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GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

February 11, 2025

Nimmy Cherian 14666 Elrond Dr Sterling Heights, MI 48313

RE: License #: AS500418365

**Serenity Homes At Emily Drive** 

43296 Emily Dr

Sterling Heights, MI 48314

Dear Ms. Cherian:

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 (248) 975-5053.

Sincerely,

Kristine Cilluffo, Licensing Consultant

Kristine Cillylo

Bureau of Community and Health Systems

Cadillac Place

3026 West Grand Blvd Ste 9-100

Detroit, MI 48202

(248) 285-1703

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

#### I. IDENTIFYING INFORMATION

License #:	AS500418365
Licensee Name:	Nimmy Cherian
Licensee Address:	14666 Elrond Dr
	Sterling Heights, MI 48313
Licensee Telephone #:	(586) 994-8418
Licensee/Licensee Designee:	Nimmy Cherian
Advistation	Ni. Ol :
Administrator:	Nimmy Cherian
Name of Facility:	Serenity Homes At Emily Drive
Facility Address:	43296 Emily Dr
	Sterling Heights, MI 48314
Facility Telephone #:	(586) 994-8418
Original Issuance Date:	08/13/2024
Capacity:	6
	A 7 15 15 15 15 15 15 15 15 15 15 15 15 15
Program Type:	ALZHEIMERS
	AGED

### **II. METHODS OF INSPECTION**

Date of On-site Inspection(s):	02/10/2025
Date of Bureau of Fire Services Inspection if app	licable: N/A
Date of Health Authority Inspection if applicable:	N/A
No. of staff interviewed and/or observed No. of residents interviewed and/or observed No. of others interviewed  1 Role: LD/Adm	3 5 ninistrator
<ul> <li>Medication pass / simulated pass observed?</li> <li>Reviewed medication passing procedures w</li> <li>Medication(s) and medication record(s) reviewed.</li> </ul>	ith staff.
<ul> <li>Resident funds and associated documents review</li></ul>	☐ No ☑ If no, explain. aration.
Fire safety equipment and practices observe	ed? Yes ⊠ No □ If no, explain.
<ul> <li>E-scores reviewed? (Special Certification Of If no, explain.</li> <li>Water temperatures checked? Yes ⊠ No [</li> </ul>	·,
Incident report follow-up? Yes ⊠ No ☐ If	no, explain.
<ul> <li>Corrective action plan compliance verified?         N/A ☒</li> <li>Number of excluded employees followed-up</li> </ul>	<del>-</del>
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:

MCL 400.713	License required; application; forms; investigation; on-site evaluation; issuance or renewal of license; disclosures; maximum number of persons; stating type of specialized program; issuance of license to specific person at specific location; transferability of license; sale of facility; notice; items of noncompliance; refusal by department to issue or renew license; conditions; unlicensed facility; violation as misdemeanor; penalty; receipt of completed application; issuance of license within certain time period; inspections; report; criminal history and records check; storage of fingerprints in automated fingerprint identification system database; convictions; "completed application" defined.
	(3) Before issuing or renewing a license, the department shall investigate the activities and standards of care of the applicant and shall make an on-site evaluation of the facility. On-site inspections conducted in response to the application may be conducted without prior notice to the applicant. On-site inspections conducted for renewing a license may be conducted within 12 months before the expiration date of the current license without impact on the license renewal date or the license fee. Subject to subsections (9), (10), and(11), the department shall issue or renew a license if satisfied as to all of the following:  (e) The good moral character of the licensee or licensee designee, owner, partner, director, and person responsible for the daily operation of the facility. The applicant is responsible for assessing the good moral character of the employees of the facility. The person responsible for the daily operation of the facility shall be not less than 18 years of age.

	ivaski, did not have workforce background check for Serenity ive. Ms. Glavaski's background check was for Walnut Creek Life
R 400.14205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.
Staff, Soniya Vargh dated 08/21/2019.	nese, did not have current TB test. Ms. Varghese's TB test was
R 400.14208	Direct care staff and employee records.
	(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:  (e) Verification of experience, education, and training.
Staff, Elizabeta Gla	vaski, did not have verification of experience in employee file.
R 400.14208	Direct care staff and employee records.
	(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:  (f) Verification of reference checks.
Staff, Elizabeta Gla file.	vaski, did not have verification of reference checks in employee
R 400.14306	Use of assistive devices.
	(2) An assistive device shall be specified in a resident's written assessment plan and agreed upon by the resident or the resident's designated representative and the licensee.

R 400.14312	Resident medications.
17 400114012	Trooldone modifications.
During the onsite	(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.
location in refriger	•
R 400.14313	Resident nutrition.
	(6) Records of menus, including special diets, shall be kept by the licensee for 1 calendar year.

### IV. RECOMMENDATION

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

Kristine Cillufo

Kristine Cilluffo

Licensing Consultant

02/11/2025