



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

May 10, 2018

Audra Harmon
CSM Serenity, LLC
STE 7
6157 28th St SE
Grand Rapids, MI 49546

RE: Application #: AL030393311
Serenity Homes East
1710 West 32nd St.
Holland, MI 49423

Dear Ms. Harmon:

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 12 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,

A handwritten signature in black ink, appearing to read "Ian Tschirhart".

Ian Tschirhart, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 644-9526

enclosure

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

I. IDENTIFYING INFORMATION

License Application #: AL030393311

Licensee Name: CSM Serenity, LLC

Licensee Address: STE 7
6157 28th St SE
Grand Rapids, MI 49546

Licensee Telephone #: (317) 698-1174

Administrator: Audra Harmon

Licensee Designee: Audra Harmon

Name of Facility: Serenity Homes East

Facility Address: 1710 West 32nd St.
Holland, MI 49423

Facility Telephone #: (616) 377-7452

Application Date: 03/27/2018

Capacity: 12

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED

II. METHODOLOGY

03/27/2018	On-Line Enrollment
03/29/2018	Contact - Document Sent Rule & Act booklets
04/03/2018	Inspection Completed-Fire Safety: A
04/05/2018	Contact - Document Received Rec cl's for Audra (LD), Kimberly (Live-in); & Joseph (business owner)
04/05/2018	Lic. Unit file referred for background check review Kimberly
04/05/2018	Inspection Report Requested - Health Inv. #1028180
04/05/2018	Contact - Document Sent Fire Safety
04/26/2018	Inspection Completed-Env. Health: A
05/09/2018	Application Complete/On-site Needed
05/10/2018	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Serenity Homes East, which is located at 1710 West 32nd Street, Holland, (Ottawa County), Michigan, in a residential area, and is owned and operated by CSM Serenity, LLC. This home was previously licensed as a small group home (AS030338680) since 06/10/2014 and was in continuous operation until the time a new license for a capacity of 13 residents was issued on 04/26/2017. Both of these licenses were issued to a previous company.

Serenity Homes East is a large two-story home that is next to Serenity Homes West, a large adult foster care home (AL030314763), which is also owned and operated by CSM Serenity, LLC. There is a two and a half car garage between the two houses. The houses also share a circular drive that has several spaces for parking. Serenity Homes East has four means of egress, two of which are wheelchair accessible. The exit doors have non-locking against egress hardware. The main floor has a kitchen, laundry area, a large dining area, a living room, sitting/reading area, sunroom, an office, and six (6) resident bedrooms. The main floor also has two full bathrooms, one with a bathtub and the other with a shower stall. The second floor has a bedroom and bathroom that are only for live-in staff members.

The home uses a septic system for sewer disposal. The Allegan County Health Department conducted an inspection on 04/26/2018 and gave the facility an “A” rating, indicating substantial compliance with Health Department sanitation rules.

The gas, forced air 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. The facility is equipped with an interconnected, hardwired smoke detection system with battery backup, which was installed by a licensed electrician and is fully operational, which was tested upon the inspection on 05/10/2018 and worked properly. There is an easily accessible, operable A-B-C fire extinguisher on each floor, including the basement. Evacuation routes are placed on the walls in conspicuous places, and emergency telephone numbers are posted next to the home’s telephone, which residents will have reasonable access to. The Bureau of Fire Safety gave this home an A Rating on 04/03/2018, finding no fire safety violations, and the Licensing Consultant tested the smoke detectors during the final onsite inspection and they worked correctly.

RESIDENT BEDROOM MEASUREMENTS:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	11’9” X 15’4”	180	2
2	15’7” X 11’7”	180	2
3	12’8” X 10’5”	131	1
4	7’6” X 10’11” + 8’10” X 7’1”	143	2
5	12’9” X 12’11”	164	2
6	11’3” X 14’6”	163	2
7	11’8” X 7’7” + 4’7” X 5’9”	114	1

Total Capacity: 12

The living and dining room areas measure a total of 884 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

The kitchen has all the necessary cooking utensils, thermometers in the freezer and refrigerator, and a garbage can with a tight-fitting lid.

A telephone is available for residents to use. Telephone numbers for emergency services is posted near the telephone.

All of the furniture, appliances, equipment, etc. are clean and in good condition. The overall maintenance and cleanliness of the home is good.

B. Program Description

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection and personal care to 12 male and/or female adults aged 30 years and older, who may be diagnosed with mental illness, developmental disability, physical handicap, and/or who are aged, in the least restrictive environment possible. The home is fitted with approved wheelchair ramps and has 36-inch door widths to accommodate wheelchair accessibility throughout the home. 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. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

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 members, and only with the prior approval of the resident, guardian, and the responsible agency.

Serenity Homes East will not provide transportation to residents at this time. Emergency transportation needs will be fulfilled through ambulance services; all other transportation will be arranged by family members, or other service providers who offer it to the resident who live there.

C. Applicant and Administrator Qualifications

Audra Harmon is the Licensee Designee and Administrator for this home. Medical and Record Clearance requests for Ms. Harmon were completed with no restrictions noted on either. Her TB-tine results were negative.

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

The staffing pattern for the original license of this twelve-bed facility is 1-staff-to-12 residents during every shift of a 24-hour day.

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 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 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), Identogo, 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 Mrs. Harmon, can administer medication to residents. In addition, the applicant has indicated that resident medication will be stored in a locked medication cart and that daily medication logs will be maintained on each resident receiving medication.

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 themselves and direct care staff or volunteers and the retention schedule for all of the documents contained within their and each employee's file.

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 an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

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 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.

VI. RECOMMENDATION

I recommend issuance of a temporary license to this adult foster care medium group home (capacity 12).



May 10, 2018

Ian Tschirhart
Licensing Consultant

Date

Approved By:



May 10, 2018

Jerry Hendrick
Area Manager

Date