



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

March 18, 2026

Lawrence Ragnone  
Willows Of Bay City LLC  
3520 Davenport Avenue  
Saginaw, MI 48602

RE: Application #: AL090419733  
Willow Of Bay City MC  
720 N. Pine Rd.  
Bay City, MI 48708

Dear Lawrence Ragnone:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 20 is issued.

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 that reads "Anthony Humphrey".

Anthony Humphrey, Licensing Consultant  
Bureau of Community and Health Systems  
411 Genesee  
P.O. Box 5070  
Saginaw, MI 48605  
(810) 280-7718

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL090419733
<b>Licensee Name:</b>	Willows Of Bay City LLC
<b>Licensee Address:</b>	3520 Davenport Avenue Saginaw, MI 48602
<b>Licensee Telephone #:</b>	(989) 293-4621
<b>Licensee Designee:</b>	Lawrence Ragnone
<b>Administrator</b>	Lynn MacKenzie
<b>Name of Facility:</b>	Willow Of Bay City MC
<b>Facility Address:</b>	720 N. Pine Rd. Bay City, MI 48708
<b>Facility Telephone #:</b>	(989) 293-4621
<b>Application Date:</b>	07/14/2025
<b>Capacity:</b>	20
<b>Program Type:</b>	PHYSICALLY HANDICAPPED ALZHEIMERS AGED

## II. METHODOLOGY

02/04/2025	Inspection Completed-Fire Safety : A See AL090079533
07/14/2025	On-Line Enrollment
07/15/2025	PSOR on Address Completed
07/15/2025	Contact - Document Sent forms sent
07/15/2025	Contact - Document Received IRS letter received
08/21/2025	Contact - Document Received 1326/RI030 and App.
08/26/2025	File Transferred To Field Office
09/02/2025	Application Incomplete Letter Sent
11/07/2025	Contact - Document Received
11/07/2025	Application Complete/On-site Needed
12/17/2025	Inspection Completed On-site
12/17/2025	Inspection Completed-Env. Health : A
12/17/2025	Inspection Completed-BCAL Sub. Compliance
01/30/2025	Inspection Completed-BCAL Sub. Compliance
01/30/2025	Confirming Letter Sent
02/10/2026	Inspection Completed-Fire Safety : A
03/12/2025	Rule Variance Granted
03/18/2026	Inspection Completed-BCAL Full Compliance
03/18/2026	Recommend License Issuance

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

#### A. Physical Description of Facility

The property Willow of Bay City MC, formerly known as Brookdale Bay City MC, is located at 720 N. Pine Rd., Bay City, Michigan 48708. This 20-bed facility is owned by Willows of Bay City LLC. The property is situated on a 6.18 acre lot in Hampton Township. Zoning approval was previously secured from Hampton Township on 12/31/1997 by the original owner and a Certificate of Occupancy was also issued in Hampton Township. There is an abundance of parking available on a paved lot. There is also another large 20-bedroom facility next door, also owned by and will be operated by Willows of Bay City LLC.

Willow of Bay City MC features contemporary styling with upscale furnishings and interior décor. The exterior of the home features professionally landscaped patios surrounded by attractive fencing and plenty of land for residents to enjoy. Exit doors are all alarmed and lit for added security. This facility is built upon a cement slab. The interior is comprised of a large gathering room in the front, living room in the back, dining room, serving kitchen, medication room, office, and a laundry room. There are 2 and a half public bathrooms in the common areas, one of which has a shower, the other a jacuzzi tub, a half bath, and a salon. The licensee designee will extend the half bathroom in the common area and add a sink and toilet in order to have 3 full bathrooms within the temporary license period.

All of the private bedrooms are heated and air-conditioned with separate thermostatic controls. There is also a half bath in each of the 19 bedrooms. This home is also heated and cooled via central heating/cooling unit with thermostatic controls in the dining room and in both hallways. The facility is serviced by public water and sewage systems. The capacity of this facility will enable twenty (20) male and female residents to utilize 19 bedrooms, one in which is a 2-bedroom suite. There is ample space in the facility bedrooms for non-affected spouses to reside with prior Department approval.

The facility is equipped with three natural gas furnaces and two hot water heaters which are located in Mechanical Rooms that are covered by a 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware which are constructed of material that has a 1-hour-fire resistance rating. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational. The facility is also sprinkled with a hydrant dedicated to the sprinkling system that is easily accessible. Fire extinguishers and emergency evacuation plans are placed throughout the facility.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

BEDROOM #	ROOM DIMENSIONS	SQUARE FOOTAGE	# OF BEDS
1	22ft x 12ft	264	1
2	22ft x 11ft	242	1

3	22ft x 11ft	242	1
4	22ft x 11ft	242	1
5	22ft x 11ft	242	1
6	22ft x 11ft	242	1
7	22ft x 11ft	242	1
8	22ft x 11ft	242	1
9	23ft x 12ft	276	1
10	22ft x 12ft	264	1
11	22ft x 11ft	242	1
12	22ft x 11ft	242	1
13	22ft x 11ft	242	1
14	22ft x 11ft	242	1
15	22ft x 11ft	242	1
16	22ft x 11ft	242	1
17	22ft x 11ft	242	1
18	23ft x 12ft	276	1
19	19ft x 19ft	361	2

The living room, dining room, and common areas measure a total of 1489.5 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

On 02/10/2026, the Bureau of Fire Services determined that Willow of Bay City MC is in compliance with the Fire Safety Rules for Adult Foster Care Large Group Homes.

On 12/17/2025, I determined that Willow of Bay City MC was in compliance with the Maintenance of Premises Rules for Adult Foster Care Large Group Homes. Based on the above information, it is concluded that this facility can accommodate twenty (20) residents. It is the licensee designee's responsibility not to exceed the facility's licensed capacity.

## **B. Program Description**

Admission and discharge policies, program statement, Alzheimer's services disclosure statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. Willow Of Bay City MC intends to provide 24-hour supervision, protection and personal care to twenty (20) male and female residents that are Aged, Physically Handicapped or diagnosed with Alzheimer's disease or related dementias, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. Residents may be referred from Commissions on Aging, waiver programs, hospitals, clinics, and the community at large.

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained

staff, and only with the prior approval of the resident, guardian, and the responsible agency.

The licensee designee will either arrange or provide all transportation for program and medical needs. Willow Of Bay City MC will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

### **C. Applicant and Administrator Qualifications**

The applicant is Willows Of Bay City LLC., which is a “Domestic Limited Liability Company”, was established in Michigan on May 07, 2025. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The Board of Directors of Willows Of Bay City LLC. has submitted documentation appointing Lawrence Ragnone as licensee designee and Lynn MacKenzie as the administrator for this facility.

A licensing record clearance request was completed with no lien convictions recorded for the licensee designee and the administrator. They both submitted a medical clearance request with a statement from a physician documenting his good health and current TB-tine negative results.

The licensee designee and administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this 20-bed facility is adequate and includes a minimum of 2 staff to 20 residents on the first and second shifts with 1 staff on the third shift. All staff shall be awake during sleeping hours.

The licensee designee and administrator, acknowledges an understanding of the training and qualification requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff to resident ratio.

The licensee designee and administrator, acknowledges an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, “direct access” to residents or the resident information or both. The licensing consultant offered technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website ([www.miltcpartnership.org](http://www.miltcpartnership.org)), and the related documents required to be maintained in each employee’s record to demonstrate compliance.

The licensee designee and administrator, acknowledge an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee can administer medication to residents. In addition, the licensee designee has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The licensee designee and administrator, acknowledges the responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the licensee designee acknowledges his responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all of the documents contained within each employee's file.

The licensee designee and administrator, acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. The licensee designee indicated that it is his intent to achieve and maintain compliance with these requirements.

The licensee designee and administrator, acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. The licensee designee has indicated his intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

The licensee designee and administrator, acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

The licensee designee and administrator, acknowledges the responsibility to obtain all of the required forms and signatures that are to be completed prior to, or at the time of each resident's admission to the home as well as the required forms and signatures to be completed for each resident on an annual basis. In addition, licensee designee acknowledges his responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

The licensee designee and administrator, acknowledges the responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

**D. Rule/Statutory Violations**

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure. Compliance with the physical plant rules has been determined. Compliance with Quality-of-care will be assessed during the period of temporary licensing via an on-site inspection.

**IV. RECOMMENDATION**

I recommend issuance of a temporary license to this AFC adult large group home (capacity 13-20).



03/18/2026

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Anthony Humphrey  
Licensing Consultant

Date

Approved By:



03/19/2026

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Mary E. Holton  
Area Manager

Date