



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

July 8, 2022

Gursharanjit Dhillon  
Pine Tree Place LLC  
2710 S. Rochester Road  
Suite 3  
Rochester Hills, MI 48307

RE: License #: AL630079545  
Pine Tree Place  
5480 Parview  
Clarkston, MI 48346

Dear Mr. Dhillon:

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) 975-5053.

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**

<b>License #:</b>	AL630079545
<b>Licensee Name:</b>	Pine Tree Place LLC
<b>Licensee Address:</b>	2710 S. Rochester Road Suite 3 Rochester Hills, MI 48307
<b>Licensee Telephone #:</b>	(248) 620-2420
<b>Licensee Designee:</b>	Gursharanjit Dhillon
<b>Administrator:</b>	Ashly Liskey
<b>Name of Facility:</b>	Pine Tree Place
<b>Facility Address:</b>	5480 Parview Clarkston, MI 48346
<b>Facility Telephone #:</b>	(248) 620-2420
<b>Original Issuance Date:</b>	02/12/1999
<b>Capacity:</b>	20
<b>Program Type:</b>	ALZHEIMERS AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/07/2022

Date of Bureau of Fire Services Inspection if applicable: 02/07/2022

Date of Health Authority Inspection if applicable: N/A

Inspection Type:             Interview and Observation    Worksheet  
                                   Combination                                     Full Fire Safety

No. of staff interviewed and/or observed                                    4

No. of residents interviewed and/or observed                                7

No. of others interviewed            1 Role: Admin.

- 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.
- 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:

<b>R 400.15312</b>	<b>Resident medications.</b>
	(2) Medication shall be given, taken, or applied pursuant to label instructions.

During the onsite inspection, I noted the following:

- Resident K is prescribed Lamotrigine 25mg, take 2 tablets along with 200mg tablet (total dose 250mg) twice a day. During the onsite inspection on 07/07/22, I observed that one of the 25mg tablets was still in the bubble pack for the 8:00pm dose on 07/06/22 and had not been administered.
- Resident K's Lamotrigine tab 200mg was discontinued on 06/29/22, but the June 2022 medication log was initialed for this medication on 06/30/22 at 8:00am.
- Resident V is prescribed Memantine Tab HCL 10mg- take 1 tablet by mouth twice a day. During the onsite inspection, I observed that Resident V had two bubble packs of this medication that were labeled for bedtime. Two pills were popped from the second bubble pack, but it could not be determined when these medications were passed. Staff also popped several pills from the second bubble pack, but replaced them and taped them back into the bubble pack. The administrator indicated that the pharmacy delivered the wrong number of bubble packs for this medication, but it had not been disposed of or removed from the medication cart.

**REPEAT VIOLATION ESTABLISHED: Renewal Licensing Study Report Dated: 09/04/2020; Corrective Action Plan Dated: 09/18/2020**

R 400.15312	Resident medications.
	(4)(b) Complete an individual medication log that contains all of the following information: (i) The medication. (ii) The dosage. (iii) Label instructions for use. (iv) Time to be administered. (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.

During the onsite inspection, I noted the following:

- Resident V's March 2022 medication log was initialed for the 12:00pm dose of Nitrofur Mac Cap 50mg on 03/25/22, but the 6:00pm dose on 03/25/22 was not administered with a note that the medication had not yet been delivered by the pharmacy. It is unclear if the medication was administered on this date.
- Resident V's May 2022 medication log was not initialed for Donezepil 10mg on 05/02/22 or 05/06/22.
- Resident K's May 2022 medication log was not initialed for the 2:00pm medications on 05/09/22 or 05/20/22.
- Resident K's July 2022 medication log was not initialed for the 8:00am dose of Lamotrigine on 07/01/22.

**REPEAT VIOLATION ESTABLISHED: Renewal Licensing Study Report Dated: 09/04/2020; Corrective Action Plan Dated: 09/18/2020**

<b>R 400.15318</b>	<b>Emergency preparedness; evacuation plan; emergency transportation.</b>
	(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

During the period under review, fire drills were not conducted during daytime, evening, and sleeping hours at least once per quarter. The administrator indicated that she was completing drills once per shift. There were no evening drills practiced during 2021. Fire drills were not practiced during evening or sleeping hours for the second quarter of 2022.

<b>R 400.15403</b>	<b>Maintenance of premises.</b>
	(1) A home shall be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

During the onsite inspection:

- There was a hole in the closet door in bedroom #11.
- The inside of the oven was dirty.

<b>R 400.15403</b>	<b>Maintenance of premises.</b>
	(5) Floors, walls, and ceilings shall be finished so as to be easily cleanable and shall be kept clean and in good repair.

During the onsite inspection, the floors in the dining area were scuffed and damaged. The administrator had a quote to replace the flooring, but the installation had not been scheduled.

**REPEAT VIOLATION ESTABLISHED: Renewal Licensing Study Report Dated: 09/04/2020; Corrective Action Plan Dated: 09/18/2020**

<b>R 400.15407</b>	<b>Bathrooms.</b>
	(3) Bathrooms shall have doors. Only positive-latching, non-locking-against-egress hardware may be used. Hooks and eyes, bolts, bars, and other similar devices shall not be used on bathroom doors.

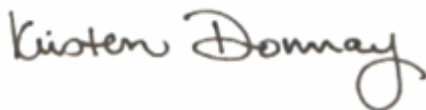
During the onsite inspection, the unisex bathroom in the hallway was not equipped with non-locking against egress hardware.

<b>R 400.15408</b>	<b>Bedrooms generally.</b>
	(7) Bedrooms shall have at least 1 easily openable window.

During the onsite inspection, the crank on the window in bedroom #12 was broken and the window could not be easily opened.

#### IV. RECOMMENDATION

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



07/08/2022

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Kristen Donnay  
Licensing Consultant

Date