



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 23, 2025

Carman Phillips
Bay Valley Adult Foster Care Inc.
5113 Reinhardt Lane
Bay City, MI 48706

RE: License #:	AL090084487 Bay Valley AFC Inc. 5113 Reinhardt Lane Bay City, MI 48706
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Dear Carman Phillips:

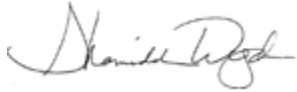
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 (517) 643-7960.

Sincerely,

A handwritten signature in dark ink, appearing to read "Shamidah Wyden". The signature is fluid and cursive, with the first name being more prominent.

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

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

I. IDENTIFYING INFORMATION

License #:	AL090084487
Licensee Name:	Bay Valley Adult Foster Care Inc.
Licensee Address:	5113 Reinhardt Lane Bay City, MI 48706
Licensee Telephone #:	(989) 378-1150
Licensee Designee:	Carman Phillips
Administrator:	Carman Phillips
Name of Facility:	Bay Valley AFC Inc.
Facility Address:	5113 Reinhardt Lane Bay City, MI 48706
Facility Telephone #:	(989) 378-1150
Original Issuance Date:	01/07/1999
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/16/2025

Date of Bureau of Fire Services Inspection if applicable: 11/12/2024

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 14

No. of others interviewed 1 Role: Licensee Designee

- Medication pass / simulated pass observed? Yes ☒ No ☐ If no, explain.
- 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.
- 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:
05/04/2023 R410(2), R408(7), R402(3), R401(2), R316(1)(viii), R306(3),
R208(1), R400.734b(2), R205(5); 10/03/2024 R206(2); 10/31/2024 R314(1);
02/06/2025 R204(3) 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:	
MCL 400.734b	Employing or contracting with certain individuals providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; determination of existence of national criminal history; failure to conduct criminal history check; automated fingerprint identification system database; electronic web-based system; costs; definitions.
	(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.

At the time of inspection, the Michigan Workforce Background check letter was not on file for review for staff Ryan Stephens and staff Alyssa Wiedyk.	
R 400.15208	Direct care staff and employee records.
	<p>(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:</p> <p>(a) Name, address, telephone number, and social security number.</p> <p>(c) A copy of the employee's driver license if a direct care staff member or employee provides transportation to residents.</p> <p>(d) Verification of the age requirement.</p> <p>(e) Verification of experience, education, and training.</p> <p>(f) Verification of reference checks.</p> <p>(g) Beginning and ending dates of employment.</p> <p>(h) Medical information, as required.</p>
At the time of inspection, staff Ryan Stephen's file was missing verification of driver's license, verification of age, experience, education, training, reference checks, beginning date of employment, and initial physician statement. Staff Alyssa Wiedyk's file was missing the same documentation, except a copy of her driver's license which was reviewed.	
R 400.15301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(4) At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.
At the time of inspection, Resident A, Resident B, and Resident C's assessment plans were outdated.	
R 400.15301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(9) A licensee shall review the written resident care agreement with the resident or the resident's designated

	representative and responsible agency, if applicable, at least annually or more often if necessary.
At the time of inspection, there was no documentation noting that Resident A, Resident B, and Resident C's resident care agreements were reviewed annually. They were last dated 03/21/24, 01/17/24, and 10/12/23 respectively.	
R 400.15318	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.
At the time of inspection, the fire drill documentation reviewed was insufficient. There was no documentation available showing that fire drills had been conducted during the daytime, evening, and sleeping hours at least once per quarter for the renewal period.	
R 400.15401	Environmental health.
	(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.
At the time of inspection, the water temperature readings in the main bathrooms throughout the facility had temperature readings above 120 degrees Fahrenheit.	
R 400.15402	Food service.
	(3) All perishable food shall be stored at temperatures that will protect against spoilage. All potentially hazardous food shall be kept at safe temperatures. This means that all cold foods are to be kept cold, 40 degrees Fahrenheit or below, and that all hot foods are to be kept hot, 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and service. Refrigerators and freezers shall be equipped with approved thermometers.
At the time of inspection, resident room #14's personal refrigerator was not equipped with a thermometer.	
R 400.15403	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.

At the time of inspection, bedrooms #4 and #16 walls were observed to have dents/holes that need to be repaired.	
R 400.15408	Bedrooms generally.
	(7) Bedrooms shall have at least 1 easily openable window.
At the time of inspection, interior bedrooms #18 and #19 did not have at least 1 easily openable window.	

IV. RECOMMENDATION

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



04/23/2025

Shamidah Wyden
Licensing Consultant

Date