



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

February 5, 2024

Shannon McDougal  
N&S Holdings Inc.  
2511 Wixom Road  
Commerce Township, MI 48382

RE: License #: AM630381745  
**Serenity Of Commerce**  
**2511 Wixom Road**  
**Commerce Township, MI 48382**

Dear Shannon McDougal:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- You are to submit documentation of compliance.
- You are to submit a Statement of Correction.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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 (248) 975-5053.

Sincerely,

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

Frodet Dawisha, Licensing Consultant  
Bureau of Community and Health Systems  
3026 W. Grand Blvd  
Cadillac Place, Ste 9-100  
Detroit, MI 48202  
(248) 303-6348

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AM630381745
<b>Licensee Name:</b>	N&S Holdings Inc.
<b>Licensee Address:</b>	2511 Wixom Road Commerce Township, MI 48382
<b>Licensee Telephone #:</b>	(248) 210-8663
<b>Administrator/Licensee Designee:</b>	Shannon McDougal
<b>Name of Facility:</b>	Serenity Of Commerce
<b>Facility Address:</b>	2511 Wixom Road Commerce Township, MI 48382
<b>Facility Telephone #:</b>	(248) 817-1272
<b>Original Issuance Date:</b>	07/13/2017
<b>Capacity:</b>	10
<b>Program Type:</b>	ALZHEIMERS AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 02/01/2024

Date of Bureau of Fire Services Inspection if applicable: 12/05/2023

Date of Health Authority Inspection if applicable: 11/07/2023

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 6

No. of others interviewed 1 Role: licensee designee

- 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.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  No  If no, explain.
- 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:

<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(10) At the time of the resident's admission to the home, a licensee shall require that the resident or the resident's designated representative provide a written health care appraisal that is completed within the 90-day period before the resident's admission to the home. A written health care appraisal shall be completed at least annually. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be obtained not later than 30 days after admission. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department.

During the on-site inspection on 02/01/2024, Resident A did not have their annual 2023 and 2024 health care appraisals completed and Resident B did not have their annual 2022 and 2023 health care appraisals completed.

**REPEAT VIOLATION ESTABLISHED: LSR dated 01/05/2022, CAP dated 01/04/2022**

<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(9) A licensee shall review the written resident care agreement with the resident or the resident's designated representative and responsible agency, if applicable, at least annually or more often if necessary.

During the on-site inspection on 02/01/2024, Resident A did not have their annual 2023 and 2024 resident care agreements completed and Resident B did not have their annual 2022 and 2023 resident care agreements completed.

**REPEAT VIOLATION ESTABLISHED: LSR dated 01/05/2022, CAP dated 01/04/2022**

<b>R 400.14305</b>	<b>Resident protection.</b>
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be

	attended to at all times in accordance with the provisions of the act.
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During the on-site inspection on 02/01/2024, I reviewed the emergency and evacuation procedures for 2023 and during the first, second, third, and fourth quarters, the evacuation times were over eight minutes. There is concern that the seven residents residing at this facility would not evacuate safely during a real fire and/or emergency with only one staff during the midnight shifts.

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(2) Home furnishings and housekeeping standards shall present a comfortable, clean, and orderly appearance.

During the on-site inspection on 02/01/2024, the kitchen cabinet and drawer near the stove were chipped and the cabinets near the sink were scuffed.

<b>R 400.14403</b>	<b>Maintenance of premises.</b>
	(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

During the on-site inspection on 02/01/2024, two of the laundry room tiles were broken.

A corrective action plan was requested and approved on 02/01/2024. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

#### IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

*Frodet Dawisha*

02/05/2024

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Frodet Dawisha  
Licensing Consultant

\_\_\_\_\_  
Date