



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

February 6, 2026

Lauren Gowman
Edgewood Assisted Living Center
4850 Gratiot Road
Saginaw, MI 48603

RE: License #: AH730257847
Edgewood Assisted Living Center
4850 Gratiot Road
Saginaw, MI 48603

Dear Lauren Gowman:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules.

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 feel free to contact the local office at (517) 335-5985.

Sincerely,

A handwritten signature in cursive script that reads "Aaron L. Clum".

Aaron Clum, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 230-2778

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #:	AH730257847
Licensee Name:	Edgewood Assisted Living Center LLC
Licensee Address:	950 Taylor Ave. Grand Haven, MI 49417
Licensee Telephone #:	(616) 842-2425
Authorized Representative:	Lauren Gowman
Administrator:	Marcie Edwards
Name of Facility:	Edgewood Assisted Living Center
Facility Address:	4850 Gratiot Road Saginaw, MI 48603
Facility Telephone #:	(989) 497-9970
Original Issuance Date:	06/05/2003
Capacity:	70
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/02/2026

Date of Bureau of Fire Services Inspection if applicable: N/A

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 02/02/2026

No. of staff interviewed and/or observed 10

No. of residents interviewed and/or observed 25

No. of others interviewed N/A Role

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. Facility does not maintain resident funds
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: N/A
- Number of excluded employees followed up? N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility was found to be in substantial compliance with the public health code and administrative rules regulating home for the aged facilities.

IV. RECOMMENDATION

It is recommended that the status of the license remains unchanged.

Aaron L. Clum

2/06/2026

Date

Licensing Consultant