



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

June 22, 2023

Diana Buia
2185 Clinton View Cir
Rochester Hills, MI 48309

RE: Application #: AF630415906
Serenity At Rochester Hills
2185 Clinton View Cir
Rochester Hills, MI 48309

Dear Mrs. Buia:

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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Frodet Dawisha".

Frodet Dawisha, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste 9-100
Detroit, MI 48202
(248) 303-6348

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AF630415906
Licensee Name:	Diana Buia
Licensee Address:	2185 Clinton View Cir Rochester Hills, MI 48309
Licensee Telephone #:	(248) 897-2552
Name of Facility:	Serenity At Rochester Hills
Facility Address:	2185 Clinton View Cir Rochester Hills, MI 48309
Facility Telephone #:	(248) 897-2552
Application Date:	03/18/2023
Capacity:	6
Program Type:	AGED ALZHEIMERS PHYSICALLY HANDICAPPED

II. METHODOLOGY

03/18/2023	On-Line Enrollment
03/21/2023	PSOR on Address Completed
04/13/2023	Contact - Document Received 1326/fps/ri030, AFC-100
04/17/2023	Application Incomplete Letter Sent Report emailed to licensee
05/09/2023	Contact – Document Received Physical/TB, Emergency Floor Plan
05/16/2023	Contact – Document Received House Rules
06/06/2023	Inspection Completed On-site
06/06/2023	Inspection Completed-BCAL Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

Serenity At Rochester Hills is a large single-story home located at 2185 Clinton View Cr., Rochester Hills, MI 48309. The area of the home that is designated for residents has five bedrooms, two full bathrooms, an office, a living room, and a kitchen/dining area. Diana Buia and her husband and their two minor children (a nanny was hired to care for the minor children) reside in the finished walkout basement of the home, which is separated from the residents' area. The home is located in a suburban area of Rochester Hills that is easily accessible to community based recreational facilities, shopping centers, medical facilities, and places of worship. The Oakland County Sheriff's Police Department - Rochester Hills Substation responds to emergency calls from the home. Ascension Providence Rochester Hospital is located within five miles from the home.

The furnace and hot water heater are located in the basement, which is separated from the main floor by a 1¾ inch solid core door with an automatic self-closing device and positive latching hardware. The facility is equipped with an interconnected smoke detection system, which is fully operational, as well as heat detectors in areas of the home that have heat producing equipment. The home has public water and a public sewer system. The home can accommodate residents who use a wheelchair, as it has a ramp at the means of egress.

The residents' bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	3'11" x 10'01"	140	1
2	11'09" x 13'0"	153	2
3	9'07" x 10'09"	103	1
4	13' x 9'0"	117	1
5	12'07" x 10'11"	137	1

Total capacity: 6

The living and dining room areas measure a total of **585** 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** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Serenity At Rochester Hills intends to provide 24-hour supervision, protection, and personal care to **six** male or female residents, aged 65+, whose diagnosis is aged, Alzheimer's (dementia) and physically handicapped. The program will include instruction for daily living, personal hygiene assistance, and social and recreational activities.

Serenity At Rochester Hills will utilize local community resources for medical services, dental services, religious observance, and recreation. These resources provide an environment to enhance the quality of life and increase the independence of each resident.

C. Applicant and Responsible Person Qualifications

The applicant, Diana Buia, identified her husband, Nathan Buia, as the responsible person who can provide up to 72 hours of emergency coverage. A licensing record clearance request was completed for Diana Buia and Nathan Buia. Diana Buia and Nathan Buia submitted medical clearance forms with statements from a physician documenting their good health and current TB negative results.

Mrs. Buia indicated that she has sufficient financial resources to provide for the adequate care of the residents utilizing the husband's employment outside of adult foster care and savings or available cash.

Mrs. Buia acknowledged that an adult foster care family home requires the licensee to reside in the home in order to maintain this category type of adult foster care license.

The supervision of residents in this family home licensed for **six** residents will be the responsibility of Mrs. Buia 24 hours a day, seven days a week with the responsible person on call to provide supervision in relief.

Mrs. Buia acknowledged an understanding of the qualification requirements for the responsible person or volunteers providing care to residents in the home.

Mrs. Buia acknowledged an understanding of the responsibility to assess the good moral character of employees and acknowledged the requirement for obtaining criminal record checks of employees and contractors who have regular, ongoing "direct access" to residents or resident information or both utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org) and the related documents required to demonstrate compliance.

Mrs. Buia acknowledged an understanding of the administrative rules regarding medication procedures. In addition, Ms. Buia indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Mrs. Buia acknowledged the responsibility to obtain all required documentation and signatures that are to be completed prior to the responsible person and volunteers or staff working directly with residents. In addition, she acknowledged the responsibility to maintain a current employee record on file in the home for the licensee, responsible person, volunteer, or staff, and the retention schedule for all of the documents contained within each employee's file.

Mrs. Buia acknowledged an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

Mrs. Buia acknowledged 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 written discharge notice.

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

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

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

Mrs. Buia acknowledged her responsibility to obtain 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, Mrs. Buia acknowledged her 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.

D. Rule/Statutory Violations

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

IV. RECOMMENDATION

I recommend issuance of a six-month temporary license to Serenity At Rochester Hills, an adult foster care family home with a capacity of six residents.

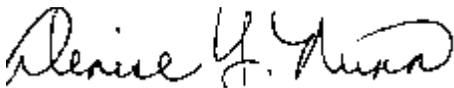


06/14/2023

Frodet Dawisha
Licensing Consultant

Date

Approved By:



06/22/2023

Denise Y. Nunn
Area Manager

Date