



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

March 31, 2021

Kathleen Swantek  
Blue Water Developmental Housing, Inc.  
1600 Gratiot, Ste 1  
Marysville, MI 48040

RE: License #: AS740013022  
**Maple Street Home**  
**471 Maple Street**  
**Algonac, MI 48001**

Dear Mrs. Swantek:

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  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342  
(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>                  | AS740013022  |
| <b>Licensee Name:</b>              | Blue Water Developmental Housing, Inc.             |
| <b>Licensee Address:</b>           | Ste 1<br>1600 Gratiot<br>Marysville, MI 48040      |
| <b>Licensee Telephone #:</b>       | (810) 388-1200                                     |
| <b>Licensee/Licensee Designee:</b> | Kathleen Swantek                                   |
| <b>Administrator:</b>              | Kathleen Swantek                                   |
| <b>Name of Facility:</b>           | Maple Street Home                                  |
| <b>Facility Address:</b>           | 471 Maple Street<br>Algonac, MI 48001              |
| <b>Facility Telephone #:</b>       | (810) 794-7220                                     |
| <b>Original Issuance Date:</b>     | 09/12/1986   |
| <b>Capacity:</b>                   | 6  |
| <b>Program Type:</b>               | PHYSICALLY HANDICAPPED<br>DEVELOPMENTALLY DISABLED |

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/30/2021

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

Date of Environmental/Health Inspection if applicable: N/A

Inspection Type:  Interview and Observation  Worksheet  
 Combination  Full Fire Safety

No. of staff interviewed and/or observed 4

No. of residents interviewed and/or observed 6

No. of others interviewed 1 Role: Division Director

- 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.  
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- 04/08/2019- AS301(9), AS312(4)(v), AS312(7), AS401(2), AS403(5)  
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 400.14208</b>   | <b>Direct care staff and employee records.</b>   |
|  | <b>(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:<br/>(f) Verification of reference checks.</b>   |
| Staff, Starlit Smith, only had verification of one reference check in employee file.                                 |  |
| <b>R 400.14301</b>   | <b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>   |
|  | <b>(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.</b>              |
| Resident A and Resident B's resident care agreements completed in January 2021 were not signed by licensee designee. |  |
| <b>REPEAT VIOLATION ESTABLISHED. LSR dated 03/25/2019, CAP dated 04/08/2019</b>                                      |  |
| <b>R 400.14312</b>   | <b>Resident medications.</b>   |
|  | <b>(7) Prescription medication that is no longer required by a resident shall be properly disposed of after consultation with a physician or a pharmacist.</b>   |
| Resident B's silver sulfadiazine cream was not disposed of after being discontinued on 02/23/2021.                   |  |
| <b>REPEAT VIOLATION ESTABLISHED. LSR dated 03/25/2019, CAP dated 04/08/2019</b>                                      |  |
| <b>R 400.14401</b>   | <b>Environmental health.</b>   |
|  | <b>(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.</b> |

During the onsite inspection, I measured the water temperature with a digital thermometer. The water temperature in the kitchen was 129.4 degrees Fahrenheit.

**REPEAT VIOLATION ESTABLISHED. LSR dated 03/25/2019, CAP dated 04/08/2019**

#### IV. RECOMMENDATION

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



03/31/2021

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Kristine Cilluffo  
Licensing Consultant

Date