



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 5, 2024

James Pilot
Bay Human Services, Inc.
P O Box 741
Standish, MI 48658

RE: License #:	AS090242597 Jean Road AFC 4443 Jean Street Bay City, MI 48706
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Dear James Pilot:

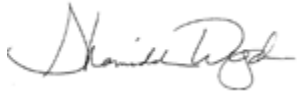
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 and special certification 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 cursive script, appearing to read "Shamidah Wyden".

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 #:	AS090242597
Licensee Name:	Bay Human Services, Inc.
Licensee Address:	PO Box 741 3463 Deep River Rd Standish, MI 48658
Licensee Telephone #:	(989) 846-9631
Licensee Designee:	James Pilot
Administrator:	Tammy Unger
Name of Facility:	Jean Road AFC
Facility Address:	4443 Jean Street Bay City, MI 48706
Facility Telephone #:	(989) 684-3270
Original Issuance Date:	01/04/2002
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 05/29/2024

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 3

No. of others interviewed Role: N/A

- 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.
Meal prep/service was not observed during at the time of this on-site.
- 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.
There were no incident reports requiring follow-up.
- Corrective action plan compliance verified? Yes ☐ CAP date/s and rule/s:
N/A ☒
- Number of excluded employees followed-up? N/A ☒
- Variances? Yes ☐ (please explain) No ☐ N/A ☒

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

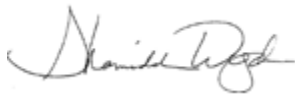
This facility was found to be in non-compliance with the following rules:	
R 400.14401	Environmental health.
	(2) Hot and cold running water that is under pressure shall be provided. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the faucet.
At the time of inspection, the water temperature at the bathroom and kitchen sink faucets were above 120 degrees Fahrenheit.	
R 400.14403	Maintenance of premises.
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
At the time of inspection, the front and back porch steps to the home appeared to be in need of repair/replacement.	
R 400.14403	Maintenance of premises.
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.
At the time of inspection, the living room furniture appeared to be worn/dirty. Resident's A's wooden chair at the dining room table appeared to be dirty, and in need of being scraped/cleaned. Resident A's top dresser drawer was missing a drawer front.	
R 400.14403	Maintenance of premises.
	(4) A roof, exterior walls, doors, skylights, and windows shall be weathertight and watertight and shall be kept in sound condition and good repair.
At the time of inspection, siding was missing from the side of the home.	
R 400.14403	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, Resident A's room had tobacco shaving spread over the floor. The other resident bedrooms appeared to be unkempt with messy floors as well. Food stains were observed on the wall and ceiling above the kitchen sink, as well as on the window and kitchen window screen. Resident A's bedroom wall behind Resident A's headboard is in need of repair.	
R 400.14403	Maintenance of premises.
	(8) Stairways shall have sturdy and securely fastened handrails. The handrails shall be not less than 30, nor more than 34, inches above the upper surface of the tread. All exterior and interior stairways and ramps shall have handrails on the open sides. All porches and decks that are 8 inches or more above grade shall also have handrails on the open sides.
At the time of inspection, the steps leading to the office and garage area of the home was not equipped with handrails on the open side.	
R 400.14505	Smoke detection equipment; location; battery replacement; testing, examination, and maintenance; spacing of detectors mounted on ceilings and walls; installation requirements for new construction, conversions, and changes of category.
	(5) Detectors that are mounted on ceilings shall be spaced 6 inches or more away from any walls. Detectors that are mounted on walls shall be between 6 and 12 inches away from the ceiling. A smoke detector shall not be mounted where ventilation systems or other obstructions keep smoke away.
At the time of inspection, the smoke detectors were more than 12 inches away from the ceiling.	
R 400.14507	Means of egress generally.
	(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.
At the time of inspection, the front door to the home was not equipped with positive-latching, non-locking-against, egress hardware.	
R 400.14509	Means of egress; wheelchairs.
	(2) The slope of the ramp shall not be more than 1 foot of rise in 12 feet of run and shall terminate on a firm surface

	or solid unobstructed ground which will allow the wheelchair occupant to move a safe distance away from the building. Ramps shall have handrails on the open sides and be constructed in accordance with the requirements specified in Section 816.0 of the BOCA National Building Code, 1990, eleventh edition.
At the time of inspection, there was not sufficient non-skid surfacing on the wheelchair ramps in the front and back of the home.	
R 400.14510	Heating equipment generally.
	(2) A furnace, water heater, heating appliances, pipes, wood-burning stoves and furnaces, and other flame- or heat-producing equipment shall be installed in a fixed or permanent manner and in accordance with a manufacturer's instructions and shall be maintained in a safe condition.
At the time of inspection, the dryer was not vented with a solid metal duct.	
R 400.14318	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, there was no evening drill conducted in the second quarter of 2022. There were also no documentation presented at the time of inspection noting that any drills were conducted in the fourth quarter of 2022.	

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan and closure of Special Investigation Report #2024A0572038, renewal of the license and issuance of the special certification is recommended.



06/05/2024

Shamidah Wyden
Licensing Consultant

Date