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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY & HEALTH SYSTEMS

Shelly Edgerton
DIRECTOR

July 31, 2017

Serenity Point Recovery, SA0700123
Derry Hallmark, Executive Director
15140 16th Avenue
Marne, MI 49435

SUBJECT: Substance Use Disorder Licensure Standard Survey Findings for Serenity Point Recovery

Dear Mr. Hallmark:

A standard state licensure inspection was conducted on May 10, 2017 at Serenity Point Recovery pursuant to Michigan Public Health Code, Act 368 of 1978, Part 62, Section 333.6238, which obligates the department to make at least one visit to each licensed health facility or agency every three years for survey and evaluation for the purpose of licensure.

Participants included:

- Derry Hallmark, Executive Director
- Jag Singh, Corporate Compliance Officer
- Kelly Moore, Regulatory Officer, LARA, State Licensing Section
- Jim Hoyt, Regulatory Officer, LARA, State Licensing Section

The survey identified non-compliance with the following requirements:

R325.14102 Patient Care

"Outpatient care" means scheduled, periodic care, including diagnosis and therapy, in a nonresidential setting.

On 05/10/2017, it was noted that the residential detox and residential patients were not separated from the intensive outpatient and partial hospitalization program patients.

On 06/01/2017, the program submitted a plan to address the non-compliance by indicating that the building will be divided by shutting two double doors with keypad for staff to pass through and signage will be posted. In addition, there will now be a separate access to the cafeteria for PHP and IOP patients from the residential patients. PHP and IOP patients will have a new nursing station on their side of the building, separated from residential patients. Residential patients will also have a new

recreations area that will also ensure that PHP and IOP patients remain separated from residential patients. Actual compliance will be verified at the time of the next licensure survey.

R325.14925 Physician Review

The physician shall review and countersign all medical evaluations, diagnoses, and treatment records at least once every 72 hours.

On 05/10/2017 it was noted that the records were not reviewed and countersigned at least once every 72 hours.

On 06/01/2017, the program submitted a plan to address the non-compliance of review and countersigning by indicating that the doctor will start to see client every three days and that all medical charts will be reviewed and signed by the doctor. Actual compliance of the physician record review and countersigning will be verified during a follow-up survey.

Additionally under R325.14925, the site inspection revealed that there were patient files presenting numerous urinalysis that revealed positive results for illicit drugs for extended periods of time while the patients were active in the program. The program appears to lack any policy or procedure that documented how the situation was investigated and how patients with positive urinalysis results are addressed.

On 06/01/2017, the program submitted a plan to address this issue by indicating the following: If a patient is still testing positive for substance, the physician on duty, the Clinical Director, Executive Director, Deputy Executive Director, Director of Nursing and Head of Security will be informed. The results will be documented in the client's medical chart and there will be an investigation conducted as to why the patient remains to test positive. Any orders or steps that were taken in the investigation and the results from the investigation will be documented in the client's medical record including but not limited to physicians orders, counseling sessions, client interview, room search, and belongings search.

In R325.14101(h), "Detoxification treatment" means a medically acute or subacute, systematic reduction of the amount of a drug in the body, or the elimination of a drug from the body concomitant with supportive treatment services. The positive urinalysis results by patients while enrolled in this program fails to meet the requirements for a residential detoxification program. Thus, the program is not in compliance with R325.14925 as it relates to program and physician oversight of patient evaluation, diagnosis, and treatment records.

Based on the state licensure inspection findings and the above noted deficiencies, Serenity Point Recover was not in substantial compliance with the MCL 333.6201 through MCL 333.6251 and/or the Michigan Administrative Rules R325.14101 through R325.14928 as applicable, at the time of the site visit and a follow up survey will be conducted.



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