

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

March 15, 2022

Lawrence Ragnone Serene Gardens of Blanc LLC 4137 E Cook Rd Grand Blanc, MI 48439

RE: Application #: AL250409284

Serene Gardens of Grand Blanc I

4137 E Cook Rd

Grand Blanc, MI 48439

Dear Mr. Ragnone:

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 16 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 (906) 226-4171.

Sincerely,

Christopher Holvey, Licensing Consultant Bureau of Community and Health Systems

Christolin A. Holvey

611 W. Ottawa Street

P.O. Box 30664 Lansing, MI 48909

(517) 899-5659

enclosure

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

I. IDENTIFYING INFORMATION

License #: AL250409284

Applicant Name: Serene Gardens of Blanc LLC

Applicant Address: 4137 E Cook Rd

Grand Blanc, MI 48439

Applicant Telephone #: (810) 241-4084

Administrator/Licensee Designee: Lawrence Ragnone, Designee

Name of Facility: Serene Gardens of Grand Blanc I

Facility Address: 4137 E Cook Rd

Grand Blanc, MI 48439

Facility Telephone #: (810) 254-4500

Application Date: 06/24/2021

Capacity: 16

Program Type: PHYSICALLY HANDICAPPED

AGED

ALZHEIMERS

II. METHODOLOGY

06/24/2021	Enrollment
06/28/2021	Application Incomplete Letter Sent 1326 & AFC100
06/28/2021	Inspection Report Requested - Fire
06/28/2021	Contact - Document Sent 1326, AFC100, Fire Safety String
07/02/2021	Contact - Document Received 1326 & AFC100 for Lawrence
07/08/2021	Application Incomplete Letter Sent
07/14/2021	Contact - Document Received Received required paperwork from applicant.
08/31/2021	Inspection Completed-BCAL Sub. Compliance
08/31/2021	Inspection Completed-Env. Health : A
09/01/2021	Application Incomplete Letter Sent
03/10/2022	Application Complete/On-site Needed
03/10/2022	Inspection Completed On-site
03/14/2022	Inspection Completed-Fire Safety : A
03/14/2022	Inspection Completed-BCAL Full Compliance
03/14/2022	Recommend License Issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Serene Gardens of Grand Blanc I is located at 4137 Cook Rd., Grand Blanc, MI. 48439 in Genesee County. The facility is owned by Zakwon Aboudane, who is the president of Serene Gardens of Grand Blanc LLC. It has a large cement parking lot for ample parking space for staff and visitors.

The facility is a single level structure and has a brick and siding exterior. It is located in an urban residential neighborhood. The facility has 20 single occupancy resident

bedrooms and there is a half bath attached and located between every two resident bedrooms (Jack and Jill baths). In addition, there are two full bathrooms with bathing facilities for residents and one more half bath for staff and visitors. The facility has a large spacious living room, dining room and commercial kitchen. There are also two staff offices, laundry room, medication room, a reflection room, and a beauty salon. This facility has a total of four public exits and all those exits are at grade level, which makes this facility wheelchair accessible. All four exits have attached door alarms to alert staff when someone exits the facility.

Although this facility has twenty (20) potential resident bedrooms, it does not currently have enough bathrooms to comply with licensing rules to accommodate that many residents; therefore, this facility is only being licensed for sixteen (16) residents at this time. The applicant has plans to add a third shower room to this facility in order to utilize all twenty bedrooms.

The facility has an unoccupied basement, where the furnace and hot water heater are located and are separated from the residents with a steel fire rated door equipped with an automatic self-closing device and positive latching hardware. There are multiple fire extinguishers located throughout the facility. The smoke detectors are all hard-wired into the facility's electrical and fire detection system and are located in all sleeping and living areas. On 8/31/2021, the facility's furnace was inspected by a professional heating company and the furnace was found to be in good working order. On 3/14/2022, full fire safety approval was given to this facility by the Bureau of Fire Services

The facility has a public water and sewer system. On 8/31/2021, this facility was inspected for environmental safety and it was determined to be in full compliance with all applicable licensing rules pertaining to environmental health.

The resident bedrooms are identical in size and layout and measured as follows:

Bedroom	Square footage	# of Residents
Bedroom # 1	12' 8" x 8' 10" = 112 square feet	Empty
Bedroom # 2	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 3	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 4	12' 8" x 8' 10" = 112 square feet	Empty
Bedroom # 5	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 6	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 7	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 8	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 9	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 10	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 11	12' 8" x 8' 10" = 112 square feet	Empty
Bedroom # 12	12' 8" x 8' 10" = 112 square feet	Empty
Bedroom # 13	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 14	12' 8" x 8' 10" = 112 square feet	1

Bedroom # 15	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 16	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 17	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 18	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 19	12' 8" x 8' 10" = 112 square feet	1
Bedroom # 20	12' 8" x 8' 10" = 112 square feet	1

The living space in the home is as follows:

Room	Square footage	
Living Room	711	
Dining Room	913	
	Total Sq. Footage = 1624	

The 1,624 square feet of living space exceeds the minimum of 35 square feet per resident requirement.

B. Program Description

The facility has the capacity to provide 24-hour supervision, protection and personal care for up to sixteen (16) aged male and/or female residents over the age of 60, who diagnosis is Alzheimer's/dementia, aged, and/or physically handicapped.

Serene Gardens of Grand Blanc will provide comfortable, accessible accommodations with staff that is highly trained to assist in daily activities, decision making, and providing personal care to our residents. The facility's goal is to maintain the highest quality of life for their residents and doing so in a dignified manner within a safe, secure environment. The program will enhance physical, social, and cognitive abilities with an emphasis on activities which include activities of daily living. They will provide activities for their residents through the direction of the Activities Director. These activities include music, crafts, church, exercise, social events, and gardening and assistance will be offered for the residents to and from these activities. A beauty shop with a licensed hairdresser for the residents is also offered. Residents will have access to their hairdresser, or their own hairdresser is welcome to our facility. An assessment plan will be designed and implemented for each resident's social and behavioral developmental needs. Serene Gardens of Grand Blanc will utilize home health care agencies, hospice, and home health nursing staff, when required to assure all needed help is available to each resident as needed. All entrances/exits in this facility are equipped with alarms and this facility is wheelchair accessible.

C. Applicant/Licensee Designee and Administrator Qualifications

Serene Gardens of Grand Blanc, LLC has appointed Lawrence Ragnone as the licensee designee and administrator of the facility. A criminal history background check

was completed for Mr. Ragnone and he has been determined to be of good moral character. He has submitted statements from a physician documenting their good health and current TB-tine negative results.

The applicant has sufficient resources to provide for the adequate care of the residents as evidenced by projected income for AFC residents along with other financial resources.

The supervision of residents in this large group home licensed for sixteen (16) residents will be the responsibility of the applicant 24 hours day / 7 days a week. The applicant has indicated that for the original license of this 16-bed large group home, there is adequate supervision with 2-3 direct care staff on-site for sixteen (16) residents. The applicant acknowledges that the number of direct care staff on-site to resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents.

The applicant acknowledges an understanding of the training and qualification requirements for the responsible person or volunteers providing care to residents in the home.

The applicant acknowledges an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, "direct access" to residents, 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 establish good moral character and suitability, obtain and maintain documentation of good physical and mental health status, maintain documentation of all required trainings, and obtain all required documentation and signatures that are to be completed prior to direct care staff and volunteers working directly with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, or volunteer staff, and the retention schedule for all of the documents contained within each employee's file.

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 volunteers and the retention schedule for all of the documents contained within the employee's file. 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, the required forms and signatures to be completed 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 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 discharge criteria and procedural requirements for issuing a 30-day discharge written notice to a resident, as well as, when a resident can be discharged before the issuance of a 30-day discharge written notice.

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 an accident involving 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 that a separate Resident Funds Part II (BCAL-2319) form 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 licensee designee/ administrator, Mr. Ragnone, has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Mr. Ragnone reports that all resident files will be kept on the facility grounds.

D. Rule/Statutory Violations

Compliance with the physical plant rules has been determined. All items cited for correction have been verified by visual inspection. Compliance with Quality-of-Care rules will be assessed during the period of temporary licensing via an on-site inspection.

IV. RECOMMENDATION

I recommend issuance of a temporary license, as of March 18, 2022, to this AFC adult large group home (capacity 1-16).

Christopher Holvey

Christopher Holvey

Date

Licensing Consultant

Approved By:

3/18/2022

Mary E Holton Date
Area Manager