



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

February 13, 2025

Arleen Savaya
Varishy Senior Living, LLC.
P.O Box 80225
Rochester, MI 48308

RE: License #: AS630391506
Investigation #: 2025A0612011
Varishy Senior Living

Dear Ms. Savaya:

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 feel free to 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 (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Johnna Cade". The signature is written in black ink and is positioned below the word "Sincerely,".

Johnna Cade, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd. Ste 9-100
Detroit, MI 48202
Phone: 248-302-2409

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630391506
Investigation #:	2025A0612011
Complaint Receipt Date:	01/28/2025
Investigation Initiation Date:	01/29/2025
Report Due Date:	03/29/2025
Licensee Name:	Varishy Senior Living, LLC.
Licensee Address:	1527 John R Rd Rochester Hills, MI 48307
Licensee Telephone #:	(248) 470-3559
Administrator:	Arleen Savaya
Licensee Designee:	Arleen Savaya
Name of Facility:	Varishy Senior Living
Facility Address:	1527 John R Rd Rochester Hills, MI 48307
Facility Telephone #:	(248) 470-3559
Original Issuance Date:	02/12/2019
License Status:	REGULAR
Effective Date:	08/12/2023
Expiration Date:	08/11/2025
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED TRAUMATICALLY BRAIN INJURED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Resident A has dental issues that are not being addressed and he is not being given foods he can eat.	No
Resident A has a black eye, he alleged that it was caused by direct care staff Tyrone Jackson.	No
Resident A was not given his daily allowance.	No
Additional Findings	Yes

III. METHODOLOGY

01/28/2025	Special Investigation Intake 2025A0612011
01/29/2025	Special Investigation Initiated – Telephone I placed a telephone call to assigned Adult Protective Services (APS) worker, Izabella Nizinski to coordinate.
01/29/2025	APS Referral Referral received from Adult Protective Services (APS).
01/30/2025	Inspection Completed On-site In collaboration with APS worker Izabella Nizinski, I completed an unannounced onsite investigation. I interviewed Resident A and Resident B.
01/31/2025	Contact - Telephone call made Telephone interviews completed with direct care staff Shawndrea Carter and Amazing Grace Homecare Operations Manager Susan Savaya.
02/02/2025	Contact - Document Received I received requested facility documentation sent via text message from Amazing Grace Homecare Operations Manager Susan Savaya.
02/03/2025	Contact - Telephone call made Telephone interviews completed with direct care staff Tyrone Jackson, Ron Biles, and licensee designee Arleen Savaya.

02/03/2025	Contact - Document Received APS worker Izabelle Nizinski emailed me a copy of her interview with Resident A's guardian.
02/04/2025	Contact - Document Received I received requested facility documentation sent via email from licensee designee Arleen Savaya.
02/04/2025	Contact - Face to Face In collaboration with APS worker, Ms. Nizinski I completed an unscheduled onsite investigation at Resilire Neuro. I interviewed Resident C's Resilire Neuro case manager Alexandria Pfaendtner.
02/04/2025	Contact - Telephone call made Telephone interview completed with Resident C's guardian.
02/05/2025	Contact - Face to Face In collaboration with APS worker, Ms. Nizinski I completed an unscheduled onsite investigation at Resilire Neuro. I interviewed Resident C.
02/05/2025	Contact - Telephone call made Telephone interview completed with Jinesh Chheda.
02/05/2025	Contact - Document Received I received requested facility documentation sent via email from Jinesh Chheda.
02/13/25	Exit Conference I placed a telephone call to licensee designee Arleen Savaya to conduct an exit conference.

ALLEGATION:

- **Resident A has dental issues that are not being addressed and he is not being given foods he can eat.**
- **Resident A has a black eye, he alleged that it was caused by direct care staff Tyrone Jackson.**
- **Resident A was not given his daily allowance.**

INVESTIGATION:

On 01/28/25, I received a referral from Adult Protective Services (APS). The assigned APS worker is, Izabella Nizinski. The referral indicated, on 01/27/25, Resident A presented with a black right eye. Resident A was tearful and is afraid to return to the

group home. This is the second time he has had a black eye in a month. Direct care staff, Tyrone Jackson was the cause of both black eyes by hitting him. Resident A has funds for cigarettes and groceries. The group home will hold what Resident A can have. Resident A went to his day program without anything, as he was not given his daily allowance. Resident A's bottom teeth rotted and fell out of his mouth. Resident A has dental issues that are not being addressed and he is not being given foods he can eat. Resident A has a Traumatic Brain Injury. Resident A has a guardian who is his son.

On 01/29/25, I initiated my investigation by placing a telephone call to assigned APS worker, Izabella Nizinski to coordinate. Ms. Nizinski stated she went to the home on 01/28/29 and was denied entry. The staff on shift did not know the protocol for an APS visit and directed her to speak to their supervisor, Susan Savaya. Ms. Nizinski and I planned to conduct an unannounced onsite investigation the following day, 01/30/25.

On 01/30/25, in collaboration with APS worker Izabella Nizinski I completed an unannounced onsite investigation. There were two staff on shift Shawndrea Carter and Ron Biles. The staff answered the door, we identified ourselves and showed our badges. The staff denied entry to the home and advised us to call their supervisor, Susan Savaya. I placed a telephone call to Susan and explained the nature of the onsite investigation. Susan confirmed that Resident A was home. The telephone call ended, and Ms. Nizinski and I entered the home. I interviewed Resident A and Resident B. The staff on shift, Mr. Biles and Ms. Carter stated that they were instructed by Susan to not provide us with any information or answer any questions. Mr. Biles declined to provide his name.

On 01/30/25, I interviewed Resident A. At the time of this interview, I observed slight bruising to Resident A's right eye. Resident A stated direct care staff Mr. Jackson bosses him around, pushes him, and overpowers him. Resident A stated at 8:00 pm on Friday, Resident C was in the living room being loud. Resident A was sitting in a chair in the living room, Mr. Jackson kicked the feet of the chair, and he flew out of it. Then, Mr. Jackson pushed him to his bedroom. When he was in his bedroom Mr. Jackson pushed him again causing him to fall on to the floor near his dresser. Resident A stated he must have hit his eye while falling. Resident A stated this is not the first time Mr. Jackson has hit him, it happened another time while he was living at a different home in Sterling Heights, MI. Resident A stated when this happened the first time in Sterling Heights he made a police report, but nothing came of the complaint.

Resident A stated he has bad teeth since childhood. He received upper and lower dentures from Aspin Dental. Resident A explained that when he wears his lower dentures food gets stuck underneath them and it is embarrassing for him to have to take them out at the kitchen table and therefore, he does not wear them. Resident A wears his top dentures and reports no issues. Resident A stated he has a dental appointment on 02/22/25. Resident A stated he eats whatever he can chew, usually he eats applesauce because his gums are sore. On occasion he will also eat mashed potatoes. Resident A stated his guardian puts money on his pay pal card for personal spending. However, the staff informed his guardian that he was not taking his medications and as

a result his guardian has stopped putting money on his pay pal card. He does not have any money currently. Resident A stated he has started taking his medication again and he has been taking them daily for about one week. Resident A stated he often refuses his medications because he has been taking them a long time.

On 01/30/25, I interviewed Resident B. Resident B stated he has lived in this home for eight months. He works Monday – Thursday so he is not at home during the day. Resident B stated he has known Mr. Jackson for about two years. Prior to living in this home, he lived at a home in Sterling Heights, Mr. Jackson worked at that home also. Resident B stated he has never had any issues with Mr. Jackson, he treats him well. Resident B stated he cannot recall any issues going on at the home Friday night however, he remarked that Resident A gets an attitude whenever he is without cigarettes. Resident B stated he noticed that Resident A had a black eye and when he asked him what happened Resident A said Mr. Jackson pushed him and he fell beside his bed. Resident B stated he enjoys the food that is served in the home. He receives \$75 a week for groceries, he makes a list and sometimes goes to the store with staff to shop. Resident B stated Resident A eats dinner however, he sometimes complains because he does not have bottom teeth. Resident B stated he takes his medication every day at morning and at night. Staff take the residents to their doctors' appointments as scheduled. Resident B said that he has a dentist appointment next week.

On 01/31/25, in collaboration with APS worker, Ms. Nizinski I interviewed direct care staff Shawndrea Carter via telephone. Ms. Carter stated she began her employment in January 2025. She works from 8:00 am – 6:00 pm or 7:00 pm, Tuesday – Friday. Ms. Carter stated she cannot recall what day it was, but she ended her shift one evening and when she returned the next morning Resident A had a black eye that was not present the day before. Ms. Carter stated before Resident A left for program that morning, she asked him what happened, and he said there was an incident with a staff. Ms. Carter stated there was nothing written about an incident in the staff log and she does not know who worked the day before. Ms. Carter stated she typically works with Mr. Jackson or Heather (last name unknown). Ms. Carter does not suspect that any staff would have caused Resident A's black eye. Ms. Carter stated she is unaware of how Resident A gets personal spending money. Ms. Carter stated if Resident A has a personal spending need, she informs management. Ms. Carter stated she does not complete the grocery shopping. Ms. Carter stated Resident A wears top dentures, but not bottom dentures. He has made complaints about his gums being sore. Ms. Carter stated Resident A enjoys eating fruit, meatloaf, toast, and eggs.

On 01/31/25, in collaboration with APS worker, Ms. Nizinski I interviewed Amazing Grace Homecare Operations Manager Susan Savaya via telephone. Susan stated she is the operations manager of Amazing Grace Homecare. Since November 2024, Amazing Grace Homecare has provided 24/7 staffing to the residents of Varishy Senior Living. Susan stated when APS and Licensing arrived at the home for the unscheduled onsite investigation initially entry was denied out of extra precaution. Susan spoke about a recent incident in the neighborhood where a crime was committed by someone posing

as a DTE worker. As such, the home is taking extra security precautions. Susan stated she did not advise the staff to not share information with APS and Licensing, she told them to cooperate and provide any requested information.

Susan stated on 01/23/25, she was informed by Resident A's program that Resident A had a black eye. She notified Resident A's guardian on 01/23/25 at 11:37 am. Then, on Monday 01/27/25 at 9:48 am she notified Resident A's case manager. Susan stated on Thursday evening there was an incident with Resident C. He was yelling, screaming and saying he was going to run away. Direct care staff Mr. Jackson diffused the situation. Resident C has a history of self-harm. Susan explained that Resident A and Resident C are friends, and she suspects that Resident A is picking up Resident C's behaviors to get attention. Initially, Susan stated there should be an incident report regarding Resident A's black eye. Then, she stated there was not an incident to report as Resident A never reported to staff at the home that Mr. Jackson hit him. Susan explained that when Resident A is manic, he will refuse his medications and make allegations against staff. In the past, Resident A has even made allegations against Susan. Susan stated two weeks ago Resident A told her he was going to fight the biggest guy here. Susan notified Resident A's case manager, guardian, and psychiatrist. Resident A's psychiatrist made a medication change adjusting his Haldol from being administered at night to the morning. Susan stated she has worked with Mr. Jackson for five years; she has no concerns with the way that he interacts with residents. Susan stated Resident A believes that Mr. Jackson has control over where he lives and therefore, he makes allegations against him in hopes he will be moved to his son's.

Susan stated Resident A has a history of destroying and hiding his dentures. When he wants to, he will put them in. Resident A sees a Periodontist, Resident A has an appointment on 02/11/25. Susan stated it is not uncommon for Resident A to say that he is not being fed. Resident A is not on a restricted diet. Resident A enjoys eating cream of wheat and oatmeal however he will also request hamburgers from Burger King and eat it without any issues.

Susan stated Resident A's guardian puts money on a pal pay card for him. Resident A also receives a paycheck from his work program. Resident A receives \$75 a week for groceries. Resident A makes a list and staff do the shopping for him. Resident A buys his own cigarettes, using his pay pal card, but the home does keep some for emergencies.

On 02/03/25, in collaboration with APS worker, Ms. Nizinski I interviewed direct care staff Tyrone Jackson via telephone. Mr. Jackson stated he is the house manager at Amazing Grace Home Care he has been employed with this company for almost five years. Mr. Jackson began working at Varishy Senior Living three to four months ago. Mr. Jackson stated that he did not see Resident A's black eye. On Thursday, 01/23/25, Mr. Jackson received a telephone call from direct care staff Ron Biles who said someone from Resident A's program told him that Resident A has been saying things and making untruthful statements about Mr. Jackson. Mr. Jackson stated he did not see

Resident A again until Sunday, 01/26/25. When he returned to work, he asked Resident A about his black eye and Resident A said, "you did this to me." Mr. Jackson remarked, Resident A has made allegations like this before when he is not taking his medication. Mr. Jackson stated there was not an incident report written regarding Resident A's black eye because there was no incident witnessed by staff. Mr. Jackson stated he called his boss, Susan Savaya, about Resident A's black eye. Susan indicated that she would inform Resident A's case manager and his guardian.

Mr. Jackson stated on Wednesday, 01/22/25, he relived direct care staff Shawndrea Carter at 7:00 pm. Ms. Carter said that Resident C was over stimulated, and it was starting to agitate another resident. Mr. Jackson stated when he walked in Resident C was in the living room punching himself in the head. Mr. Jackson calmed him down. Resident A was also in the living room. Mr. Jackson sent the other resident to their bedrooms, and he was able to deescalate the situation with Resident C. After that Mr. Jackson administered evening medications. Mr. Jackson said when he asked Resident A to go to his bedroom Resident A went without any issue. Mr. Jackson denied putting his hands on Resident A without his consent. Mr. Jackson denied hitting, punching, and/or pushing Resident A. Further, Mr. Jackson denied witnessing Resident A fall and/or trip. Mr. Jackson stated he has no concern that another staff hurt Resident A or caused injury to Resident A. Mr. Jackson stated that he did not see a mark on Resident A when he was passing medications that evening. Resident A refused his evening medications. Mr. Jackson stated when Resident A is not taking his medication, he acts out of character.

Mr. Jackson stated Resident A's dentures bother him and therefore he does not wear them. Resident A has a dental appointment at 02/11/25. Mr. Jackson stated Resident A eats soft foods such as clam chowder, toast and honey. Mr. Jackson stated there is a weekly food menu that is kept at the house, direct care staff Ms. Carter and Crystal (last name unknown) typically prepare the meals throughout the day. The food is purchased for Resident A. Resident A makes a grocery list and Mr. Jackson goes to the store to get the groceries. Mr. Jackson stated the residents receive \$75 a week for shopping which includes purchasing personal items such as adult briefs. Mr. Jackson stated Resident A also gets additional funds from his guardian, that is given at his guardian's discretion. Mr. Jackson stated Resident A buys his own cigarettes, the home also keeps extra cigarettes on hand for him. Resident A has a marijuana pen which is kept at the group home for him. He has been smoking marijuana pens for the past 8+ months. At first Resident A was keeping the pen on his person, but he wanted to share it with others. Now, he must give the pen back to the staff after each use to be stored in the locked medication cabinet. Mr. Jackson stated Resident A has refused to eat when he is not taking his medications. Resident A has been saying that he wants to go back home with his son. Resident A has said that he does not want to stay there which Mr. Jackson has made others aware of. Mr. Jackson explained that Resident A feels that he has the authority over his placement, and he feels that is why his anger is directed towards him.

On 02/03/25, in collaboration with APS worker, Ms. Nizinski and I interviewed direct care staff Ron Biles via telephone. Mr. Biles stated on Thursday, 01/23/25, at 7:00 am

he relieved Mr. Jackson from shift. Mr. Biles stated Resident A was fully dressed when he arrived on shift. Resident A had his coat on, and a skull cap pulled down. Mr. Biles drove Resident D to workshop. Resident A gets picked up by CommuniCare. Mr. Biles stated while at workshop one of the clients asked him what happened to Resident A's face. Resident A took his hat off and he had a black mark around his face. Resident A told him that Mr. Jackson struck him. Then he said he does not know if he fell and hit the ground or if he was hit. Mr. Biles stated that he rarely works with Mr. Jackson, they usually just relieve each other from shift. They only spend about 15 - 20 minutes together. Mr. Biles has never observed Mr. Jackson being aggressive with any of the residents. Mr. Biles stated that he did not know what was going on at the home the day before. He heard that another resident was having a "meltdown," but he does not know what took place that night. Mr. Biles stated the residents get into it with each other. Mr. Biles stated he has seen Resident A create a weapon from a windshield wiper off his vehicle. Resident A has also hit/ slapped himself in the head a couple of times. Mr. Biles stated Resident A has been taking his medications for the last two weeks. However, when Resident A gets mad at his son, he will not take his medication. Mr. Bile stated Resident A also uses a marijuana pen and marijuana gummies that must be used under staff supervision.

Mr. Biles stated Resident A eats whatever he wants to eat. There have been times when Resident A will refuse to eat if he is not getting something he wants. Mr. Biles stated he cooks whatever Resident A requests. Mr. Biles stated Resident A has said that his bottom teeth are uncomfortable, but he has only worn them one time. He also does not like to wear his eyeglasses because he does not think that they help, but he has only worn them one time. Mr. Biles stated Resident A's guardian sends him money to a pay pal card weekly. In addition, Resident A receives a paycheck from his job. Mr. Biles stated grocery shopping is done once a week. Resident A makes a list, and Mr. Jackson does the shopping. The shopping budget is between \$375-\$500.

On 02/03/25, APS worker Izabelle Nizinski emailed me her interview with Resident A's guardian. In summary, Resident A's guardian reported the following in an interview with Ms. Nizinski on 02/03/25:

APS called Resident A's guardian who is his son. Resident A's guardian spoke with Resident A on Facetime, and he had a black eye. A few weeks ago, he found out from Susan that things were taking a turn, Resident A was not taking his medication, and his demeanor was off. It is random when he does this. He has a difficult time expressing his feelings and it is difficult to figure out what is the underlying issues. Resident A tends to stay to himself, not take his medication, his judgement and cognitive thinking are challenging, and he becomes very vengeful and violent. Resident A is aware of what he is doing, and he is making that call. He does not punch himself in the face normally. Resident A's guardian stated, "the man is capable of doing anything that he puts his mind to. If he says that he will start a fire he is not messing around." Resident A has not mentioned to his guardian that anything was going on at the house or that he was unhappy. Resident A said that he does not get his cigarettes/marijuana as

fast as he wants from the staff. His doctor and case manager are aware that Resident A uses marijuana. Resident A's guardian prefers that Resident A uses the pen and does not have a lighter due to previously trying to burn down houses.

Resident A's guardian believes that Susan informed him about an event of another resident, who was hitting himself, and then potentially Resident A stepped in, and Resident A was trying to make the other residents' problem his problem and the next day he got up and he had a black eye. They do not know how it occurred if he fell or anything else. Resident A's guardian asked about the cameras in the home. She said that the cameras are only live stream, they do not record. Resident A's guardian cannot recall any additional issues. Resident A's guardian does not have concerns with Resident A being in the home. The staff keep a very cool head even when Resident A is calling the staff names including racial slurs. Mr. Jackson has picked up Resident A from Resident A's guardian's home and he has not had any issues getting in the car and did not say that he is afraid or other negative comments. Mr. Jackson has not picked up Resident A from Resident A's guardian's home in the last seven months. However, he does transportation for Resident A's appointments. Resident A only wears the top dentures, he claims that someone stole his bottom dentures. They found them in a bag that he left at his house, he still does not wear them. Resident A said that they are uncomfortable, but it has been a while since he mentioned it. Resident A did not complain about the dentures during the holiday. Resident A is a picky eater, and he is losing his tastebuds potentially due to his medication. Resident A will cake salt on food, he wants to eat burgers, he loves frozen stuffed chicken, broccoli, chicken cordon blue, and clam chowder. Resident A's guardian made his grandma's goulash and Resident A said that it tasted like "shit." Resident A's monthly income is around \$1200. Resident A was negative \$500 when Resident A's guardian took over the responsibility. He gives him money for clothing and other items. The auto owner's insurance pays for Resident A to stay at the home. It has been about two years that they may have not paid for the home. Resident A's case worker, Erika Cash, schedules and attends his medical appointments. She is not paid out of Resident A's funds. Resident A's guardian stated Susan has communicated with him 90% off the time and the other 10% he communicates with the staff. He feels that the staff is doing the best that they can for Resident A and the staff is the best that he has worked with thus far.

On 02/04/25, in collaboration with APS worker Ms. Nizinski, I completed an unscheduled onsite investigation at Resilire Neuro in an attempt to interview Resident C. I was advised that Resident C did not come to program today. While onsite I interviewed Resident C's Resilire Neuro case manager Alexandria Pfaendtner. Ms. Pfaendtner stated Resident C has been with this company since 2012, he originally worked at their Saginaw location. Ms. Pfaendtner stated Resident C is typically truthful however his memory can be distorted, and he can become confused. Ms. Pfaendtner stated Resident C has a history of self-harming behaviors, he threatens to elope, he is sexually motivated and seeks attention from women. Ms. Pfaendtner stated Resident C

had a recent medication change and they have noticed an increase in his attention seeking behaviors and self-harm. Ms. Pfaendtner stated Resident C has not mentioned Resident A or any of his housemates.

On 02/04/25, in collaboration with APS worker Ms. Nizinski, I interviewed Resident C's guardian via telephone. Resident C's guardian stated she was on the phone while Resident C was having a behavior at the home, he was hitting himself in the head with his hand. He hung up and a staff called back and said that Resident C had knuckle bumps on his head. They asked her if she wanted Resident C to be taken to the hospital. Resident C's guardian said no and advised to give Resident C ice. Resident C's guardian stated Resident C is always clean, safe, and his medications are given as prescribed. Resident C's guardian had no information to provide regarding Resident A and the allegations being investigated.

On 02/05/25, in collaboration with APS worker Ms. Nizinski, I completed an unscheduled onsite investigation at Resilire Neuro. I interviewed Resident C. Resident C stated Mr. Jackson "sits on a throne" he is the boss. Resident C stated Mr. Jackson treats him and his roommates with respect. When asked about Resident A's black eye, Resident C stated Resident A looked like a racoon, for a day or so. Resident A said that he slipped and blamed Mr. Jackson. Resident C remarked, "Tyrone would not stoop to that level." Resident C said he did not see anything happen however, while he was eating breakfast, he heard Resident A yell "Tyrone I am going to get you fired." Resident C remarked, Resident A makes statements about getting staff fired every week. Resident C stated the home has good food he eats soul food and steak. Resident C stated he chooses what he wants to eat, and Mr. Jackson does the grocery shopping. Resident C stated he takes his medications every day, but Resident A does not, he often refuses.

I reviewed the following relevant documentation:

- January 2025 staff schedule.
- Resident A's January 2025 Medication Administration Record (frequent refusals documented.)
- Daily Documentation Log (no resident name, caregiver name, time or date included.)
- Incident Report dated 01/23/25, written by Susan Savaya regarding Resident A.
- Three receipts from January 2025 (Sams Club, Shell, and Meijer) showing purchases for food and cigarettes.
- Clinical Report for Prosthodontic & Implant Consultants appointment on 02/11/25. Resident A needs lower complete denture.

APPLICABLE RULE	
R 400.14305	Resident protection.
	(3) A resident shall be treated with dignity and his or her personal needs, including protection and safety, shall be

	attended to at all times in accordance with the provisions of the act.
ANALYSIS:	Based on the information gathered during this investigation there is insufficient information to conclude Resident A's personal needs, including dental care and nutrition have not been attended to. Resident A said that he has bad teeth since childhood. He has upper and lower dentures. Resident A stated he wears his top dentures, but he chooses not to wear his bottom dentures. Resident A's guardian corroborated Resident A's testimony. Resident A attended his scheduled dental appointment on 02/11/25, where it was determined that he needs a new lower complete denture. Resident A is not on a special diet. Resident A's guardian stated Resident A is a picky eater and may be experiencing a change in his tastebuds. It was consistently reported by direct care staff and Resident A's guardian that Resident A has access to foods he can eat, and he choose when and what he wants to eat. I reviewed receipts for food purchases which indicate that there is a variety of food options in the home.
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.14308	Resident behavior interventions prohibitions.
	(2) A licensee, direct care staff, the administrator, members of the household, volunteers who are under the direction of the licensee, employees, or any person who lives in the home shall not do any of the following: (b) Use any form of physical force other than physical restraint as defined in these rules.
ANALYSIS:	Based on the information gathered during this investigation there is insufficient information to conclude that direct care staff Tyrone Jackson used any form of physical force against Resident A causing his black eye. Resident A stated he was sitting in a chair in the living room, Mr. Jackson kicked the feet of the chair, and he flew out of it. Then, Mr. Jackson pushed him to his bedroom. When he was in his bedroom, Mr. Jackson pushed him again causing him to fall on to the floor near his dresser. Resident A stated he must have hit his eye while falling. Mr. Jackson denied the allegation. Resident B and Resident C denied the allegation stating they

	<p>did not witness this happen and further indicated that they have never experienced any issues with or had concerns about Mr. Jackson. None of the direct care staff interviewed expressed concern with Mr. Jackson and the care that he provides the residents.</p> <p>It was consistently reported that when Resident A is not taking his medications, he experiences changes in his judgement and cognitive thinking. Resident A's guardian stated he becomes vengeful and violent. Amazing Grace Homecare Operations Manager Susan Savaya stated when Resident A is not on his medication it is not uncommon for him to make allegations against staff. Resident C remarked that Resident A regularly says he is going to get staff fired.</p> <p>Other than the physical proof of Resident A having a black eye, there is no information to conclude that it was caused by Mr. Jackson.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.14315	Handling of resident funds and valuables
	(7) A resident shall have access to and use of personal funds that belong to him or her in reasonable amounts, including immediate access to not less than \$20.00 of his or her personal funds. A resident shall receive up to his or her full amount of personal funds at a time designated by the resident, but not more than 5 days after the request for the funds. Exceptions to this requirement shall be subject to the provisions of the resident's assessment plan and the plan of services.
ANALYSIS:	Based on the information gathered during this investigation, there is insufficient information to conclude that the facility failed to provide Resident A with access to his personal funds/ allowance. Resident A's guardian is responsible for Resident A's finances/personal spending money. Resident A's guardian puts money on a pay pal card for personal spending. Resident A stated his guardian was informed that he was not taking his medications and as a result he stopped putting money on his pay pal card.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 02/03/25, I interviewed licensee designee, Arleen Savaya via telephone. Ms. Savaya stated she purchased this facility in August 2024. She entered a management agreement with the previous licensee designee, Jinesh Chheda. Ms. Savaya stated she remodeled the home in September 2024 and moved residents in October 2024. Ms. Savaya stated she thought Mr. Chheda submitted the documentation to LARA and he thought that she submitted the documentation. Ms. Savaya spoke to Mr. Chheda in January 2025 regarding the transfer then on January 10, 2025, she mailed in an AFC licensing application with a fee to Lansing.

On 02/05/25, I interviewed Jinesh Chheda via telephone. Mr. Chheda stated he sold the home to Ms. Savaya in August 2024 at which time he assisted her with completing the required licensing paperwork. He agreed to remain the licensee designee for 14 days until Ms. Savaya was appointed. Mr. Chheda stated in October 2024, Ms. Savaya reached out to him again at which time she said she submitted the required documentation to AFC Licensing. Mr. Chheda stated he did not know that the department was not made aware of the sale.

I reviewed the following relevant documentation:

- Warranty deed for the property located at 1527 John R Rd Rochester Hills, MI 48307 sold to Arleen Savaya on August 22, 2024.
- Stock purchase agreement made effective August 22, 2024, by and among Varishy Senior Living, LLC Jinesh Chheda (seller), Arleen Savaya (buyer). Ms. Savaya purchased the property located at 1527 John R Rd Rochester Hills, MI 48307 and the transfer of ownership of Varishy Senior Living, LLC. Mr. Chheda will remain the licensee designee until a new one is appointed. Buyer shall submit the necessary paperwork to the department of licensing and regulatory affairs to update the new licensee designee within 14 days of the effective date of this agreement.
- Mr. Chheda provided proof of AFC licensing application dated 09/24/24 and an AFC Licensing Record Clearance Request dated 08/29/2024.
- Ms. Savaya provided proof of AFC Licensing Record Clearance Request, AFC application with proof of payment - dated 01/10/2025.

APPLICABLE RULE	
R 400.14103	Licenses; required information; fee; effect of failure to cooperate with inspection or investigation; posting of license; reporting of changes in information.
	(5) An applicant or licensee shall give written notice to the department of any changes in information that was previously submitted in or with an application for a license, including any changes in the household and in personnel-related information, within 5 business days after the change occurs.
ANALYSIS:	<p>Based upon the information obtained during this investigation there is sufficient information to concluded that previous licensee designee, Jinesh Chheda sold Varishy Senior Living - AS630391506 and Varishy Senior Living, LLC to Arleen Savaya on August 22, 2024. The stock purchase agreement indicates that Mr. Chheda will remain the licensee designee until a new one is appointed. The buyer, Ms. Savaya shall submit the necessary paperwork to the department of licensing and regulatory affairs to update the new licensee designee within 14 days of the effective date of the agreement.</p> <p>On 01/10/25, Ms. Savaya mailed in an AFC Licensing Record Clearance Request form and an AFC application with payment However, Ms. Savay did not inform this facility's assigned licensing consult and/or the department of this change until the initiation of this special investigation which occurred six months after the change.</p>
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 01/30/25, in collaboration with APS worker Izabella Nizinski I completed an unannounced onsite investigation. I observed a small, round, white, pill on Resident A's bedroom floor. The name and dosage of the medication is unknown. The person who the medication is prescribed to is unknown.

APPLICABLE RULE	
R 400.14312	Resident medications.
	(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.
ANALYSIS:	Based upon my observation on 01/30/25, there is sufficient information to conclude that the unmarked pill found on Resident A's bedroom floor was not secured in a locked cabinet or drawer.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

I reviewed Resident A's January 2025 medication administered record (MAR). The MAR reads "Haloperidol tab 2 mg – take one tablet by mouth at bedtime." The MAR indicates that the medication is being administered to Resident A at 8:30 am.

APPLICABLE RULE	
R 400.14312	Resident medications.
	(2) Medication shall be given, taken, or applied pursuant to label instructions.
ANALYSIS:	Based upon Resident A's January 2025 medication administered record (MAR) there is sufficient information to concluded Resident A's Haloperidol 2 mg is not being given/taken pursuant to the instructions written on the MAR. The instructions written on the MAR indicate that the medication should be administered at bedtime however, the medication is being administered at 8:30 am.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 01/30/25, in collaboration with APS worker Izabella Nizinski, I completed an unannounced onsite investigation. I observed that there was a sliding door lock installed on the bottom of the front door.

APPLICABLE RULE	
R 400.14507	Means of egress generally.
	(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.
ANALYSIS:	Based upon my observation on 01/30/25, there is sufficient information to conclude that the front door is not equipped with positive-latching, non-locking against egress hardware.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 01/30/25, in collaboration with APS worker Izabella Nizinski, I completed an unannounced onsite investigation. While onsite I observed a space heater in Resident A's bedroom and outside on the back patio. Both space heaters were plugged in and on.

On 02/13/25, I placed a telephone call to licensee designee Arleen Savaya to conduct an exit conference and review my findings. Ms. Savaya was advised that a corrective plan is required. She acknowledged and agreed.

APPLICABLE RULE	
R 400.14510	Heating equipment generally.
	(5) Portable heating units shall not be permitted.
ANALYSIS:	Based upon my observation on 01/30/25, there is sufficient information to conclude that the facility is using two portable heaters.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan I recommend that this special investigation be closed with no change to the status of the license.

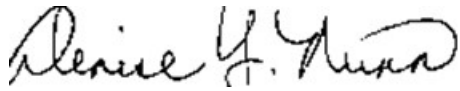


02/13/2025

Johnna Cade
Licensing Consultant

Date

Approved By:



02/13/2025

Denise Y. Nunn
Area Manager

Date