GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

May 26, 2026

Wycliffe Opiyo
Mercy Homes Assisted Living LLC
2901 Asbury St.
Kalamazoo, MI 49048

RE: Application #: AS110420460
Serenity Springs AFC
3960 Sunset Ct
Berrien Springs, MI 49103

Dear Mr. Opiyo:

Attached is the Original Licensing Study Report for the above-referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license and special certification with a maximum capacity of 6 is issued.

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 (616) 356-0100.

Sincerely,

Rodney Gill

Rodney Gill, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
gillr@michigan.gov
(517) 980-1433

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
LICENSING STUDY REPORT

I. IDENTIFYING INFORMATION

License #:	AS110420460
Applicant Name:	Mercy Homes Assisted Living LLC
Applicant Address:	2901 Asbury St. Kalamazoo, MI 49048
Applicant Telephone #:	(817) 781-6512
Administrator/Licensee Designee:	Wycliffe Opiyo
Name of Facility:	Serenity Springs AFC
Facility Address:	3960 Sunset Ct Berrien Springs, MI 49103
Facility Telephone #:	(817) 781-6512
Application Date:	03/25/2026
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL
Certified Programs:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODOLOGY

03/25/2026	Enrollment
03/25/2026	PSOR on Address Completed
03/25/2026	File Transferred To Field Office
03/26/2026	Application Incomplete Letter Sent to licensee designee Wycliffe Opiyo.
04/29/2026	Application Incomplete Letter Sent to licensee designee Wycliffe Opiyo.
05/11/2026	Contact - Document Received Mr. Opiyo provided the remainder of requested supporting documentation.
05/11/2026	Comment I emailed Mr. Opiyo informing him that I scheduled the onsite Original inspection for this facility on 5/27/26 at 1:00 p.m.
05/11/2026	SC-Application Received - Original
05/21/2026	Application Complete/On-site Needed
05/21/2026	Inspection Completed On-site
05/26/2026	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Serenity Springs AFC is a newly constructed ranch style home located within the village of Berrien Springs, MI off of US Highway 31 (US 31). The home was specifically built to function as an Adult Foster Care (AFC) facility. The exterior of the home has gray vinyl siding with white accented trim and doors. The home was built on a large lot providing opportunity for residents to participate in numerous outdoor activities and enjoy outside living when weather allows.

The home has four nice-sized bedrooms and two bathrooms for resident use. The inside of the home has a clean, comfortable, and fresh feel with luxury vinyl plank flooring throughout.

The home is located in a friendly and quiet neighborhood and has a large front and back yards.

The home is close to shopping, restaurants, physician's offices, medical facilities, etc.

The home is not wheelchair accessible as the applicant does not plan to admit residents with impaired physical mobility.

The applicant owns the home and the property which has been verified by a Summer Tax Notice and Employer Identification Number (EIN).

The home utilizes public water, and sewage so does not require annual Environmental Health Inspections.

The home is equipped with an interconnected combination smoke and carbon monoxide detector system with battery backup that meets fire safety rule requirements, was installed by a licensed professional, and was last inspected on 5/11/263/18/26. The facility has at least one fire extinguisher on each floor and direct care staff members (DCSMs) are aware of their location and trained in how to properly use them.

I reviewed the facility emergency preparedness plan which covers steps DCSMs are to take in case of fire, tornado, medical, power outage, infectious disease or pandemic, missing resident, violence or security threat, transportation emergency, emergency supplies, communication, and recovery and continuity.

I ensured residents could easily open windows in their bedrooms if necessary. Because the maximum capacity is less than seven residents, no annual Bureau of Fire Services (BFS) Inspection is required. I inspected and determined the facility to be compliant with fire safety administrative rules. The facility has two approved means of egress.

Odeum Design Collaborative, LLC conducted a complete inspection of the home's mechanical systems on 5/11/26 and found all of the systems were installed, inspected, in proper condition, and meet all the requirements stipulated in the MI Residential Building Code 2015.

The gas furnace and water heater are located in the basement and standard building material was used for the floor separation. The floor separation also includes at least 1-3/4-inch solid core wood door or equivalent equipped with an automatic self-closing device to create a floor separation between the basement and the first floor. Residents will not have access to the basement.

The clothes dryer is properly vented to the outside using permanent metal duct work.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	10 x 12	120	1
2	11.6 x 11.6	135	1
3	11.6 x 11.6	135	2
4	11.6 x 13.5	157	2

Given the sizes of the bedrooms and one to two residents per room, the facility's bedroom space exceeds the required 80 square feet allowed of usable floor space for a single occupancy and 65 square feet of usable floor space per bed for a multioccupancy resident bedroom.

The living room and dining room measure a total of 459 square feet of living space. This exceeds the 35 square feet of required indoor living space per occupant, exclusive of the bathroom, storage areas, hallways, kitchen, and sleeping areas. Based on the information above, it is concluded that this facility can accommodate six (6) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Admission and discharge policies, program statement, refund policy, personnel policies, emergency preparedness plans, standard procedures, and a visitation policy that addresses overnight visitors were reviewed and accepted as written.

The applicant intends to provide 24-hour supervision, protection and personal care to six (6) male and/or female adults who are physically handicapped, developmentally disabled, and/or mentally ill.

The program statement indicates that this AFC small group home provides individualized care, supervision, and support services to adults who may have physical disabilities, developmental disabilities, mental health conditions, traumatic brain injuries, dementia, or other special care needs. The goal of the program is to provide a safe, structured, and home-like environment that promotes dignity, independence, personal growth, and quality of life.

The program is designed to meet the unique emotional, physical, social, and behavioral needs of residents through person-centered care plans and 24-hour supervision. The home offers a supportive family-style atmosphere where residents receive assistance with daily living while encouraging independence to the highest level possible.

The program is designed to meet the unique emotional, physical, social, and behavioral needs of residents through person-centered care plans and 24-hour supervision. The home offers a supportive family-style atmosphere where residents receive assistance with daily living while encouraging independence to the highest level possible.

Residents are provided with individualized services tailored to their abilities, medical conditions, and personal goals. Staff members are trained to support individuals with specialized behavioral, emotional, cognitive, and medical needs while promoting safety, stability, and community inclusion.

Services Offered

1. 24-Hour Supervision and Care
   - Continuous monitoring and supervision
   - Assistance with safety awareness and crisis intervention
   - Staff available around the clock for emergencies and support

2. Assistance with Activities of Daily Living (ADLs)
   - Bathing and personal hygiene
   - Dressing and grooming
   - Toileting and incontinence care
   - Mobility and transfer assistance
   - Eating and feeding support

3. Medication Management
   - Medication administration and monitoring
   - Coordination with physicians and pharmacies
   - Documentation of medication schedules and health changes

4. Mental Health and Behavioral
   - Support Structured behavioral support programs

- Emotional support and coping skill development
- De-escalation and crisis prevention techniques
- Coordination with therapists, psychiatrists, and case managers
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5. Health Monitoring and Medical Coordination
   - Monitoring vital signs and health conditions
   - Scheduling and transportation to medical appointments
   - Coordination with healthcare providers and specialists
   - Support with chronic health conditions

6. Nutritious Meals and Dietary Support
   - Three balanced meals daily plus snacks
   - Specialized diets as ordered by physicians
   - Meal planning based on nutritional and cultural needs

7. Social and Recreational Activities
   - Community outings and events
   - Exercise and wellness activities
   - Games, crafts, music, and social interaction opportunities
   - Spiritual and faith-based support if desired

8. Life Skills and Independent Living Support
   - Money management assistance
   - Personal responsibility development
   - Communication and social skills training
   - Household participation and daily routine development

9. Transportation Services
   - Transportation to medical appointments
   - Access to community activities and shopping
   - Transportation for therapy, school, or vocational programs when applicable

10. Family and Community Involvement
    - Encouraging family participation in care planning
    - Regular communication with guardians and family members
    - Community integration and social inclusion activities

Program Goals

- Promote resident safety and well-being
- Enhance independence and self-esteem
- Improve emotional and behavioral stability
- Encourage social engagement and community participation
- Provide compassionate, respectful, and individualized care

C. Applicant and Administrator Qualifications

The applicant is Mercy Homes Assisted Living LLC., which is a “Domestic Limited Liability Company”, was established in Michigan, on 12/21/2015. The applicant has acknowledged sufficient financial resources to provide for the adequate care of the residents. The applicant submitted an income statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The members of Mercy Homes Assisted Living LLC. have submitted documentation appointing Wycliffe Opiyo as Licensee Designee and Administrator for this facility.

A licensing record clearance request was completed with no LEIN convictions recorded for Mr. Opiyo. Licensee designee/administrator Wycliffe Opiyo submitted a medical clearance with a statement from a physician documenting his good health, dated 9/9/2024.

The licensee designee / administrator has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. The licensee designee / administrator has been a licensed vocational nurse (LVN) for sixteen years working with the program types requested / vulnerable populations this AFC small group facility will house and provide care for.

The licensee designee / administrator has successfully operated two AFC small group homes in Kalamazoo, MI, one for more than a decade. The licensee designee / administrator possesses direct care experience serving individuals with mental illness and developmental disabilities. The licensee designee / administrator has provided assistance with activities of daily living, including personal care, medication administration, meal preparation, mobility assistance and behavioral support. The applicant also possesses management experience involving staff supervision, compliance with licensing requirements, and oversight of resident care and documentation.

The staffing pattern for the original license of this six (6) bed facility is adequate and includes a minimum of one staff –to- six residents per shift. The applicant acknowledges that the staff –to- resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents. The applicant has indicated that direct care staff will be awake during sleeping hours.

The applicant acknowledged that at no time will this facility rely on “roaming” staff or other staff that are on duty and working at another facility to be considered part of this facility’s staff to resident ratio or expected to assist in providing supervision, protection, or personal care to the resident population.

The applicant acknowledges an understanding of the qualifications, suitability, and training requirements for direct care staff prior to each person working in the facility

in that capacity or being considered as part of the staff to resident ratio.

The applicant acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to be maintained in each employee's record to demonstrate compliance.

The applicant acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee, can administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

The applicant acknowledges their responsibility to obtain all required good moral character, medical, and training documentation and signatures that are to be completed prior to each direct care staff or volunteer working directly with residents. In addition, the applicant acknowledges their responsibility to maintain all required documentation in each employee's record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee's record.

The applicant acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

The applicant acknowledges their responsibility to obtain the required written assessment, written assessment plan, resident care agreement, and health care appraisal forms and signatures that are to be completed prior to, or at the time of each resident's admission to the home as well as updating and completing those forms and obtaining new signatures for each resident on an annual basis.

The applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and follow the retention schedule for all of the documents that are required to be maintained within each resident's file.

The applicant acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. The applicant acknowledges recording each resident's funds and itemized transactions including payment for services. The applicant acknowledges this document will be created for each resident in order to document the date and amount of the adult foster care service fee paid each month and all of the resident's personal money transactions that have been agreed to be managed by the applicant.

The applicant acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. The applicant indicated that it is their intent to achieve and maintain compliance with these requirements.

The applicant acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. The applicant has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

The applicant acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

D. Rule/Statutory Violations

The applicant was in compliance with the licensing act and applicable administrative rules at the time of licensure.

IV. RECOMMENDATION

I recommend issuance of a temporary license and concurrent special certification to this AFC adult small group home (capacity 1-6).

5/27/26

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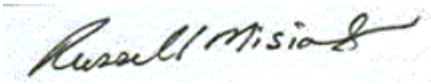
Rodney Gill Date
Licensing Consultant

Approved By:



5/27/26

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Russell B. Misiak Date
Area Manager