



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

SHELLY EDGERTON  
DIRECTOR

March 19, 2018

Daniela Banceu-Schmidt  
Serenity Manor of Canton LLC  
48410 Gyde Rd  
Canton, MI 48187

RE: Application #: AS820391212  
**Serenity Manor Of Canton**  
**48410 Gyde Rd.**  
**Canton, MI 48187**

Dear Mrs. Banceu-Schmidt:

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 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 (313) 456-0380.

Sincerely,

A handwritten signature in blue ink, appearing to read "Edith Richardson".

Edith Richardson, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 919-1934

enclosure

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

**I. IDENTIFYING INFORMATION**

**License Application #:** AS820391212

**Licensee Name:** Serenity Manor Of Canton LLC

**Licensee Address:** 48410 Gyde Rd  
Canton, MI 48187

**Licensee Telephone #:** (248) 790-8757

**Administrator/Licensee Designee:** Daniela Banceu-Schmidt, Designee

**Name of Facility:** Serenity Manor Of Canton

**Facility Address:** 48410 Gyde Rd.  
Canton, MI 48187

**Facility Telephone #:** (248) 790-8757  
10/31/2017

**Application Date:**

**Capacity:** 6

**Program Type:** PHYSICALLY HANDICAPPED  
MENTALLY ILL  
AGED  
ALZHEIMERS

## II. METHODOLOGY

10/31/2017	On-Line Enrollment
11/01/2017	Contact - Document Sent Rules and Acts books
11/09/2017	Contact - Document Received 1326 for Daniela and Christopher
11/09/2017	File Transferred To Field Office Detroit
11/13/2017	Application Complete/On-site Needed
10/26/2017	Inspection Completed On-Site
12/20/2017	Inspection Completed-BCAL Full Compliance

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

Serenity Manor of Canton was originally licensed to Daniela Banceu-Schmidt on 05/24/2017. On 10/31/2017 Mrs. Banceu-Schmidt submitted an Adult Foster Care License Limited Liability Company, Governmental Organization and Corporation Application on behalf of Serenity Manor of Canton LLC. The purpose of the investigation was to have the license issued to Serenity Manor of Canton LLC and not to Mrs. Banceu-Schmidt.

Serenity Manor of Canton is a brick and taupe aluminum siding, newly constructed, Tudor style home located in the city of Canton. The seven bedrooms home features an open floor plan with a formal dining room, living room and kitchen. The home has four resident bedrooms, two full bathrooms and first floor laundry. The home has an attached garage with an attached deck.

The furnace and hot water heater are located in the basement with a 1-3/4 inch solid core door equipped with an automatic self-closing device and positive latching hardware. However this door cannot be used to create a floor separation between the basement and the first floor because an access door for the dog was installed in the 1-3/4 inch solid core door.

Therefore the furnace and hot water heater are located in the basement enclosed in a room that is constructed of material that has a 1-hour-fire-resistance rating.

The facility is equipped with interconnected, hardwire smoke detection system, with battery back-up, which was installed by a licensed electrician and is fully operational.

The home is wheelchair accessible.

Resident bedrooms were measured during the first original on-site inspection conducted by Shatonla Daniel on 03/23/2017, and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
North	9.92 x 13.33	132.23 sq. ft.	1
Northwest	17 x 10	170 sq. ft.	2
West	11.92 x 10.33	123.13 sq. ft.	1
Southwest	16.58 x 13.17	218.36 sq. ft.	2
Total			6

The living, dining, and sitting room areas measure a total of 469 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Based on the above information, 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**

The applicant intends to provide 24-hour supervision, protection and personal care to six (6) male or female ambulatory adults whose diagnosis is developmentally disabled or mentally impaired, in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. Residents will be referred from: (Private pay and referrals).

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

The licensee will provide all transportation for program and medical needs. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

## **C. Applicant, Licensee Designee, Administrator-Qualifications, Experience, Competency, Financial Capability & Stability and Good Moral Character**

The Serenity Manor of Canton LLC is the applicant. The Serenity Manor of Canton LLC is a limited liability company registered with the State of Michigan.

Mrs. Banceu-Schmidt is the Resident Agent for Serenity Manor of Canton LLC. The members of this business organization have designated Daniela Banceu-Schmidt as the licensee designee and as the administrator.

The administrator has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The applicant submitted a financial statement, credit report and proposed annual budget. Based on this information, the applicant meets the requirements for financial stability and capability.

A licensing record clearance request was completed with no lien convictions recorded for the licensee designee/administrator. The licensee designee/administrator complied with the background check and submitted fingerprints. The licensee designee/administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

#### **D. Staffing Plan, Proposed Ratios, Staff Training & Competencies**

The staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of 1 staff to 6 residents per shift.

The applicant acknowledges an understanding of the training and qualification 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 agrees to maintain a personnel file on each employee that includes documentation of the following minimum training:

- Reporting requirements
- First Aid
- Cardiopulmonary resuscitation
- Personal care, supervision, and protection
- Resident rights
- Safety and fire prevention
- Prevention and containment of communicable disease

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.

The applicant acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all of the documents

contained within each employee's file.

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](http://www.miltcpartnership.org)), MorphoTrust USA (formerly L-1 Identity Solutions), and the related documents required to be maintained in each employees record to demonstrate compliance.

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written.

The following resident forms were reviewed with the applicant:

- Resident Identification Form
- Resident care Agreement
- Health Care Appraisal
- Medication Record
- Monthly Weight Record
- Assessment Plan
- Funds & Valuables Record Part 1 & 2
- Incident/Accident Report

The applicant acknowledges their responsibility to obtain all of the required 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 the required forms and signatures to be completed for each resident on an annual basis. In addition, the applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

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 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 handling of resident funds and valuables and intends to comply.

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.

Evacuation and emergency plans are posted in the facility and the applicant is aware that fire drills must be conducted and recorded.

The applicant has completed an emergency repairs record identifying vendors to service the homes heating and electrical systems and provide general home maintenance and repair major appliances.

The applicant has developed weekly menus that include breakfast, lunch and dinner.

The applicant is found to be in substantial compliance with the licensing act and applicable administrative rules.

**IV. RECOMMENDATION**

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



Edith Richardson  
Licensing Consultant

03/7/2018  
Date

Approved By:



03/19/2018

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Ardra Hunter  
Area Manager

Date