



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

June 4, 2025

Sheana Waldburg  
Heavenly Comfort LLC  
19103 Woodmont  
Harper Woods, MI 48225

RE: License #: AS820406532  
Investigation #: 2025A0778031  
Heavenly Comfort Woodmont 3

Dear Ms. Waldburg:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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 (313) 456-0439.

Sincerely,

A handwritten signature in cursive script that reads "LaKeitha Stevens".

LaKeitha Stevens, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 949-3055

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS820406532
<b>Investigation #:</b>	2025A0778031
<b>Complaint Receipt Date:</b>	05/23/2025
<b>Investigation Initiation Date:</b>	05/28/2025
<b>Report Due Date:</b>	07/22/2025
<b>Licensee Name:</b>	Heavenly Comfort LLC
<b>Licensee Address:</b>	19230 Silvercrest Drive Southfield, MI 48075
<b>Licensee Telephone #:</b>	(313) 307-0002
<b>Administrator:</b>	Sheana Waldburg
<b>Licensee Designee:</b>	Sheana Waldburg
<b>Name of Facility:</b>	Heavenly Comfort Woodmont 3
<b>Facility Address:</b>	19330 Woodmont Harper Woods, MI 48225
<b>Facility Telephone #:</b>	(313) 307-0002
<b>Original Issuance Date:</b>	04/14/2021
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	04/14/2024
<b>Expiration Date:</b>	04/13/2026
<b>Capacity:</b>	4
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL

## II. ALLEGATION(S)

	Violation Established?
Resident could not leave the home due to short staffing and resident being a 1:1	No

## III. METHODOLOGY

05/23/2025	Special Investigation Intake 2025A0778031
05/23/2025	Referral - Recipient Rights Referral received
05/23/2025	APS Referral Referred by ORR
05/28/2025	Special Investigation Initiated - Telephone Telephone call to ORR, Ann Alexander
05/28/2025	Contact - Telephone call made Telephone call to Resident A
05/28/2025	Contact - Telephone call made Telephone call made to licensee designee
05/28/2025	Contact - Telephone call made Telephone call made to guardian, Marcella Harris
05/30/2025	Inspection Completed On-site
05/30/2025	Exit Conference with licensee designee, Sheana Waldburg

**ALLEGATION: Resident could not leave the home due to short staffing and resident being a 1:1**

**INVESTIGATION:** On 05/28/2025, I completed a telephone call with Office of Recipient Rights, Ann Alexander. She indicated she received the information and forward it to Adult Foster Care Licensing and Adult Protective Services.

On 05/28/2025, I completed a telephone interview with Resident A. She indicated she was upset when she made the complaint. She stated she does not receive 1:1 staffing. Resident A indicated staff did not stop her from going out with her boyfriend, it was her guardian.

On 05/28/2025, I completed a telephone interview with licensee designee, Sheana Waldburg. She stated the allegation is not true. She stated Resident A does not receive 1:1 service and her guardian has limited her interaction with her boyfriend.

On 05/28/2025, I completed a telephone interview with Resident A's guardian, Marcella Harris of Faith Connections. She indicated Resident A does not receive or qualify for 1:1 service. She further stated Resident A was upset with her because she would not let her go into the community with her boyfriend. Ms. Harris indicated Resident A has previously accused her boyfriend of sexual assault. Therefore, Ms. Harris indicated she informed Resident A he can visit with her at the facility and in an open area, but she cannot be alone or in the community with him. Ms. Harris has no issues with the staffing of the facility.

On 05/30/2025, I completed an unannounced onsite inspection. At the time of inspection two staff were present. I reviewed Resident A's IPOS on EasterSeal/Morc letterhead. The report is dated for 04/01/2025. The report does not provide Resident A with 1:1 service.

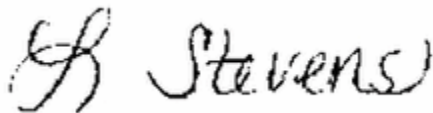
On 05/30/2025, I completed a telephone exit conference with licensee designee, Sheana Waldburg. She was informed this complaint will not be substantiated.

<b>APPLICABLE RULE</b>	
<b>R 400.14303</b>	<b>Resident care; licensee responsibilities.</b>
	<b>(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.</b>

<b>ANALYSIS:</b>	<p>There is no evidence the licensee failed to provide care to Resident A as outlined in her assessment plan.</p> <p>Resident A stated she does not receive 1:1 staffing. She stated she was upset and her guardian prohibited her from going out with her boyfriend.</p> <p>Licensee designee, Sheana Waldburg, indicated Resident A does not receive 1:1 service. She stated this complaint is a lie and the guardian set limitations on her interaction with her boyfriend.</p> <p>Guardian, Marcella Harris indicated Resident A does not receive 1:1 service. She further stated she put restriction on Resident A's interaction with her boyfriend because Resident A has previously accused him of sexual assault. Ms. Harris had no concerns regarding staffing.</p>
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

#### IV. RECOMMENDATION

I recommend this complaint is closed and the status of the license remains unchanged.



05/30/2025

LaKeitha Stevens  
Licensing Consultant

Date

Approved By:



For

06/04/2025

Ardra Hunter  
Area Manager

Date