ago, Resident A, on their own accord and without her knowledge purchased washers and dryers for the facility and had them delivered. LD Yantz stated that she had already put in orders for new washers and dryers. LD Yantz stated that Resident A approached her and announced that he bought the appliances because Resident A did not have time to wait for the facility to replace them. She stated that Resident A said they wanted it to be their "*legacy to the building*." LD Yantz stated that Resident A had a fit about the appliances needing to be sent back, that a meeting had to be held with the facility's higher ups. LD Yantz stated that she did not know Resident A had made the purchases until the appliances showed up at the facility. LD Yantz stated that the order Resident A put in for the washer and dryer set for the adjacent facility was cancelled, and that Charter Senior Living purchased the appliances for the adjacent facility. LD Yantz stated that

Resident A was informed they needed to take the appliances with them when they moved, and Resident A refused. LD Yantz stated that there were a few times they considered issuing a 30-day notice for Resident A because of Resident A causing an uproar. LD Yantz stated that they discussed a 30-day notice with Resident A, and for a while Resident A changed their behavior. LD Yantz stated that when Resident A first moved in, Resident A asked for permission to start a personal garden. Resident A started going out of the facility at night to till more land, stating that they had to “*feed the community.*” Resident A would strong-arm others into helping and belittling others for not doing it the way Resident A wanted things done. LD Yantz stated that after she left the facility full time, she was informed that Resident A expanded the garden after Resident A purchased a tractor and other equipment.

APPLICABLE RULE	
R 400.15305	Resident protection.
	(1) A resident shall be assured privacy and protection from moral, social, and financial exploitation.
ANALYSIS:	<p>On 07/24/2025, I conducted an unannounced on-site at the facility. I interviewed administrator June Nadolny-Jeffs. She denied the allegations. June Nadolny-Jeffs stated that Resident A has only been charged for breaking a newly installed garbage disposal because Resident A on their own accord attempted to fix the garbage disposal without staff knowing.</p> <p>Director of nursing Sarah Thompson denied that any residents make purchases for the facility.</p> <p>Staff Shardae Thomas, Staff Rosalie Guzman, and Resident B denied that the facility forces any residents to make purchases for the facility.</p> <p>Resident A was interviewed and stated that being charged for the repair of the garbage disposal was no big deal. Resident A stated that when they take things into their own hands, the facility gets upset about it. Resident A denied being financially abused.</p> <p>There is no preponderance of evidence to substantiate a rule violation.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

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:	<p>On 07/24/2025, I conducted an unannounced on-site at the facility. I interviewed administrator June Nadolny-Jeffs. She denied the allegations. June Nadolny-Jeffs stated that Resident A has only been charged for breaking a newly installed garbage disposal because Resident A on their own accord attempted to fix the garbage disposal without staff knowing.</p> <p>Director of nursing Sarah Thompson denied that any residents make purchases for the facility.</p> <p>Staff Shardae Thomas, Staff Rosalie Guzman, and Resident B denied that the facility forces any residents to make purchases for the facility.</p> <p>Resident A was interviewed and stated that being charged for the repair of the garbage disposal was no big deal. Resident A stated that when they take things into their own hands, the facility gets upset about it. Resident A denied being financially abused. Resident A stated they purchased a washer and dryer because they felt the facility was taking too long to replace the appliances.</p> <p>On 07/29/2025, I interviewed licensee designee Sondra Yantz who explained that Resident A purchased a washer and dryer, as well as gardening tools on their own accord. Resident A refused to return the appliances. LD Yantz stated that Resident A has been asked to take the appliances with them when they move, but Resident A refused.</p> <p>There is a preponderance of evidence to substantiate a rule violation.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: Kitchen staff have not been removing spoiled food from the kitchen. Residents have been getting ill lately, complaining of stomach pain. Multiple residents have been sent to the hospital due to this.

INVESTIGATION: On 07/17/2025, I received a voicemail from administrator June Nadolny-Jeffs stating that APS visited the facility the day prior, and she was requesting a return call. On 07/18/2025, I returned Administrator Nadolny-Jeffs call. She stated that APS investigator Bethany Hornbacher met with nursing director Sarah Thompson, LPN. Administrator Nadolny- Jeffs stated that the APS complaint also mentioned that residents have been vomiting, and she denied this was true.

On 07/21/2025, I made a call to Bethany Hornbacher, APS investigator. Bethany Hornbacher stated that she did an on-site at the facility and has no concerns. Bethany Hornbacher stated that she spoke with Sarah Thompson, LPN and Resident A. Sarah Thompson, LPN denied the food allegations and reported that only the cook goes through the food, not direct care staff, and that the cook will not even use food that comes in a dented can. Bethany Hornbacher stated that she is not substantiating her investigation.

On 07/24/2025, I conducted an on-site unannounced at the facility. I interviewed staff and residents. Upon arrival, I observed about 14 residents in the dining room eating lunch. I did a walk-thru of the main kitchen, observed the food supply store in the pantry, fridges, freezers, and hallway leading to the basement entry. No issues were noted with the food, expiration dates, or how the food was stored.

During this on-site, I conducted the following interviews with staff and residents:

Administrator Nadolny- Jeffs stated that it is the facility's policy to rotate foods based on dates. Nothing is served outside of the dates where the food can be served. There have been months since a resident has vomited. Resident B had a gallbladder/UTI problem and was the last resident to have a vomiting episode. She denied the allegations.

Staff Sharda Thomas, a cook, was interviewed in the kitchen. Staff Thomas stated that she and two other cooks run the kitchen. Staff Thomas denied the allegations. Staff Thomas stated that they throw out any food that is outdated. Staff Thomas denied having any knowledge of residents getting sick from eating the food.

Staff Rosalie Guzman was interviewed. Staff Guzman denied ever seeing any spoiled food or any residents getting ill from the food served in the facility.

Resident B stated they received three meals per day. The food served is good. Resident B denied that any food served has upset their stomach. Resident B stated they have only vomited because they were sick.

Resident A stated the food is fresh and the facility has good cooks. Resident A stated that every once in a while, people have loose bowels but that could be anything. Resident A stated, *"If anyone is trying to give this place a bad name, they're shooting blanks."*

On 07/24/2025, during the unannounced on-site, I was provided with hospital discharge records for Resident B confirming that Resident B was seen at McLaren Bay Region on 05/29/2025 for vomiting, 06/04/2025 for abdominal pain and UTI, and 06/10/2025 for cholelithiasis and abdominal pain. There was no indication in the medical documentation that Resident B was diagnosed with any foodborne-related illnesses.

APPLICABLE RULE	
R 400.15402	Food service.
	(1) All food shall be from sources that are approved or considered satisfactory by the department and shall be safe for human consumption, clean, wholesome and free from spoilage, adulteration, and misbranding.
ANALYSIS:	<p>On 07/24/2025, I conducted an unannounced on-site at the facility. I interviewed administrator June Nadolny-Jeffs, Staff Shardae Thomas, and staff Rosalie Guzman. They denied the allegations.</p> <p>Resident B was interviewed and denied the allegations, stating they have only vomited because they were sick.</p> <p>McLaren Bay Region hospital discharge records were reviewed for Resident B. The medical paperwork did not indicate that Resident B was seen for any foodborne related illnesses.</p> <p>Resident A was interviewed and denied the allegations. Resident A stated that the food served is fresh and the facility has good cooks.</p> <p>On 07/24/2025, I conducted an on-site unannounced at the facility. I interviewed staff and residents. Upon arrival, I observed about 14 residents in the dining room eating lunch. I did a walk-thru of the main kitchen, observed the food supply store in the pantry, fridges, freezers, and hallway leading to the basement entry. No issues were noted with the food, expiration dates, or how the food was stored.</p> <p>There is no preponderance of evidence to substantiate a rule violation.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: The facility has issues with cockroaches throughout the facility.

INVESTIGATION: On 07/17/2025, I received a voicemail from administrator June Nadolny-Jeffs stating that APS visited the facility the day prior, and she was requesting a return call.

On 07/18/2025, I returned Administrator Nadolny-Jeffs call. She stated that APS investigator Bethany Hornbacher met with nursing director Sarah Thompson, LPN. Administrator Nadolny-Jeffs stated that there was a complaint about roaches and Orkin was just in the facility, and there have been no signs of roaches or rats.

On 07/22/2025, I received an email from administrator June Nadolny-Jeffs in response to Special Investigation Report #2025A0123043 for Charter Senior Living at Bay City 2 which addressed the same allegation. Charter Senior Living at Bay City 1 and Charter Senior Living at Bay City 2 are connected facilities. The email contained 16 pages of Orkin pest control receipts. The pest control receipts are from January 2025 through July 2025, with a receipt dated for each month in that time frame. In January 2025, the Orkin inspector noted seeing rodent droppings in the basement and drain flies in the kitchen sink and restrooms. Treatment was completed. There was no mention of rodents or drain flies in the documentation for February 2025 through July 2025. In February 2025, Orkin came out and treated the facility due to reported sightings of cockroaches. There were a couple caught in a monitoring trap. In March 2025, the Orkin notes state bait was placed in bait stations to prevent mice from coming inside the building. In April 2025, the only insects noted were spiders that were in traps. On 06/09/2025, the Orkin receipt notes that they were informed there were cockroaches and tick activity in a couple rooms. They were treated. It doesn't state that the Orkin inspector saw any cockroaches or ticks, but notes the exterior doorways and kitchen were treated as well.

On 07/24/2025, I conducted an unannounced on-site at the facility. I did not observe any signs of roaches or rats. During this on-site, I conducted the following interviews with staff and residents:

Administrator June Nadolny-Jeffs was interviewed. June Nadolny-Jeffs stated that she has never seen a roach in the facility. Staff have said they saw one. Orkin saw a photo of the bug and came out and sprayed the facility. June Nadolny-Jeffs stated that Orkin never spotted any roaches.

Staff Rosalie Guzman was interviewed. Staff Guzman denied ever seeing any rats or roaches in the facility.

Resident B was interviewed. Resident B stated that they have lived in the facility for about five years. Resident B denied the facility has any issues with bugs and denied seeing any roaches or rats.

Resident A was interviewed. Resident A denied the allegations that there are rats or roaches in the facility. Resident A stated they have feral cats that take care of the mice outside.

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:	<p>On 07/22/2025, I received documentation via email confirming that the facility receives regular pest control services. Receipts were reviewed from January 2025 through June 2025. On 06/09/2025, the Orkin receipt notes that they were informed there were cockroaches and tick activity in a couple rooms. They were treated. It doesn't state that the Orkin inspector saw any cockroaches or ticks, but notes the exterior doorways and kitchen were treated as well.</p> <p>On 07/24/2025, I conducted an unannounced on-site at the facility. I did not observe any signs of roaches or rats.</p> <p>Resident A, Resident B, and staff Rosalie Guzman were interviewed and denied the allegations.</p> <p>There is no preponderance of evidence to substantiate a rule violation.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION: The facility is hiring incompetent staff who are on drugs. There is concern for the care of the residents.

INVESTIGATION: On 07/24/2025, I conducted an on-site unannounced at the facility. I observed staff working on the floor, and did not see anyone who appeared to be under the influence of any substances. During this on-site, I conducted the following interviews with staff and residents:

Resident A was interviewed. Resident A did not express having any concerns with any staff being incompetent or under the influence of drugs. Resident A stated that they think med techs are sometimes slow with responding to call buttons, and that they don't put Resident A's laundry away sometimes.

Resident B was interviewed. Resident B did not express having any concerns with any staff being incompetent or under the influence of drugs. Resident B stated that staff are meeting their needs and that they like living in the facility.

On 08/14/2025, I conducted an unannounced follow-up visit at the facility. Director of Nursing Sarah Thompson, LPN was interviewed. Sarah Thompson stated that she

has heard complaints about several different staff, but no one has reported witnessing or smelling anything, and there have been no issues with inadequate care. Sarah Thompson stated that one staff person was on break one day, and closed their eyes while on break, and another staff member complained that it was a sign that the person must have been under the influence. Sarah Thompson stated that the staff person who took their break also works a full-time job as well. Sarah Thompson stated that administrator June Nadolny-Jeffs purchased a box of drug testing kits so they can use them if needed. Sarah Thompson stated that the staff person accused of being under the influence is one of their best employees.

On 08/14/2025, I conducted another unannounced follow-up on-site. I reviewed training documentation for ten new hires that were trained between January and August 2025. The documentation reviewed showed that staff have been fully trained. No issues were noted.

On 08/15/2025, I received a phone call from administrator June Nadolny-Jeffs. June Nadolny-Jeffs denied that there have been any issues with any staff being under the influence of drugs. June Nadolny-Jeffs stated that there have been no signs of substance use, and there's been nothing to suspect.

On 08/22/2025, I interviewed staff Paige Thomas via phone. Paige Thomas stated that she knows now that there are drug tests available in the facility, and if there's suspicion of any staff under the influence, drug testing is completed within two hours. Paige Thomas stated that she had suspicion of previous staff using drugs, but the staff no longer work in the facility. Paige Thomas stated that she has smelled marijuana on others before but does not know when it was smoked, or if they were the ones that smoked it. Paige Thomas denied having any knowledge of anyone being under the influence while working and has not noticed any negative impact on resident care.

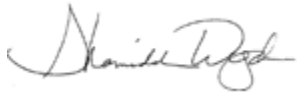
APPLICABLE RULE	
R 400.15204	Direct care staff; qualifications and training.
	(2) Direct care staff shall possess all of the following qualifications: (a) Be suitable to meet the physical, emotional, intellectual, and social needs of each resident.
ANALYSIS:	On 07/24/2025, I conducted an unannounced on-site. Resident A and Resident B were interviewed and did not express any concern regarding staff being under the influence of any drugs. Resident B stated that staff are meeting their needs. Resident A did not express any care concerns other than staff being slow sometimes to respond, and sometimes not putting their laundry away.

	<p>On 08/14/2025, I interviewed staff Sarah Thompson, LPN. She denied that there have been any reasonable complaints of suspicion reported in regard to staff being under the influence at work.</p> <p>Training documents for ten staff were reviewed during this on-site. The documentation reviewed showed that staff have been fully trained. No issues were noted.</p> <p>On 08/15/2025, I spoke with administrator June Nadolny-Jeffs. She denied the allegations. She stated that there have been no signs of substance use, and there's been nothing to suspect. She stated that the facility has drug testing kits they can utilize if needed.</p> <p>On 08/22/2025, I interviewed staff Paige Thomas via phone. She stated that she had suspicion of previous staff using drugs, but the staff no longer work in the facility. She denied having any knowledge of anyone being under the influence while working and has not noticed any negative impact on resident care.</p> <p>There is no preponderance of evidence to substantiate a rule violation.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

On 08/22/2025, I conducted an exit conference with designated person/administrator June Nadolny-Jeffs via phone. I informed June Nadolny-Jeffs of the findings and conclusions.

IV. RECOMMENDATION

Contingent upon the receipt of an acceptable corrective action plan, I recommend continuation of the AFC Large group home license (capacity 3-20).

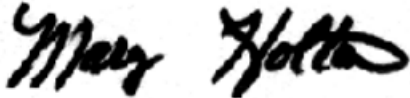


08/27/2025

Shamidah Wyden
Licensing Consultant

Date

Approved By:



08/27/2025

Mary E. Holton
Area Manager

Date