



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

December 19, 2025

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

RE: License #: AS500012004  
**Pam Mcdonald Home**  
**77175 Capac Road**  
**Armada, MI 48005**

Dear Ms. Bubel:

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) 972-9136.

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**

<b>License #:</b>	AS500012004
<b>Licensee Name:</b>	Blue Water Developmental Housing, Inc.
<b>Licensee Address:</b>	Bldg. 1 1362 River Rd. St. Clair, MI 48079
<b>Licensee Telephone #:</b>	(810) 388-1200
<b>Licensee/Licensee Designee:</b>	Andrea Bubel
<b>Administrator:</b>	Andrea Bubel
<b>Name of Facility:</b>	Pam Mcdonald Home
<b>Facility Address:</b>	77175 Capac Road Armada, MI 48005
<b>Facility Telephone #:</b>	(586) 784-8174
<b>Original Issuance Date:</b>	05/07/1991
<b>Capacity:</b>	5
<b>Program Type:</b>	DEVELOPMENTALLY DISABLED MENTALLY ILL

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 12/17/2025

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

Date of Environmental/Health Inspection if applicable: 10/08/2025

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 2

No. of others interviewed 1 Role: LD/Administrator

- Medication pass / simulated pass observed? Yes  No  If no, explain.  
Reviewed medications with licensee.
- 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 12/22/2023- AS402(2), AS403(5), AS407(3), AS408(7) 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:

<b>R 400.619</b>	<b>Emergency preparedness plan.</b>
	<b>(8) A licensee shall practice the emergency preparedness plan, including the fire safety plan, at least once a quarter per calendar year during each shift, 7 a.m. to 3 p.m., 3 p.m. to 11 p.m. and 11 p.m. to 7 a.m. A record of the practices must be maintained for 2 years.</b>
	Sleep time fire drills were not completed in 2024 or for the 1 <sup>st</sup> and 2 <sup>nd</sup> quarter of 2025. An evening drill was not completed for the 2 <sup>nd</sup> quarter of 2024.
<b>R 400.645</b>	<b>Environmental health.</b>
	<b>(3) A licensee shall provide hot and cold running water under pressure. 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 fixture.</b>
	During the onsite inspection, I measured the water temperature with a digital thermometer. The water temperature was found to be 103.8 degrees Fahrenheit.
<b>R 400.647</b>	<b>Safety and maintenance of premises.</b>
	<b>(2) Home furnishings and housekeeping standards must present a comfortable, clean, and orderly appearance.</b>
	During the onsite inspection, I observed that the window screen in Bedroom #1 was damaged and torn.
<b>R 400.647</b>	<b>Safety and maintenance of premises.</b>
	<b>(5) Floors, walls, and ceilings must be cleanable, maintained clean, and in good repair.</b>
	During the onsite inspection, I observed drywall and paint damage to the walls in Bedroom #1.
<b>R 400.675</b>	<b>Resident medications.</b>
	<b>(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident:</b> <b>(b) Complete an individual medication log that contains all of the following:</b>

	<b>(v) Initials of the individual who administered the medication at the time given.</b>
Resident A's medication log was initialed by staff on 12/17/2025 for Polyethylene Glycol powder and Prevident 5000 booster plus. The medications were not available in the home to have been administered by staff.	
<b>R 400.715</b>	<b>Facility environment; fire safety, adoption by reference.</b>
	<b>(1) A facility that has a capacity of 4 to 6 residents shall be equipped with an interconnected multi-station smoke detection system that is powered by the facility's electrical service. When activated, the system must initiate an alarm that is audible in all areas of the facility. The smoke detection system must be installed on all levels, including basements, common activity areas, and outside each sleeping area, excluding crawl spaces and unfinished attics, to provide full coverage of the facility. The system must include a battery backup to ensure that the system is operable if there is an electrical power failure and accommodate the sensory impairments of residents living in the facility, if needed. A fire safety system must be installed in accordance with the manufacturer's instructions by a licensed electrical contractor and inspected annually. A record of the inspections must be maintained at the facility for 2 years.</b>
During the onsite inspection, I observed that the home's fire alarm panel had a yellow light and indicated there was "system trouble". A copy of 2025 alarm system inspection was not available.	

#### IV. RECOMMENDATION

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

*Kristine Cilluffo*

12/19/2025

Kristine Cilluffo  
Licensing Consultant

Date