

Tony Evers  
Governor

Kirsten L. Johnson  
Secretary



**State of Wisconsin**  
**Department of Health Services**

**DIVISION OF QUALITY ASSURANCE**

BUREAU OF ASSISTED LIVING  
SOUTHEASTERN REGIONAL OFFICE  
819 N 6TH ST ROOM 609B  
MILWAUKEE WI 53203-1606

Telephone: 414-227-2005  
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TTY: 711 or 800-947-3529

August 20, 2025

**ELECTRONIC MAIL**

SOD#IF9711

**NOTICE and ORDER**

**NOTICE OF VIOLATION**

**ORDER NOT TO ADMIT NEW OR ADDITIONAL RESIDENTS - EXTENDED**

**NOTICE OF SPECIAL ORDERS**

Moneek Cannaday  
2423 W. Custer Ave.  
Milwaukee, WI 53209

C/O Licensee: Serenity Garden Adult Family Home LLC

**Re:** Serenity Garden Adult Family Home (0019385)  
2423 W. Custer Ave.  
Milwaukee, WI 53209

Dear Moneek Cannaday:

This letter is a statutory NOTICE of VIOLATION and imposed ORDER on the licensee of Serenity Garden Adult Family Home, located at 2423 W. Custer Ave., Milwaukee, and sets forth appeal rights, if any. This regulatory action is taken by the Department of Health Services (Department) pursuant to Wis. Stat. § 50.033(2), and Wis. Admin. Code § DHS 88.

**NOTICE OF VIOLATION**

On August 4, 2025, a complaint investigation was concluded for Serenity Garden Adult Family Home by the Division of Quality Assurance, Bureau of Assisted Living, to determine if the above-referenced facility was in substantial compliance with Wis. Stat. ch. 50 or Wis. Admin. Code ch. DHS 88, or both, which set forth requirements for the administration and operation of an adult family home (AFH). The Department is issuing Statement of Deficiency (SOD) #IF9711 for violations of Wis. Stat. ch. 50 or Wis. Admin. Code ch. DHS 88, which establish the grounds for this action. SOD #IF9711 is enclosed.

**ORDER NOT TO ADMIT NEW OR ADDITIONAL RESIDENTS – EXTENDED**

Based on the results of the Department's investigation and pursuant to authority provided in Wis. Stat. § 50.02(2)(am)2., and Wis. Admin. Code § DHS 88.03(6)(g)2.f., the Department of Health Services **hereby extends** the **order** issued on January 7, 2025, with Statement of Deficiency QW9V12 that **Serenity Garden Adult Family Home Not Admit any New or Additional Residents.**

**SPECIAL ORDERS**

Based on the results of the Department's investigation, and pursuant to Wis. Stat. § 50.02(2)(am)2., **EFFECTIVE UPON RECEIPT OF THIS NOTICE and ORDER**, the Department of Health Services **HEREBY ORDERS** that **Serenity Garden Adult Family Home:**

1. Pursuant to Wis. Admin. Code § DHS 88.03(6)(g)2.e., WITHIN 7 DAYS of receipt of this notice, the licensee shall provide the legal representative and case manager (if any) for each current resident with a copy of Statement of Deficiency IF9711 and a copy of this Notice and Order letter. The licensee shall retain evidence, acceptable to the department, to verify compliance with Order #1. Acceptable documentation will be a signed, certified mail receipt or a verification letter or email from the legal representative and case manager. Required evidence will be made available to the department representatives upon request.

\* \* \*

If you have questions about this letter, please contact MaryBeth Hoffman Assisted Living Regional Director, at (414)227-2005.

Sincerely,

A handwritten signature in black ink, appearing to read "Kenneth Brotheridge", with a long horizontal line extending to the right.

Kenneth Brotheridge, Assisted Living Director  
Bureau of Assisted Living  
Division of Quality Assurance

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Serenity Garden Adult Family Home  
August 20, 2025

Enclosure  
KB/jw

cc: Ombudsman, Milwaukee County  
Aging/Disability Resource Center, Milwaukee County  
Milwaukee County Human Services  
Waiver Agencies  
Division of Medicaid Services  
Disability Rights Wisconsin