



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

October 31, 2025

Kari Conn  
Michigan Masonic Home  
1200 Wright Avenue  
Alma, MI 48801

RE: License #: AH290278031  
Investigation #: 2025A1010071  
Michigan Masonic Home

Dear Licensee:

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 authorized representative and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. 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 (877) 458-2757.

Sincerely,

A handwritten signature in blue ink that reads "Lauren Wohlfert".

Lauren Wohlfert, Licensing Staff  
Bureau of Community and Health Systems  
350 Ottawa NW Unit 13 7th Floor  
Grand Rapids, MI 49503  
(616) 260-7781  
enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AH290278031
<b>Investigation #:</b>	2025A1010071
<b>Complaint Receipt Date:</b>	09/04/2025
<b>Investigation Initiation Date:</b>	09/08/2025
<b>Report Due Date:</b>	11/04/2025
<b>Licensee Name:</b>	Michigan Masonic Home, Inc.
<b>Licensee Address:</b>	1200 Wright Ave Alma, MI 48801
<b>Licensee Telephone #:</b>	(989) 466-3801
<b>Authorized Representative/Administrator:</b>	Kari Conn
<b>Name of Facility:</b>	Michigan Masonic Home
<b>Facility Address:</b>	1200 Wright Avenue Alma, MI 48801
<b>Facility Telephone #:</b>	(989) 463-3141
<b>Original Issuance Date:</b>	09/19/2005
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	08/01/2025
<b>Expiration Date:</b>	07/31/2026
<b>Capacity:</b>	138
<b>Program Type:</b>	AGED

## II. ALLEGATION(S)

	<b>Violation Established?</b>
Resident A's rights are being violated by the facility.	Yes

## III. METHODOLOGY

09/04/2025	Special Investigation Intake 2025A1010071
09/08/2025	Special Investigation Initiated - Letter
09/08/2025	APS Referral APS referral made with Centralized Intake
09/09/2025	Inspection Completed On-site
09/09/2025	Contact - Document Received Received resident staff progress notes, service plan, and mail authorization document
10/31/2025	Exit Conference

### **ALLEGATION:**

**Resident A's rights are being violated by the facility.**

### **INVESTIGATION:**

On 09/04/2025, the Bureau received the complaint. The allegations read that while Resident A volunteered to work in the facility's gift shop, Staff Person 1 (SP) accused her of "taking money, but that was not true." After this incident, Resident A hung a sign outside of her room door that read, "is kindness dead?" Resident A was asked by SP2 to remove the sign. Resident A felt this was a violation of her "free speech." The complaint also read that when Resident A attempted to assist another resident move into a new room, Resident A was told she could not assist the other resident. Resident A was upset by this.

The complaint also read that in November of 2024, Resident A was waiting for her social security statement, however she did not receive it. Resident A discovered that SP3 "ordered for the social security statements to be pulled from the resident's mail and taken to the financial department." Resident A did not agree to this action. Lastly, the complaint read staff told Resident A "that she can't take her food to her room to eat anymore because her food "can get contaminated" when she walks to

her room.” Resident A “has an issue with eating in front of people” and the facility is not accommodating this.

On 09/08/2025, I made an Adult Protective Services (APS) referral with Centralized Intake.

On 09/09/2025, I interviewed the administrator at the facility. The administrator reported the incident in which Resident A stated she was accused by SP1 of “taking money” from the giftshop while she volunteered to work in it occurred approximately two years ago. The administrator said Resident A’s statement that SP1 accused her of “taking money” was not substantiated. The administrator said that as of today’s date, Resident A still volunteers to work in the facility’s gift shop. The administrator reported SP1 no longer works at the facility.

The administrator stated the incident in which Resident A hung a sign outside of her room that read, “is kindness dead” occurred approximately one year ago. The administrator reported Resident A was upset because she was told there were safety risks with her attempting to help another resident move to a different room. Resident A was informed there were concerns regarding her falling or getting injured if she attempted to move the other resident’s belongings. The administrator reported Resident A was informed staff were helping the other resident move their belongings to the new room. The administrator explained this upset Resident A, so she hung the sign outside of her room to display her anger.

The administrator reported several residents in the facility began to complain and express concerns regarding Resident A’s sign. The administrator stated several residents were offended and upset by Resident A’s sign. The administrator explained that the facility’s board of directors was aware of the sign and instructed that it needed to be removed as it was against the facility’s policy regarding signs in public areas of the facility. The administrator stated that because the sign was considered offensive to other residents and was hung outside of Resident A’s room, it was not permitted.

The administrator stated the facility has a policy in which residents must eat in the facility dining rooms unless they are ill or have a physical impairment that would prevent them from being able to ambulate to the dining room. The administrator reported that Resident A is aware of this policy. The administrator said Resident A has expressed that she does not like to “eat in front of others,” however, there is a dining room available where residents choose not to eat. The administrator reported that majority of the residents in the facility eat in the main dining room, leaving the smaller dining areas in the facility available.

The administrator reported Resident A was also bringing her personal dishware to kitchen staff and requested her meals be served on it. The administrator stated Resident A was informed kitchen staff are not permitted to serve meals on residents’ personal dishware because staff cannot verify whether it was properly sanitized. The

administrator said Resident A is upset by this policy, therefore she chooses to primarily purchase her own food so she can eat in her room.

The administrator explained that Resident A is a recipient of the facility's financial assistance program. The administrator reported that as a result, the staff who work in the facility's financial department need information, including social security statements, regarding the income for residents' who receive the facility's financial assistance. The administrator said residents who receive the financial assistance are asked to sign a consent form for the financial department to be able to receive their mail that is associated with their income.

The administrator reported Resident A did sign this consent form. The administrator provided me with a copy of Resident A's signed *Authorization for Michigan Masonic Home to Receive and Open Resident Mail* document for my review. The document read that Resident A authorized "Michigan Masonic Home's Finance Department to receive and open any mail addressed to me if it appears to relate to one or more of the following categories: Medical Bills from any Provider, Health Insurance Explanation of Benefits, County/State/Federal Health Departments, Michigan Department of Health & Human Services (Medicaid), Health Insurance Premium Notices." The section that read, "Social Security Administration Notices and/or Social Security Checks, Social Security Benefit Statements, and Bank Statements & Financial Information was crossed out and the word "refuse" with Resident A's and the administrator's initials were handwritten next to the crossed-out section.

The administrator provided me with a copy of staff *Progress Notes* for my review. Notes dated 04/28/2025 read, "Director spoke with this resident about helping other residents with moving items from their old rooms to their new rooms. Director informed this resident that it is recommended that she not help with moving objects as it could become an issue and that we have staff that can accommodate this other resident with retrieving items as needed. Resident stated that she understood."

A second note read, "Director of Residential Services and Director of Dietary regarding her eating in her room and the concerns that come along with that. This resident has been notified that she will need to eat her meal in the M&N dining room or in the OES. The resident can choose [sic] which she would like. Resident was also informed that if she is sick, she can receive a sick tray to her room. Director of Dietary also explained the regulatory factor of food temps and the importance of keeping food at safe Temperatures. Resident stated [sic] that she will not be going down to the OES or the M&N dining rooms. Director asked resident if there was anything we could do to help with this transition resident stated no she will not be eating in these dining rooms. Resident got up and left the director's office."

A note dated 01/16/2024 read, "Met 1:1 with resident to review/discuss the *Authorization for Michigan masonic Home to Receive and Open Resident Mail* form. Resident reviewed, refused some areas and signed document. Document forwarded to finance department. During conversation, the resident indicated not being happy

with living arrangements and was looking for another place to live related to a few employees needing to be fired. Resident indicated she feels she has been lied to as the reasoning. Discussed available resources with resident for alternative placement, resident declined for assistance at this time. Encouraged resident to reach out if she changes her mind about needing resources.”

On 09/08/2025, I was unable to interview SP1 because he no longer works at the facility.

On 09/08/2025, I interviewed SP2 at the facility. SP2’s statements were consistent with the administrator. SP2 reported Resident A has a history of exhibiting inappropriate behavior towards himself and other staff persons. SP2 stated there have been several incidents in which Resident has “slammed her door” in his face and used inappropriate language towards him.

On 09/08/2025, I interviewed SP3 at the facility. SP3 stated that because Resident A receives financial assistance from the facility, her social security statements go directly to financial staff upon arrival at the facility. SP3 demonstrated how mail for residents who receive financial assistance from the facility is processed. SP3 showed me the ledger of resident names and the “X” mark that is next to resident names who receive financial assistance from the facility. SP3 explained the “X” mark also informs staff that any financial mail for the resident to is go directly to finance staff to be opened. I observed the “X” mark next to Resident A’s name. SP3 said staff know to give Resident A’s mail regarding her finances, including her social security statements, directly to financial staff when it arrives.

On 09/08/2025, I interviewed Resident A at the facility. Resident A’s statements were consistent with the allegations that were received.

Resident A stated she did not give consent for financial staff to take her social security statements when they were mailed to the facility. Resident A said there have been several incidents in which financial staff opened her social security statements after she denied consent for them to do so. Resident A reported she is supposed to receive and open her social security statements, then submit them to financial staff, however there were incidents in which this did not occur.

<b>APPLICABLE RULE</b>	
<b>MCL 333.20201</b>	<b>Policy describing rights and responsibilities of patients or residents;</b>
	<b>(2) The policy describing the rights and responsibilities of patients or residents required under subsection (1) shall include, as a minimum, all of the following:</b>  <b>(d) A patient or resident is entitled to privacy, to the extent feasible, in treatment and in caring for personal</b>

needs with consideration, respect, and full recognition of his or her dignity and individuality.

**(g) A patient or resident is entitled to exercise his or her rights as a patient or resident and as a citizen, and to this end may present grievances or recommend changes in policies and services on behalf of himself or herself or others to the health facility or agency staff, to governmental officials, or to another person of his or her choice within or outside the health facility or agency, free from restraint, interference, coercion, discrimination, or reprisal. A patient or resident is entitled to information about the health facility's or agency's policies and procedures for initiation, review, and resolution of patient or resident complaints.**

**(k) A patient or resident is entitled to associate and have private communications and consultations with his or her physician, attorney, or any other person of his or her choice and to send and receive personal mail unopened on the same day it is received at the health facility or agency, unless medically contraindicated as documented in the medical record by the attending physician or a physician's assistant to whom the physician has delegated the performance of medical care services. A patient's or resident's civil and religious liberties, including the right to independent personal decisions and the right to knowledge of available choices, shall not be infringed and the health facility or agency shall encourage and assist in the fullest possible exercise of these rights. A patient or resident may meet with, and participate in, the activities of social, religious, and community groups at his or her discretion, unless medically contraindicated as documented by the attending physician in the medical record.**

<p><b>ANALYSIS:</b></p>	<p>The interviews with the administrator, SP2, and Resident A revealed the incident in which she was accused of “taking money” from the facility’s giftshop by SP1 occurred approximately two years ago. SP1 no longer works at the facility and the administrator and SP2 reported the incident was not substantiated. The administrator, SP2, and Resident A said Resident A continues to volunteer in the facility’s gift shop.</p> <p>The interviews with the administrator and SP2, along with review of Resident A’s staff <i>Progress Notes</i>, revealed Resident A was informed of the safety risks involved with Resident A attempting to assist other residents in moving their personal belongings to their new rooms. Resident A was informed staff at the facility were responsible for assisting residents to move their belongings.</p> <p>The interviews with the administrator and SP2, along with review of Resident A’s staff <i>Progress Notes</i>, revealed Resident A was informed she had to eat in one of the facility’s dining rooms during mealtimes unless she was ill or had a condition not permitting her to do so. The administrator and SP2 said there are small dining areas within the facility that can accommodate Resident A’s desire to eat in private.</p> <p>The interview with Resident A, along with review of her <i>Authorization for Michigan Masonic Home to Receive and Open Resident Mail</i> document, revealed she did not consent to allow staff to receive and open her “Social Security Benefit Statements.” I observed this was documented on Resident A’s form dated 01/28/2024. The interview with SP3 revealed staff are receiving Resident A’s mail related to her finances and sending it directly to staff in the finance department. This is not consistent with Resident A’s right to receive personal mail unopened on the same day it is received at the facility, therefore the facility is not in compliance with this rule.</p>
<p><b>CONCLUSION:</b></p>	<p><b>VIOLATION ESTABLISHED</b></p>

I shared the findings of this report with the facility’s licensee authorized representative on 10/31/2025.

**IV. RECOMMENDATION**

I recommend the status of the license remains unchanged.

*Lauren Wohlfert*

10/09/2025

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Lauren Wohlfert  
Licensing Staff

Date

Approved By:

*Andrea Moore*

10/30/2025

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

Date