



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

October 8, 2024

Vickie Forsyth  
Serenity House Inc.  
13326 S. Bliven Rd.  
Byron, MI 48418

RE: License #: AM780092109  
**Serenity House**  
**13326 S. Bliven Road**  
**Byron, MI 48418**

Dear Ms. Forsyth:

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 (517) 284-9730.

Sincerely,

A handwritten signature in dark ink, reading "Candace Coburn" with a long, sweeping horizontal line extending to the right.

Candace Coburn, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

|                                    |   |
|------------------------------------|---|
| <b>License #:</b>                  | AM780092109                             |
| <b>Licensee Name:</b>              | Serenity House Inc.                     |
| <b>Licensee Address:</b>           | 13326 S. Bliven Rd.<br>Byron, MI 48418  |
| <b>Licensee Telephone #:</b>       | (989) 634-5962                          |
| <b>Licensee/Licensee Designee:</b> | Vickie Forsyth                          |
| <b>Administrator:</b>              | Vickie Forsyth                          |
| <b>Name of Facility:</b>           | Serenity House                          |
| <b>Facility Address:</b>           | 13326 S. Bliven Road<br>Byron, MI 48418 |
| <b>Facility Telephone #:</b>       | (989) 634-5962                          |
| <b>Original Issuance Date:</b>     | 05/23/2000                              |
| <b>Capacity:</b>                   | 12                                      |
| <b>Program Type:</b>               | AGED<br>ALZHEIMERS                      |

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/01/2024

Date of Bureau of Fire Services Inspection if applicable: 8/15/2024

Date of Health Authority Inspection if applicable: 09/11/2024

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 6

No. of others interviewed 0 Role:

- 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.
- 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: 1/3/2023 as401(1) N/A ☐
- Number of excluded employees followed-up? N/A ☒
- Variances? Yes ☐ (please explain) No ☐ N/A ☒

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility is not in compliance with the following rules:

**R 400.15315      Handling of resident funds and valuables.**

(3) A licensee shall have a resident's funds and valuables transaction form completed and on file for each resident. A department form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

**At the time of inspection, four out of five resident files reviewed did not have a Funds I form in the file.**

**R 400.15318      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, April, May, June, July, August, and September 2023 fire drill results were not completed as being conducted.**

**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 front porch stairs did not have a handrail installed on one of the open sides of the steps and the porch did not have railings installed the open sides.**

#### IV. RECOMMENDATION

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



10/09/2024

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Candace Coburn  
Licensing Consultant

Date