



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

February 6, 2023

Daniel McNeill  
PO Box 68  
Fenton, MI 48430

RE: License #: AF250404622  
Serenity Gardens  
110 Lansing St.  
Gaines, MI 48436

Dear Mr. McNeill:

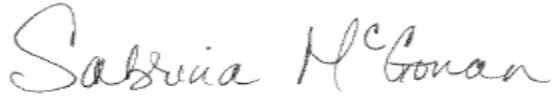
Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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) 643-7960.

Sincerely,

A handwritten signature in cursive script that reads "Sabrina McGowan".

Sabrina McGowan, Licensing Consultant  
Bureau of Community and Health Systems  
611 W. Ottawa Street  
P.O. Box 30664  
Lansing, MI 48909  
(810) 835-1019

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AF250404622
<b>Licensee Name:</b>	Daniel McNeill
<b>Licensee Address:</b>	110 Lansing St. Gaines, MI 48436
<b>Licensee Telephone #:</b>	(810) 931-8466
<b>Licensee/Licensee Designee:</b>	Daniel McNeill
<b>Administrator:</b>	N/A
<b>Name of Facility:</b>	Serenity Gardens
<b>Facility Address:</b>	110 Lansing St. Gaines, MI 48436
<b>Facility Telephone #:</b>	(810) 931-8644
<b>Original Issuance Date:</b>	08/27/2020
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED MENTALLY ILL

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/02/2023

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: 02/23/2023

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 3

No. of others interviewed 1 Role: Licensee

- 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. No E-scores completed
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  No  If no, explain.  
409 (1) (o)-04/06/2021, 421 (4), (9), (11)-08/03/2021, 407 (3), 431 (7)-01/20/2023, 407(2)-1/20/2023
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:  
N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes  (please explain) No  N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

**R 330.1803**

**Facility environment; fire safety.**

**(3) A facility that has a capacity of 4 or more clients shall conduct and document fire drills at least once during daytime, evening, and sleeping hours during every 3 month period.**

Special certified home did not conduct drills once during the daytime, evening, and sleeping hours, every three months as required.

**R 330.1803**

**Facility environment; fire safety.**

**(5) The capability of the clients to evacuate a facility in the event of a fire shall be assessed using methods described in appendix f of the 1985 life safety code of the national fire protection association. Appendix f of the 1985 life safety code of the national fire protection association is adopted by reference as part of these rules. A copy of the adopted appendix f is available from the Department of Mental Health, Lewis Cass Building, Lansing, MI 48913, at cost. A copy of appendix f may also be obtained from the National Fire Protection Association Library, Battermarch Park, P.O. Box 9101, Quincy, Massachusetts 02269-9101, 1-800-344-3555. A prepaid fee may be required by the national fire protection association for a copy of appendix f. A price quote for copying of these pages may be obtained from the national fire protection association.**

Special Certification Evacuation difficulty index scores for residents were not completed.

**R 400.1405**

**Health of a licensee, responsible person, and member of the household.**

**(3) A licensee shall provide the department with written evidence that he or she and each responsible person in the home is free from communicable tuberculosis. Verification shall be within the 3-year period before employment and verification shall occur every 3 years thereafter.**

Licensee was unable to produce current TB test for staff and responsible person in the home.

**R 400.1407**

**Resident admission and discharge criteria; resident assessment plan; resident care agreement; house guidelines; fee schedule; physicians instructions; health care appraisal.**

**(5) At the time of a resident's admission, a licensee shall complete a written resident care agreement which shall be established between the resident or the resident's designated representative, the responsible agency, and the licensee. A department form shall be used unless prior authorization for a substitute form has been granted in writing by the department. A resident shall be provided the care and services as stated in the written resident care agreement.**

Resident care agreement for residents did not have the cost of care amount entered.

Resident care agreement for at least one resident was not signed by the licensee, the resident or the resident's designated representative.

**R 400.1426**

**Maintenance of premises.**

**(1) The premises shall be maintained in a clean and safe condition.**

Water temperature in the kitchen and bathroom faucets tested at 135 degrees.

Closet in resident room #1 contained excessive clutter of clothes and other items on the floor.

**R 400.1426**

**Maintenance of premises.**

**(4) Floors, interior walls, and ceilings shall be sound, in good repair, and maintained in a clean condition.**

Hallway wall above resident room #2 has a crack in the foundation, starting at the ceiling.

Masking tape being used to cover worn carpeting for an even surface.

Ceiling fan in resident room #2 is detached and hanging from the ceiling.

**R 400.1430**

**Bathrooms.**

**(2) Bathroom doors may be equipped with positive latching, non-locking-against-egress hardware. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.**

Bathroom locks were not equipped with positive latching, non-locking-against-egress hardware

**R 400.1438**

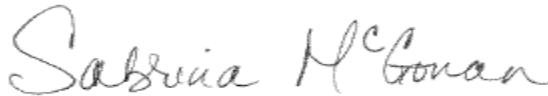
**Emergency preparedness; evacuation plan; emergency transportation.**

**(4) Fire drills shall be conducted 4 times a year. Two of the 4 required fire drills shall be conducted during sleeping hours. A record of the fire drills shall be incorporated with the evacuation plan.**

Licensee only conducted 2 fire drills.

**IV. RECOMMENDATION**

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



February 6, 2023

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Sabrina McGowan  
Licensing Consultant

Date