



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

November 13, 2025

Nino Cugtas
Golden Pines Senior Living LLC
Suite 200
888 W. Big Beaver Rd.
Troy, MI 48084

RE: License #: **AS630411684**
Golden Pines On Herbmoor
6131 Herbmoor
Troy, MI 48098

Dear Nino Cugtas:

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 designee and a date.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (248) 972-9136.

Sincerely,

A handwritten signature in cursive script that reads "Kristen Donnay". The signature is written in a dark ink and is positioned below the word "Sincerely,".

Kristen Donnay, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 W. Grand Blvd. Ste 9-100
Detroit, MI 48202
(248) 296-2783

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

I. IDENTIFYING INFORMATION

License #:	AS630411684
Licensee Name:	Golden Pines Senior Living LLC
Licensee Address:	888 W. Big Beaver Rd. Suite 200 Troy, MI 48084
Licensee Telephone #:	(248) 687-4682
Licensee Designee/Administrator:	Nino Cugas
Name of Facility:	Golden Pines On Herbmoor
Facility Address:	6131 Herbmoor Troy, MI 48098
Facility Telephone #:	(248) 729-7133
Original Issuance Date:	05/15/2023
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/13/2025

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 2

No. of residents interviewed and/or observed 4

No. of others interviewed 2 Role: Licensee Designee

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication record(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain.
- Meal preparation / service observed? Yes No If no, explain.
Inspection did not occur during meal time
- Fire drills reviewed? Yes No If no, explain.
- Fire safety equipment and practices observed? Yes No If no, explain.
- E-scores reviewed? (Special Certification Only) Yes No N/A
If no, explain.
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes No If no, explain.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes (please explain) No N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

R 400.627	Licensee and administrator training requirements.
	(1) A licensee and administrator shall complete annual training based on the license issue date, the educational requirements specified in subdivision (a) or (b) of this subrule, or a combination that totals 16 hours: (a) 16 hours of training accepted by the department that is relevant to the licensee's admission policy and program statement.

During the onsite inspection, there was no documentation on file showing that the licensee designee, Nino Cugas, completed 16 hours of annual training in 2024.

R 400.631	Health screenings.
	(4) A licensee shall annually review and maintain in the facility the health status of the staff and members of the household. Verification of annual reviews must be maintained for 2 years.

During the onsite inspection, there was no annual health review on file that was completed in 2024 or 2025 for direct care worker, Dionecia Perez.

R 400.673	Use of assistive devices, therapeutic support.
	(2) An assistive device or therapeutic support must be authorized in writing by an appropriately licensed health care professional and the authorization must state the reason for and the term of the authorization.

During the onsite inspection, there was no authorization from a licensed health care professional on file for Resident R's assistive devices, including his Hoyer Lift, transfer board, hospital bed, bed rails, and shower chair.

REPEAT VIOLATION ESTABLISHED

Reference Renewal Licensing Study Report Dated: 11/17/23; CAP Dated: 12/01/23

R 400.675	Resident medications.
	(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident:

	<p>(a) Be trained in the proper handling and administration of medication.</p> <p>(b) Complete an individual medication log that contains all of the following:</p> <p>(v) Initials of the individual who administered the medication at the time given.</p>
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The label instructions for Resident R's Furosemide state to take one tablet every other day. Staff initialed the medication administration record (MAR) every day from 09/01/25-11/13/25 when the medication was only administered every other day. The pill is not in the pharmacy packaged medication pouch on the days it is not to be administered. Staff were passing medications and initialing the MAR without completing the required medication checks.

REPEAT VIOLATION ESTABLISHED

Reference Renewal Licensing Study Report Dated: 11/17/23; CAP Dated: 12/01/23

R 400.685	Resident admission; resident assessment plan; resident care agreement; health care appraisal.
	(4) A written assessment plan must be completed with and signed by the resident or the resident's designated representative, responsible agency if applicable, and the licensee at the time of admission and annually thereafter. A licensee shall maintain a copy of the resident's most recent assessment plan on file at the facility for up to 2 years after discharge.

During the onsite inspection, the assessment plans for Resident B and Resident R were not updated annually in 2025.

REPEAT VIOLATION ESTABLISHED

Reference Renewal Licensing Study Report Dated: 11/17/23; CAP Dated: 12/01/23

R 400.685	Resident admission; resident assessment plan; resident care agreement; health care appraisal.
	(9) A licensee shall review the written resident care agreement with the resident, resident's designated representative, or responsible agency at least annually or more often if necessary. Any changes to the resident care agreement must be re-signed by all applicable parties. If the annual review results in no

	changes to the resident care agreement the resident care agreement does not need to be re-signed but the licensee shall document that all applicable parties were contacted and agreed that no changes were necessary.
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During the onsite inspection, Resident R's resident care agreement was not reviewed or updated annually in 2025.

REPEAT VIOLATION ESTABLISHED

Reference Renewal Licensing Study Report Dated: 11/17/23; CAP Dated: 12/01/23

R 400.691	Resident records.
	(1) A licensee shall complete and maintain a separate record for each resident that includes all of the following: (g) Admission and monthly weight record.

During the onsite inspection, Resident R's file did not contain a weight record with monthly weights recorded.

IV. RECOMMENDATION

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



11/13/2025

Kristen Donnay
Licensing Consultant

Date