



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

July 5, 2023

Becky Howard
Monark Grove Clarkston
7373 Sashabaw Rd.
Clarkston, MI 48348

RE: License #: AH630413772
Monark Grove Clarkston
7373 Sashabaw Rd.
Clarkston, MI 48348

Dear Ms. Howard:

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 action plan, a regular license will be issued. Please review the enclosed documentation for accuracy and contact me with any questions. If I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in cursive script that reads "Aaron Clum".

Aaron Clum, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(517) 230-2778

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

I. IDENTIFYING INFORMATION

License #:	AH630413772
Licensee Name:	Clarkston Senior Living LLC
Licensee Address:	Ste 200 101 W. Big Beaver Road Troy, MI 48084
Licensee Telephone #:	(248) 680-7180
Administrator/Authorized Representative:	Becky Howard
Name of Facility:	Monark Grove Clarkston
Facility Address:	7373 Sashabaw Rd. Clarkston, MI 48348
Facility Telephone #:	(248) 954-1006
Original Issuance Date:	12/22/2022
Capacity:	83
Program Type:	AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/06/2023

Date of Bureau of Fire Services Inspection if applicable: 10/22/2022

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 06/06/2023

No. of staff interviewed and/or observed 10

No. of residents interviewed and/or observed 20

No. of others interviewed N/A Role

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. Facility does not maintain resident funds
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s: SI#2023A1027033: 20173a(2),1924(1)(b); SI#2023A1027044: 1942(3)(a)-(h), 1932(1), 1932(5), 1923(2)
- Number of excluded employees followed up? N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:	
R 325.1922	Admission and retention of residents.
	(5) A home shall update each resident's service plan at least annually or if there is a significant change in the resident's care needs. Changes shall be communicated to the resident and his or her authorized representative, if any.
For Reference: R 325.1901	Definitions
	(21) "Service plan" means a written statement prepared by the home in cooperation with a resident and/or the resident's authorized representative or agency responsible for a resident's placement, if any, and that identifies the specific care and maintenance, services, and resident activities appropriate for each individual resident's physical, social, and behavioral needs and well-being and the methods of providing the care and services while taking into account the preferences and competency of the resident.
<p>Upon request of service plans for Residents A, B and C, administrator Becky Howard provided completed service plans for Residents A and C and a document titled <i>Health and Service Evaluation</i> for Resident B. Ms. Howard stated the Health and Service Evaluation is used to assess a resident prior to admission and then used to create the resident service plan. Ms. Howard stated Resident B had been admitted to the facility recently and that a service plan had not yet been completed Resident B. Based on the finding, the facility is not in compliance with this rule.</p>	
R 325.1932	Resident medications.
	(2) Prescribed medication managed by the home shall be given, taken, or applied pursuant to labeling instructions, orders and by the prescribing licensed health care professional.

<p>Prior to the onsite, the department received a complaint alleging that on 5/08/2023, Resident A was not administered two doses of prescribed Metformin and that on 5/09/2023, Resident A was not administered prescribed blood pressure medication. Review of Resident A's medication administration record (MAR) for May 2023 confirmed that on 5/08/2023 Resident A did not receive two doses of Metformin and that on 5/09/2023, Resident A did not receive her prescribed blood pressure medication, AMLODIPINE. Additionally, review of the MAR revealed that on 5/10/2023, Resident A Did not receive at least one does of prescribed ATORVASTIN, used to lower cholesterol. Based on the findings the facility is not in compliance with this rule.</p>	
<p>Repeat Rule Violation [Reference Special Investigation #2023A1027044 citation under R 325.1932(1) which has been changed to R 325.1932(2)]</p>	
R 325.1953	Menus.
	<p>(1) A home shall prepare and post the menu for regular and therapeutic or special diets for the current week. Changes shall be written on the planned menu to show the menu as actually served.(2) A home shall maintain a copy of all menus as actually served to residents for the preceding 3 months.</p>
<p>Upon request, the facilities executive chef, Ramon Santiago, was unable to provide a copy of menus as actually served for the preceding 3 months. When interviewed, Mr. Santiago stated he was not aware these records were required to be maintained after initial use. Based on the findings, the facility is not in compliance with this rule.</p>	
R 325.1954	Meal and food records.
	<p>The home shall maintain a record of the meal census, to include residents, personnel, and visitors, and a record of the kind and amount of food used for the preceding 3-month period.</p>
<p>Upon request, Mr. Santiago was unable to provide a record of the kind and amount of food used for the preceding 3-month period. Based on the findings, the facility is not in compliance with this rule.</p>	

IV. RECOMMENDATION

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

Daron L. Clum

7/05/2023

Date

Licensing Consultant