



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 11, 2026

Morgan Bailey
Serenity Homes - North, L.L.C.
747 Tamarack Ave NW
Grand Rapids, MI 49504

RE: License #: AL700382076
Investigation #: 2026A0583040
Serenity Homes - North

Dear Ms. Bailey:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. 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 time frames 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 responsible party and a date.

If you desire technical assistance in addressing these issues, please contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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 (616) 356-0100.

Sincerely,

A handwritten signature in cursive script, appearing to read "Toya Zylstra".

Toya Zylstra, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(616) 333-9702

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL700382076
Investigation #:	2026A0583040
Complaint Receipt Date:	05/28/2026
Investigation Initiation Date:	05/29/2026
Report Due Date:	06/27/2026
Licensee Name:	Serenity Homes - North, L.L.C.
Licensee Address:	747 Tamarack Ave NW Grand Rapids, MI 49504
Licensee Telephone #:	(419) 494-4008
Administrator:	Morgan Bailey
Licensee Designee:	Morgan Bailey
Name of Facility:	Serenity Homes - North
Facility Address:	830 Hayes Street Marne, MI 49435
Facility Telephone #:	(616) 677-6015
Original Issuance Date:	06/02/2016
License Status:	REGULAR
Effective Date:	09/26/2024
Expiration Date:	09/25/2026
Capacity:	20
Program Type:	PHYSICALLY HANDICAPPED, DEVELOPMENTALLY DISABLED, MENTALLY ILL AGED

II. ALLEGATION(S)

	Violation Established?
The facility is "filthy".	Yes
Staff do not assist residents with showering.	No

III. METHODOLOGY

05/28/2026	Special Investigation Intake 2026A0583040
05/29/2026	Special Investigation Initiated - On Site
05/29/2026	APS Referral
06/11/2062	Exit Conference Licensee designee Morgan Bailey

ALLEGATION: The facility is "filthy".

INVESTIGATION: On 05/28/2026 complaint allegations were received from the LARA-BCHS-Complaints. The complaint stated, "The home is filthy trash all over the place, the residents' rooms are filthy, the bathrooms are filthy".

On 05/29/2026 additional complaint allegations were received from Adult Protective Services centralized intake and were screened out for investigation. The complaint stated, "The toilet in the resident bathroom is filthy and the floors are coming up. The cabinets in the bathroom are falling apart and moldy. There is water damage. The bathroom shower is dirty. There is mold around the toilet and in the medication room. There is mold under the kitchen sink".

On 05/29/2026 I completed an unannounced onsite investigation at the facility and interviewed staff Kayla Bailey, Kimberly Docter, Resident A, Resident C, Resident G, and Resident H.

Ms. Bailey stated staff "deep clean" the facility, including residents' bedroom, once weekly. She stated staff routinely vacuum, mop, and sweep floors weekly or more. She stated residents' bed linens are changed at least weekly. She stated there are multiple broken window blinds that will be replaced this week. She stated Resident A often refuses to allow staff to clean his bedroom and staff are currently working with Adult Protective Services to obtain a guardian for Resident A.

Ms. Docter stated staff request residents' permission to clean their bedrooms daily, however many residents refuse. She stated Resident A often refuses to allow staff to clean his bedroom. Ms. Docter stated that third-shift staff are responsible for cleaning bathrooms.

Resident A stated he prefers to clean his own bedroom. He stated he has no concerns regarding his bedroom's cleanliness.

Resident C stated the facility bathrooms are "dirty" and require staff to clean them more often. He stated staff clean his bedroom "once every two weeks" and it consists of vacuuming and changing his linens. He stated his window blinds are broken and have been in disrepair for "a long time".

I attempted to interview Resident F, but she refused.

Resident G stated she shares a bedroom and private attached half bathroom with Resident H. Resident G stated staff have not cleaned their bedroom or bathroom in "six months". She stated "the bathroom grosses us out". She stated staff sweep her floor but fail to dust, mop, or clean other surfaces.

Resident H stated staff have not cleaned her private attached bathroom in approximately six months. She stated the bedroom is swept but staff do not mop it. She stated her bedroom requires more staff cleaning.

While onsite I observed the hallway rugs are dirty and require professional cleaning or replacement. I observed numerous broken window blinds, stained carpet tiles in the sunroom, numerous broken baseboard heaters, and wall baseboards that require replacement. I observed multiple resident bedrooms, and the sunroom carpets require sweeping, vacuuming, and/or mopping. I observed Resident A and Resident F's bedding were soiled and required laundering. I observed Resident G and Resident H's shared bathroom was dirty as evidenced by feces on the toilet seat and dirty flooring, sink, and mirror. I observed the communal bathroom required cleaning as evidenced by fecal matter on the toilet and dirty flooring. I did not observe evidence of mold in the bathroom or in the kitchen.

On 06/11/2026 I completed an exit conference via telephone with licensee designee Morgan Bailey. She did not dispute the finding and agreed to submit a Corrective Action Plan.

APPLICABLE RULE	
R 400.647	Safety and maintenance of premises.
	(1) A facility must be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.
ANALYSIS:	While onsite I observed the hallway rugs are dirty and require professional cleaning or replacement. I observed numerous broken window blinds, stained carpet tiles in the sunroom, numerous broken baseboard heaters, and wall baseboards that require replacement. I observed multiple resident bedrooms,

	<p>and the sunroom carpets require sweeping, vacuuming, and/or mopping. I observed Resident A and Resident F's bedding were soiled and required laundering. I observed Resident G and Resident H's shared bathroom was dirty as evidenced by feces on the toilet seat and dirty flooring, sink, and mirror. I observed the communal bathroom required cleaning as evidenced by fecal matter on the toilet and dirty flooring.</p> <p>A preponderance of evidence indicates that violation of the applicable rule occurred; the facility is unclean, unkept, and requires repairs.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ALLEGATION: Staff do not assist residents with showering.

INVESTIGATION: On 05/28/2026 complaint allegations were received from the LARA-BCHS-Complaints. The complaint stated, "residents don't get showers like they should".

On 05/29/2026 Ms. Bailey stated that staff assist residents with showering at least weekly. She stated Resident A refuses to shower due to his mental health symptoms and Adult Protective Services are in the process of appointing a guardian to assist with his care. She stated that all other residents receive showers at least weekly or more.

Ms. Docter stated that residents are showered approximately twice per week but Resident A refuses to shower and has not showered in approximately once month.

Resident A stated that he does not need staff assistance with showering and can "do my own". He stated he is satisfied with the care provided by staff.

Resident C stated that he does not require staff assistance with showering and displayed appropriate hygiene. He stated he independently showers himself multiple times weekly. He stated he observes staff reminding residents to shower daily and offer help when requested.

I attempted to interview Resident F, but she refused.

Resident G stated staff assist her with showering one to two times daily. She stated she is happy with the level of personal care provided. She displayed appropriate hygiene.

Resident H stated she does not require staff assistance with showering and she

is happy with the level of personal care provided by staff. She stated she observes staff reminding other residents to shower and help when requested. She displayed adequate hygiene.

On 06/11/206 I completed an exit conference via telephone with licensee designee Morgan Bailey. She agreed with the finding.

APPLICABLE RULE	
R 400.681	Resident rights; licensee responsibilities.
	(1) A resident shall be treated with dignity and respect, free from exploitation, and protected and safe.
ANALYSIS:	<p>Ms. Bailey stated that staff assist residents with showering at least weekly. She stated that all other residents receive showers at least weekly or more.</p> <p>Ms. Docter stated that residents are showered approximately twice per week.</p> <p>Resident G stated that staff assist her with showering one to two times daily. She stated that she is happy with the level of personal care provided.</p> <p>A preponderance of evidence does not support that violation of the applicable rule occurred.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

IV. RECOMMENDATION

Upon receipt of an acceptable Corrective Action Plan, I recommend no change to the license.



06/11/2026

Toya Zylstra, Licensing Consultant

Date

Approved By:



06/11/2026

Jerry Hendrick, Area Manager

Date

