



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 14, 2026

Amy Smith-Martinez
12085 Nicholas Lane
Plymouth, MI 48170

RE: License #: AF820418541
Investigation #: 2026A0575025
Water Lily Inn

Dear Ms. Smith-Martinez:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames for each violation as to when the correction will be completed or implemented.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

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) 284-9720.

Sincerely,

A handwritten signature in blue ink that reads "Jeffrey J. Bozsik".

Jeffrey J. Bozsik, Licensing Consultant
Bureau of Community and Health Systems
(734) 417-4277

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

I. IDENTIFYING INFORMATION

License #:	AF820418541
Investigation #:	2026A0575025
Complaint Receipt Date:	04/01/2026
Investigation Initiation Date:	04/01/2026
Report Due Date:	05/01/2026
Licensee Name:	Amy Smith-Martinez
Licensee Address:	12085 Nicholas Lane Plymouth, MI 48170
Licensee Telephone #:	(248) 719-2003
Administrator:	N/A
Licensee Designee:	
Name of Facility:	Water Lily Inn
Facility Address:	12085 Nicholas Lane Plymouth, MI 48170
Facility Telephone #:	(248) 719-2003
Original Issuance Date:	02/27/2025
License Status:	REGULAR
Effective Date:	08/27/2025
Expiration Date:	08/26/2027
Capacity:	6
Program Type:	AGED

II. ALLEGATION(S)

	Violation Established?
Licensee does not complete background checks for all staff.	Yes
All staff do not have first aid/CPR training.	Yes
Direct care staff health screenings incomplete.	Yes
Licensee had a reduction in income and lacks financial capability	No
Licensee is not providing transportation per the resident care agreement.	No

III. METHODOLOGY

04/01/2026	Special Investigation Intake-2026A0575025
04/01/2026	Special Investigation Initiated - Telephone
04/10/2026	Inspection Completed On-site-interview with Amy Smith-Martinez
04/10/2026	Inspection Completed-BCAL Sub. Compliance
04/10/2026	Corrective Action Plan Requested and Due on 04/30/2026
04/10/2026	Exit Conference with Amy Smith-Martinez, licensee

ALLEGATION:

Licensee does not complete background checks for all staff.

INVESTIGATION:

An APS referral was not made for this investigation since there was no abuse or neglect.

On 4/10/2026, I interviewed Amy Smith-Martinez. I stated that when I checked the Workforce Background Check (WBC) program, none of her staff were listed as employees for this facility. She stated that she was working with the WBC staff and had just received a call back from them when she contacted the office on 3/19/2026. She stated that not all of the staff background checks have been completed as of

this date. She expects to have the background checks completed by the due date for the corrective action for this special investigation report.

On 4/20/2026, I reviewed the WBC program and found that 2 of the staff have been entered as active employees.

I reviewed the staff training records for all 6 staff, which includes: (a) Amy Martinez-Smith; (b) Alex Smith; (c) Christine Jenkins; (d) Jennelle Donaldson; (e) Rechelle Wardrop; and (f) Valerie Lucas. They were all hired when the facility was initially licensed.

APPLICABLE RULE	
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.
	(1) In addition to the restrictions prescribed in sections 13, 22, and 31, and except as otherwise provided in subsection (2), an adult foster care facility shall not employ or independently contract with an individual who regularly has direct access to or provides direct services to residents of the adult foster care facility if the individual satisfies 1 or more of the following: (a) Has been convicted of a relevant crime described under 42 USC 1320a-7(a).
ANALYSIS:	The licensee admits to not completing the staff background checks as of this date.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

All staff do not have first aid/CPR training.

INVESTIGATION:

On 4/10/2026, I interviewed Amy Smith-Martinez and I reviewed her training and the training for the five direct care staff. She admitted that the five staff were not trained as this date but stated that the Family Home rules under which she was originally licensed did not require this much training. She stated that she is using the LARA training modules supplemented with First Aid/CPR training and it will be completed by the due date for the corrective action plan to this special investigation report.

APPLICABLE RULE	
R 400.629	Direct care staff; qualifications and training.
	<p>(5) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be trained and competent in all of the following areas before performing assigned tasks independently:</p> <ul style="list-style-type: none"> (a) Reporting requirements. (b) First aid. (c) Cardiopulmonary resuscitation, which includes a hands-on demonstration as part of the training. (d) Personal care, supervision, and protection. (e) Resident rights. (f) Safety and fire prevention. (g) Prevention and containment of communicable diseases including recognizing signs of illness. (h) Food safety, which includes food storage, preparation, distribution, and serving in a safe manner. (i) Nutrition and special diets.
ANALYSIS:	The licensee admits to not completing the direct care staff training as of this date.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Direct care staff health screenings incomplete.

INVESTIGATION:

On 4/10/2026, I interviewed Amy Smith Martinez. I reviewed the five direct staff records and did not find current initial physicals for the five direct care staff before they started work. She stated that the direct care staff health screenings will be completed by the due date for the corrective action plan to this special investigation report.

APPLICABLE RULE	
R 400.631	Health screenings.
	(2) A licensee shall have on file a statement signed by a licensed physician or physician's designee attesting to the physical health of the licensee, staff, and members of the household. Statements for the licensee and administrator must be signed no more than 6 months before the issuance of a temporary license and at any other time requested by the department. Statements for staff and members of the household must be obtained within 30 days of employment start date, assumption of duties, or occupancy in the facility.
ANALYSIS:	The licensee admits to not completing the direct care staff health screenings as of this date.
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION:

Licensee had a reduction in income and lacks financial capability.

INVESTIGATION:

On 4/10/2026, as part of my interview with Amy Smith-Martinez, I reviewed her facility budget, bank statements and financial records for the last six months. I found she has the financial resources to operate this facility.

APPLICABLE RULE	
R 400.635	Fiscal ability and competence.
	(3) A licensee shall have the financial and administrative capability to operate a facility to provide the level of care and program stipulated in the program statement.
ANALYSIS:	Upon review of Amy Smith-Martinez's budget and finances, I found that she has the financial and administrative capability to operate this facility to provide the level of care and program stipulated in the program statement.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Licensee is not providing transportation per the resident care agreement.

INVESTIGATION:

On 4/10/2026, as part of my interview with Amy Smith-Martinez, I reviewed the resident care agreements (RCA) of the four current residents. All four of the RCAs were signed by Amy Smith Martinez and the resident or their legal guardian/power of attorney. On all four of the RCAs on the line regarding the provision of transportation, no transportation was checked as provided by the licensee. Amy Smith Martinez stated that the family members provide resident transportation to appointments as needed.

APPLICABLE RULE	
R 400.685	Resident admission; resident assessment plan; resident care agreement; health care appraisal.
	(6) A licensee shall complete a written resident care agreement at the time of a resident's admission that includes all of the following: (f) Transportation services provided for a basic fee and services that are provided at an extra cost.
ANALYSIS:	This allegation is not substantiated because the provision or here the lack of providing resident transportation section of the resident care agreement, was properly documented and signed by all relevant parties.
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Contingent upon submission of an acceptable corrective action plan, I recommend no change in the status of the license.



Jeffrey J. Bozsik
Licensing Consultant

Date: 4/20/2026

Approved By:



Ardra Hunter
Area Manager

Date: 5/14/2025