



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

October 30, 2024

Vonda Willey
Blue Water Developmental Housing, Inc.
1362 River Rd., Bldg. 1
St. Clair, MI 48079

RE: License #: AS500242620
Seneca Group Home
7636 32 Mile Road
Romeo, MI 48095

Dear Ms. Willey:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Kristine Cilluffo".

Kristine Cilluffo, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 West Grand Blvd Ste 9-100
Detroit, MI 48202
(248) 285-1703

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

I. IDENTIFYING INFORMATION

| | |
|------------------------------------|--|
| License #: | AS500242620 |
| Licensee Name: | Blue Water Developmental Housing, Inc. |
| Licensee Address: | Bldg. 1 1362 River Rd. St. Clair, MI 48079 |
| Licensee Telephone #: | (810) 388-1200 |
| Licensee/Licensee Designee: | Vonda Willey |
| Administrator: | Vonda Willey |
| Name of Facility: | Seneca Group Home |
| Facility Address: | 7636 32 Mile Road Romeo, MI 48095 |
| Facility Telephone #: | (586) 752-4813 |
| Original Issuance Date: | 05/02/2002 |
| Capacity: | 6 |
| Program Type: | PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED |

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/30/2024

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

Date of Environmental/Health Inspection if applicable: 07/22/2024

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 0

No. of others interviewed 0 Role: [REDACTED]

- Medication pass / simulated pass observed? Yes No If no, explain.
Reviewed medication passing procedures with staff.
- Medication(s) and medication record(s) reviewed? Yes No If no, explain.

- Resident funds and associated documents reviewed for at least one resident?
Yes No If no, explain.
- Meal preparation / service observed? Yes No If no, explain.
Inspection did not occur during a meal preparation.
- Fire drills reviewed? Yes No If no, explain.

- Fire safety equipment and practices observed? Yes No If no, explain.

- E-scores reviewed? (Special Certification Only) Yes No N/A
If no, explain.
- Water temperatures checked? Yes No If no, explain.

- Incident report follow-up? Yes No If no, explain.

- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
CAP date 11/02/2022- S803(6), AS306(3), AS312(7), AS316(1), AS318(5),
AS511(2) N/A
- Number of excluded employees followed-up? N/A

- Variances? Yes (please explain) No N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

| | |
|--|---|
| R 400.14207 | Required personnel policies. |
| | (3) A licensee shall have a written job description for each position. The job description shall define the tasks, duties, and responsibilities of the position. Each employee and volunteer who is under the direction of the licensee shall receive a copy of his or her job description. Verification of receipt of a job description shall be maintained in the individual's personnel record. |
| Staff, Deanna Mullins, did not have verification of receipt of a job description in employee file. | |
| R 400.14315 | Handling of resident funds and valuables. |
| | (3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department. |
| Resident A's Funds Part 1 form indicated that licensee manages AFC payment, cash and True Link card. Resident A holds their own funds on True Link card. | |
| R 400.14318 | Emergency preparedness; evacuation plan; emergency transportation. |
| | (5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review. |
| A sleep time fire drill was not completed for the 1 st quarter of 2023. | |
| REPEAT VIOLATION ESTABLISHED. LSR dated 10/21/2022, CAP dated 11/02/2022 | |
| R 400.14403 | Maintenance of premises. |
| | (5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair. |
| During the onsite inspection, I observed that Bedroom #2 had areas on wall that were patched but not painted. | |

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

Kristine Cilluffo

10/30/2024

Date

Licensing Consultant