



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
ACTING DIRECTOR

February 6, 2024

Mark Walker
Premier Operating Clarkston MC, LLC
7570 Dixie Hwy
Clarkston, MI 48346

RE: License #: AL630382793
Investigation #: 2024A0991007
The Pines Of Clarkston Memory Care

Dear Mark Walker:

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.

The issuance of a 1st provisional license was previously recommended in Special Investigation Report #2023A0991015 and was issued effective 06/02/23. This recommendation remains in effect.

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 black ink that reads "Kristen Donnay". The signature is written in a cursive, flowing style.

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

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL630382793
Investigation #:	2024A0991007
Complaint Receipt Date:	12/12/2023
Investigation Initiation Date:	12/13/2023
Report Due Date:	02/10/2024
Licensee Name:	Premier Operating Clarkston MC, LLC
Licensee Address:	299 Park Ave - 6 Fl New York, NY 10171
Licensee Telephone #:	(989) 534-1772
Licensee Designee:	Mark Walker
Name of Facility:	The Pines Of Clarkston Memory Care
Facility Address:	7570 Dixie Hwy Clarkston, MI 48346
Facility Telephone #:	(248) 625-3400
Original Issuance Date:	03/22/2017
License Status:	1ST PROVISIONAL
Effective Date:	06/02/2023
Expiration Date:	12/01/2023
Capacity:	20
Program Type:	ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
The executive director made up cardiopulmonary resuscitation (CPR) cards for some of the staff in the building.	Yes

III. METHODOLOGY

12/12/2023	Special Investigation Intake 2024A0991007
12/13/2023	APS Referral Referral not made to Adult Protective Services (APS) - no allegations of abuse or neglect.
12/14/2023	Special Investigation Initiated - On Site Unannounced onsite inspection
12/14/2023	Inspection Completed On-site Unannounced onsite inspection- interviewed executive director, Rebecca Nagey and reviewed files
12/14/2023	Contact - Document Received Verification of CPR training, staff schedule, advanced directives
12/21/2023	Contact - Document Received Email from Marie Lynn Wieland, Regional Director of Operations
01/16/2024	Contact - Telephone call made Left message for staff, Ru Pope-White
02/01/2024	Inspection Completed On-site Interviewed Dana Pikula, executive director
02/01/2024	Contact - Document Received Verification of CPR training
02/05/2024	Contact - Telephone call made Left message for Marie Lynn Wieland

02/06/2024	Exit Conference Via telephone with Marie Lynn Wieland, Regional Director of Operations
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ALLEGATION:

The executive director made up cardiopulmonary resuscitation (CPR) cards for some of the staff in the building.

INVESTIGATION:

On 12/12/23, I received an anonymous complaint alleging that the executive director of The Pines of Clarkston Memory Care made up CPR cards for some of the staff in the building. A referral was not made to Adult Protective Services (APS), as there were no allegations of abuse or neglect. I initiated my investigation on 12/14/23 by conducting an unannounced onsite inspection at The Pines of Clarkston Memory Care.

On 12/14/23, I interviewed the executive director/administrator, Rebecca Nagey. Ms. Nagey denied the allegations that she falsified records and made up CPR cards for staff. She stated that while reviewing staff files, she discovered that direct care worker, Emberyonn (Ru) Pope-White did not complete CPR training. He is the only staff who is not fully CPR trained. Mr. Pope-White was scheduled to take a CPR class in August, but it was cancelled because they are in the process of changing corporations and there was an issue concerning who would pay for the course. Ms. Nagey stated that they tried to reschedule the CPR training, but they could not locate a class. Mr. Pope-White completed the online portion of CPR training on 12/11/23. He is scheduled to complete the instructor-led skills portion of the class on 01/08/24. Ms. Nagey stated that Mr. Pope-White typically works from 6:00am-6:00pm. He has worked shifts alone. Resident D is currently the only resident living in the home. Resident D is on hospice and has a do not resuscitate order. Ms. Nagey stated that she would remove Mr. Pope-White from the schedule and have him work in the assisted living building until he is fully trained, as the assisted living building is licensed as a home for the aged facility and CPR is not required.

On 12/14/23, I interviewed the wellness director, Dana Pikula. Ms. Pikula stated that she was recently hired, and she will be responsible for conducting CPR training on-site with the employees moving forward. She stated that she is a trained instructor, but she is waiting to receive the dummies and other equipment that are needed to conduct a class. Ms. Pikula stated that she will be responsible for hiring, training, and monitoring staff.

During the onsite inspection, I reviewed the employee files for the staff working in the memory care building. I noted that all staff had current CPR certifications on file, except

for direct care workers, Emberyonn Pope-White and Shavar Walker. A Heartsaver First Aid, CPR, AED training course was completed onsite on 03/28/23 by Brian Welch, who is certified through the American Heart Association. I cross referenced the sign in sheet with the certificates in the employee files and did not note any discrepancies. Mr. Pope-White was hired after March 2023 and did not attend this training. He had a printout of a screenshot in his file which stated that he successfully completed the Adult First Aid/CPR/AED online course. The screenshot noted that in order to receive a valid 2-year Red Cross Certificate that meets workplace regulatory requirements, you must proceed to an instructor-led skills session within 90 days. The screenshot did not include a date or the name of the person who completed the online training course. There was a handwritten note on the printout which indicated that the instructor led skills session was scheduled for 01/08/2024.

The employee file for direct care worker, Shavar Walker had a certificate from the American Red Cross, which indicated that he completed Adult CPR/AED and Child CPR and First Aid on 04/24/2019. The training was valid for a period of two years. There was no documentation on file showing that the CPR training was updated. There was a handwritten note on the printed certification which said "Class 01/08/2023." Ms. Nagey stated that Mr. Walker was hired in July 2023. He stated that he had current CPR training, but he could not locate the certification. He is scheduled to take a course on 01/08/2024.

I reviewed a copy of the staff schedule for 12/10/23-12/23/23. The schedule showed that Mr. Pope-White was the only staff person scheduled to work first shift from 6:00am-6:00pm on 12/10/23, 12/11/23, 12/12/23, 12/13/23, 12/18/23, 12/19/23, 12/20/23, and 12/22/23. Mr. Walker was the only staff person scheduled to work second shift from 6:00pm-6:00am on 12/10/23, 12/15/23, 12/16/23, 12/17/23, and 12/23/23.

I reviewed a copy of Resident D's file and noted that he had a "Do Not Resuscitate Order" on file, which was signed and dated 07/21/23. I reviewed a copy of his Hospice Assessment and Plan of Care Report, which noted that Resident D had an advance directive with a do not resuscitate order.

On 12/21/23, I received an email from the regional director of operations, Marie Lynn Wieland, indicating that Rebecca Nagey is no longer the executive director at The Pines of Clarkston. She stated that Dana Pikula would be the ongoing onsite contact in the interim.

On 02/01/24, I conducted an onsite inspection at The Pines of Clarkston Memory Care. I reviewed the employee files, including the files for Emberyonn Pope-White and Shavar

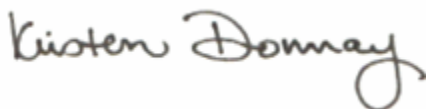
Walker. The employee files for Mr. Pope-White and Mr. Walker contained verification that they successfully completed the cognitive and skills evaluation in accordance with the American Heart Association Heartsaver First Aid, CPR, AED program. The training was completed by Andre Willis, who is a certified instructor through the American Heart Association. Mr. Pope-White's certificate was issued 12/15/23 and Mr. Walker's certificate was issued 12/21/23. Dana Pikula stated that she contacted the Springfield Township Fire Department immediately following my previous onsite inspection and scheduled CPR training for the employees.

On 02/06/24, I conducted an exit conference via telephone with the Regional Director of Operations with Ridgeline Management Company, Marie Lynn Wieland. Ridgeline Management Company is currently operating the facility under a management agreement with Premier Operating Clarkston MC, LLC pending the issuance of a new license. The licensee designee, Mark Walker, requested that communication regarding licensing matters be directed to Ms. Wieland. Ms. Wieland stated that a corrective action plan would be submitted to address the violation.

APPLICABLE RULE	
R 400.15204	Direct care staff; qualifications and training.
	(3) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be competent before performing assigned tasks, which shall include being competent in all of the following areas: (c) Cardiopulmonary resuscitation.
ANALYSIS:	Based on the information gathered through my investigation, there is sufficient information to conclude that direct care workers, Emberyonn Pope-White and Shavar Walker did not have verification on file showing they were competent in CPR. Mr. Pope-White and Mr. Walker began working in the facility in July 2023 and have worked shifts alone. Mr. Pope-White did not complete CPR training until 12/15/23. Mr. Walker had verification of CPR training on file from 2019, but there was no documentation on file to show that it was renewed every two years as required. Mr. Walker did not complete CPR training until 12/21/23.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon receiving an acceptable corrective action plan, I recommend that the 1st provisional license remain in effect.

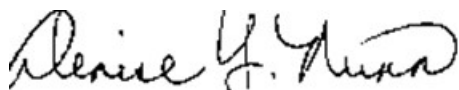


02/06/2024

Kristen Donnay
Licensing Consultant

Date

Approved By:



02/06/2024

Denise Y. Nunn
Area Manager

Date