



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 12, 2025

Ruth Poberesky
Absolute Care, LLC
5847 Naneva Court
West Bloomfield, MI 48322

RE: License #: AS630394140
Investigation #: 2025A0465026
Absolute 4

Dear Ms. Poberesky:

Attached is the Special Investigation Report for the above-referenced facility. Due to the severity of the violations, disciplinary action against your license is recommended. You will be notified in writing of the department's action and your options for resolution of this matter.

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) 972-9136.

Sincerely,

A handwritten signature in cursive script that reads "Stephanie Gonzalez".

Stephanie Gonzalez, LCSW
Adult Foster Care Licensing Consultant
Bureau of Community and Health Systems
Department of Licensing and Regulatory Affairs
Cadillac Place, Ste 9-100
Detroit, MI 48202
Cell: 248-308-6012
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enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630394140
Investigation #:	2025A0465026
Complaint Receipt Date:	07/14/2025
Investigation Initiation Date:	07/17/2025
Report Due Date:	09/12/2025
Licensee Name:	Absolute Care, LLC
Licensee Address:	5847 Naneva Court West Bloomfield, MI 48322
Licensee Telephone #:	(248) 252-6310
Administrator:	Ella Maryakhin
Licensee Designee:	Ruth Poberesky
Name of Facility:	Absolute 4
Facility Address:	5790 Farmington Rd West Bloomfield, MI 48322
Facility Telephone #:	(248) 252-6310
Original Issuance Date:	08/23/2018
License Status:	REGULAR
Effective Date:	02/23/2025
Expiration Date:	02/22/2027
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED MENTALLY ILL AGED ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Direct care staff did not provide adequate wound care to Resident A during the time that he resided at the facility.	No
Additional Findings	Yes

III. METHODOLOGY

07/14/2025	Special Investigation Intake 2025A0465026
07/17/2025	Special Investigation Initiated - Letter Email exchange with APS Worker, Carmen Smith
07/21/2025	Inspection Completed On-site I conducted an onsite investigation. Completed a walkthrough of the home, reviewed resident files and interviewed licensee designee, Ruth Poberesky
07/23/2025	Contact - Document Received Facility documents received via email
08/18/2025	Contact - Telephone call made I spoke to Guardian A1 via telephone
09/23/2025	Contact - Document Sent Email exchange with APS Worker, Carmen Smith
09/24/2025	Contact - Telephone call made I conducted a follow-up interview with Ms. Poberesky, via telephone regarding staff and their limited proficiency in English
09/24/2025	Contact - Document Received Facility documents received via email
09/24/2025	Contact - Telephone call made I interviewed direct care staff, Oleksandra Ostafiichuk, via telephone with Ms. Poberesky on call for translation

09/24/2025	Contact - Telephone call made Interviewed direct care staff, Ekaterina Ilyasova, via telephone with Ms. Poberesky on phone for translation
09/24/2025	Contact - Telephone call made I interviewed direct care staff and administrator, Ella Maryakhin, via telephone
10/01/2025	Contact - Document Received Facility documents received via email
10/01/2025	Inspection Completed On-site Completed a second unannounced onsite investigation at the facility. Completed walkthrough of the facility, reviewed resident files, resident medications, meal menus, observed residents and interviewed Ms. Poberesky and Ms. Maryakhin
10/17/2025	Exit Conference I conducted an exit conference with Ms. Poberesky via telephone
10/20/2025	Contact – Telephone call made I spoke to volunteer, Irina Oleynik, via telephone
10/20/2025	Contact – Telephone call made I spoke to volunteer, Dmitriy Didevich, via telephone
10/20/2025	Contact – Telephone call made I spoke to volunteer, Eugene Umanskiy, via telephone
10/20/2025	Contact – Telephone call made I spoke to volunteer, Marina Davelman, via telephone
10/20/2025	Contact – Telephone call made I spoke to Advanced Physicians USA Wound Care Nurse, Courtney Kiseba, via telephone
10/22/2025	Exit Conference I conducted a second Exit Conference with Ms. Poberesky and Ms. Maryakhin via telephone
10/27/2025	Contact – Document sent I sent Ms. Zinchenko’s Eligibility Letter to Workforce Background Check Departmental Specialist, Katelyn Haskin, via email
10/27/2025	Contact – Telephone call made I spoke to Ms. Haskin via telephone

ALLEGATION:

Direct care staff did not provide adequate wound care to Resident A during the time that he resided at the facility.

INVESTIGATION:

On 7/14/2025, a complaint was received, alleging that direct care staff did not provide adequate wound care to Resident A during the time that he resided at the facility. The complaint stated that Resident A was transported to the hospital on 7/10/2025 and was observed to have three sacral wounds on his hip area and several wounds on his buttocks area. The complaint stated that there is concern that these wounds are long-standing pressure wounds and are a result of Resident A not being moved by direct care staff.

On 7/17/2025 and 9/23/2025, I spoke to Adult Protective Services Worker, Carmen Smith, via email exchange. Ms. Smith stated that she completed an investigation of this complaint and has cited the facility for neglect. Ms. Smith stated that Resident A passed away on 7/27/2025. Ms. Smith stated that her investigation is now closed.

On 7/21/2025, I conducted an onsite investigation. At the time of my onsite investigation, there were five residents residing at the facility. The home specializes in caring for the Ukrainian, Albanian and Russian aged and Alzheimer's population. All the residents did not speak English and had memory delays. Due to the medical diagnosis of the residents and limited English, I was unable to interview residents for this investigation. I completed a walkthrough of the home, observed residents, reviewed resident files and interviewed licensee designee, Ruth Poberesky. The home was clean and well maintained. I observed all residents to be properly dressed and with adequate hygiene.

I reviewed Resident A's file. The *Face Sheet* stated that Resident A resided at the facility from 12/21/2023 to 7/9/2025, and has a legal guardian, Guardian A1. The *Health Care Appraisal* listed Resident A's medical diagnosis as Dementia. The *Assessment Plan for AFC Residents* stated that resident a has an unsteady gait and requires supervision in the community, requires assistance with all personal care tasks, uses a hospital bed with rails, and a walker and wheelchair for mobility. The *Magic Home Care, LLC Physical Therapy Notes* stated that Resident A was seen in the home for physical therapy homecare services on 4/3/2025 and 4/7/2025 for functional mobility and pain.

I reviewed the *Primary Care Visit Notes*, for Resident A's primary care physician, Dr. Viktoriya Barg. The visit notes documented the following:

- 6/3/2025: Resident A was seen for a primary care appointment. The note stated that Dr. Barg assessed Resident A for medical needs and provided a bi-lateral heel drainage of fluid-filled blisters on this same day.

- 6/11/2025: Resident A was seen for a follow-up appointment. Resident A's heels appeared well-maintained and clean.
- 6/24/2025: Resident A was seen for follow-up visit. Dr. Barg completed a debridement of Resident A's wounds on his foot and heel areas.

I reviewed the *Advanced Physicians USA Visit Note* from Courtney Kiseda, dated 6/25/2025, which stated that she provided wound care services to Resident A on 6/25/2025 for a left Ischial Tuberosity Deep Tissue Pressure Injury, Right Ischial Tuberosity Deep Tissue Pressure Injury, Mid-Sacrum Stage 4 Pressure Injury, Coccyx Deep Tissue Pressure Injury and a Right Calf and Lower Leg Unable to Stage Pressure Injury.

I spoke to licensee designee, Ruth Poberesky, who stated that she is the owner of this facility and did provide direct care to Resident A during the time that he resided at the home. Ms. Poberesky stated, "Resident A no longer lives here. While he was living here, we provided excellent care to him. The staff took Resident A into the living room area to sit and go outside for fresh air daily. Resident A moved into the facility several years ago and had been doing well. In the summertime, Resident A began to gradually decline cognitively. Because of his Dementia, he was not eating as much and was weaker. On 6/2/2025, we observed he had a skin breakdown and redness on his left thigh and his lower back area. We immediately notified his doctor, and wound care was ordered and approved. Then we noticed a wound on Resident A's heel, and we took him to see Dr. Barg. Dr. Barg debrided the wounds, and wound care continued to be provided. An air mattress was also ordered to assist with the wounds. The staff always ensured they took care of Resident A and managed his wounds. We ensured he was moved throughout the day and moved from his bed to his wheelchair every day. Resident A's wounds were deep and after the debridement, the wounds became deeper. The wounds were properly treated but some were not improving because of Resident A's physical state and his continued weakness. We did the best we could to care for Resident A and manage his wounds and ensure he received wound care." Ms. Poberesky denied this complaint is true.

On 8/18/2025, I spoke to Guardian A1 telephone. Guardian A1 stated that he had a very close relationship with Resident A. Guardian A1 stated, "While Resident A was living at the facility, I visit there almost every day. Sometimes I would visit, and I would observe Resident A in the same position as he was the day prior, so I don't think they moved him and rotated him every day. When Resident A moved out of the facility in July 2025, he was transferred to the hospital for medical reasons and that is when I found out he had several deep tissue wounds on his body. I was never told that Resident A had wounds prior to this. Because the wounds were deep, it makes me think the staff were not moving and transferring him the way he needed to be."

On 9/24/2025, I interviewed direct care staff, Oleksandra Ostafichuk, via telephone. Ms. Ostafichuk spoke very limited English and required Ms. Poberesky to be present on a 3-way call for this interview to be conducted. Ms. Ostafichuk stated that she has been working at the facility for four years. Ms. Ostafichuk stated, "I remember Resident A. He

did have a few wounds. I would clean the wounds with the solution and use the gauze and ointment that was prescribed to clean and pack the wound. There was a home care agency that would come once a week to manage Resident A's wounds and treat them. I always made sure I got Resident A out of bed and sat him up in his wheelchair. I would take him outside and let him enjoy the fresh air." Ms. Ostafichuk denied knowledge of this complaint being true.

On 9/24/2025, I spoke to direct care staff, Ekaterina Ilyasova, via telephone. Ms. Ilyasova speaks very limited English and required Ms. Poberesky to be present on a 3-way call for this interview to be conducted. Ms. Ilyasova stated that she has worked at the facility for three years. Ms. Ilyasova stated, "Yes, I remember Resident A. I do remember seeing a wound on his heel and his buttocks area. We took Resident A to the doctor's office to have the wounds checked and after that, a nurse from wound care came every week to take care of the wounds. I followed the instructions to care for Resident A's wounds and would clean and change the gauze as needed. We take all residents outside and into the living room area every day. We did this for Resident A." Ms. Ilyasova denied knowledge of this complaint being true.

On 9/24/2025, I spoke to direct care staff, Olena Zinchenko, via telephone. Ms. Zinchenko speaks very limited English and required Ms. Poberesky to be present on a 3-way call for this interview to be conducted. Ms. Zinchenko stated, "Resident A had Dementia, and he was not doing well. He was in poor health. We did make sure he ate and went outside and got out of bed every day. We did the best to take care of him and had wound care come to treat his wounds." Ms. Zinchenko denied knowledge of this complaint being true.

On 9/24/2025, I spoke to direct care staff and administrator, Ella Maryakhin, via telephone. Ms. Maryakhin stated, "There were absolutely no concerns or issues while Resident A was living here. He had Dementia and his health was declining. He was not able to move as much, and we tried really hard to make sure he was transferred to his wheelchair and rotated as much as possible. He did have a few wounds, and we had physical therapy and wound care come to the home to assist in providing care for these. We assisted in cleaning the wounds, gauze changes and daily transfers. We did not leave him in bed all day. That is not true." Ms. Maryakhin denied this complaint is true.

On 10/20/2025, I spoke to Advanced Physicians USA Wound Care Nurse, Courtney Kiseba, via telephone. Ms. Kiseba stated, "I did see Resident A and provide wound care to him while he was residing at the facility. I saw him on 6/3/2025 and 6/25/2025 for a wound on his left and right buttocks area and a pressure ulcer on his lower tailbone. When I was at the facility, I did not observe any concerns and never had any concerns about the care being provided for his wounds by the staff there. I stopped seeing Resident A because he was admitted to the hospital."

APPLICABLE RULE	
R 400.14310	Resident health care.
	<p>(1) A licensee, with a resident's cooperation, shall follow the instructions and recommendations of a resident's physician or other health care professional with regard to such items as any of the following:</p> <p>(d) Other resident health care needs that can be provided in the home. The refusal to follow the instructions and recommendations shall be recorded in the resident's record.</p>
ANALYSIS:	<p>According to the <i>Magic Home Care, LLC Physical Therapy Notes, Primary Care Visit Notes, and Advanced Physicians USA Notes</i>, Resident A received physical therapy homecare services on 4/3/2025 and 4/7/2025 and wound care on 6/3/2025, 6/11/2025, 6/24/2025 and 6/25/2025.</p> <p>According to Ms. Poberesky, Ms. Ostafichuk, Ms. Ilyasova, Ms. Zinchenko and Ms. Maryakhin, they observed Resident A to have wounds on his buttocks and back area on 6/2/2025 and immediately scheduled a doctor's appointment and wound care services began within 24 hours. Ms. Poberesky, Ms. Ostafichuk, Ms. Ilyasova, and Ms. Maryakhin stated that they frequently rotated and transferred Resident A to and from his bed to assist in treating the wounds, as well as cleaning the wounds and changing the gauze. Ms. Poberesky, Ms. Ostafichuk, Ms. Ilyasova, and Ms. Maryakhin denied this complaint is true.</p> <p>According to Advanced Physicians USA Wound Care Nurse, Ms. Kiseba, she provided wound care to Resident A at the facility on 6/3/2025 and 6/25/2025 and did not have any concerns regarding the care being provided for his wounds by the staff.</p> <p>Based on the information above, there is not sufficient information to confirm that direct care staff did not provide adequate wound care management to Resident A.</p>
CONCLUSION:	VIOLATION NOT ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 7/23/2205, Ms. Poberesky sent me the *Employee Phone List* via email. On 10/17/2025, I spoke to Ms. Poberesky, via telephone. Ms. Poberesky stated, “the direct care staff provide all the necessary care to residents every day. The staff cook meals, assist with personal care, bathing, medication administration and assist with all their care needs. I use volunteers for an average of six hours per day. The volunteers help with fire drills and help wheel the residents in and out of the home. I have completed all the background checks for employees and volunteers.” On this same date, I sent an email to Ms. Poberesky, requesting copies of the employee and volunteer files. Ms. Poberesky sent me the *Volunteer Phone List and Volunteer Schedule* for July 2025, August 2025, September 2025, and October 2025, via email. In regard to the volunteer files, the following email exchanges were sent between Ms. Poberesky and I:

- 10/17/2025 at 4:44pm: Thank you so much! Can you please send me the employee files for all the following staff and/or volunteers.
- 10/17/2025 at 6:08pm: Hi Stephanie, this assignment appears quite extensive. We had understood that the only remaining items before the exit interview were the volunteer list and schedule. We will scan and email you all employees files. As for the volunteers, we only keep basic demographic information, as we weren't aware that more detailed files were required. Given our current workload, preparing additional documentation would be quite difficult at this time considering our workload. I hope you understand. Warm regards, Ruth
- 10/18/2025 at 7:32pm: Hello Stephanie, as you can see, the files are really big and it's very time consuming to get all scanned. We will try to scan the rest but maybe it would be easier if you come back and review all the files at the house. Let's see how it goes. Sincerely, Ella Maryakhin, Administrator
- 10/20/2025 at 11:16am: Ruth, do you have any of the following for the volunteers?
 - (1) Name, address, telephone number, and social security number.
 - (2) Fingerprint/Eligibility Letter from LARA
 - (3) The professional or vocational license, certification, or registration number, if applicable.
 - (4) Verification of the age requirement.
 - (5) Verification of experience, education, and training.
 - (6) Verification of reference checks.
 - (7) Beginning and ending dates of employment.
 - (8) Medical information, as required; Medical and TB test
 - (9) Required verification of the receipt of personnel policies and job descriptions.
- 10/20/2025 at 1:23pm: Hi Stephanie, We will email the documents as requested. It may take some time to gather, scan, and send everything, as most of the volunteers were hired years ago under a different license. Sincerely, Ruth

- 10/20/2025 at 3:09pm: We do have documents. If you need them by tomorrow, just consider as we don't have them. Explained that it's not realistic to get all the files on 10 volunteers scanned, compressed and emailed by tomorrow with both of us being employed there full time.

As of the date of this report, I have not received copies of the volunteer files.

I reviewed the *Employee List* and *Volunteer List*, which documented the following employees and volunteers for the last four months:

Employees:

Olena Zinchenko
Oleksandra Ostafiichuk
Ekaterina Ilyasova

Volunteers:

Irina Yasenetskaya
Irina Oleynik
Alina Latinsky
Rita Didevich
Marina Davelman
Dmitriy Didevich
Rita Yevzelman
Eugene Umanskiy
Galina Lubyanskaya
Arkady Shargorodsky

On 10/20/2025, I spoke to volunteer, Irina Oleynik, via telephone. Ms. Oleynik stated, "I have volunteered at the facility for several years. My relative used to live there and after she passed, I continued to help, and volunteer. I provide the facility with my availability each month and I am on the schedule. When I am at the facility, I sit with the residents and color with them, talk to them, play games with them. I also clean and help move the residents around the home and I help with taking the residents outside for fire drills. I do not remember doing any paperwork to volunteer at the home." Ms. Oleynik acknowledged that she does have direct access to residents while at the facility.

On 10/20/2025, I spoke to volunteer, Dmitriy Didevich, via telephone. Mr. Didevich stated that he has volunteered at the facility for approximately three to four years. Mr. Didevich stated, "I had a relative that lived there years ago, and I was asked if I wanted to volunteer and I said yes. I work at the facility two times per month. I used to volunteer a lot more often but now I work a full-time job. When I am at the facility, I help with cleaning the home, moving residents, transporting them from the bed to the wheelchair and taking them outside for fresh air. I help them out of bed if they need to use the bathroom. I help residents in and out of their wheelchairs. And help them move around

the home. I also help with fire drills and take the residents out of bed to outside for drills. I have never been fingerprinted or completed paperwork for the facility because I didn't think I had to because I am only a volunteer."

On 10/20/2025, I spoke to volunteer, Eugene Umanskiy, via telephone. Mr. Umanskiy stated, "I have been helping at the facility for many years. I can't remember how long. I work there a couple times a week and sometimes a few times a month. I help with moving the residents to and from their bedrooms and I help with fire drills. I will help clean the facility. I help where I can. Some of the residents are heavy and need volunteers to help get the residents out of bed. During the day and at nighttime, I assist residents to the bathroom. I have never been fingerprinted or completed any paperwork."

On 10/20/2025, I spoke to volunteer, Marina Davelman, via telephone. Ms. Davelman stated, "I have been helping at the facility since 2020. My relative used to live there. I have been helping on a continuous basis for the last two years. I help the residents get in and out of bed, move them in their wheelchairs, play music, help them use the restroom. I can do any activity or care needed for the residents because I have been working there for so long and they trust that I can help. I work two times per week and sometimes two times per month. I also help with fire drills and get the residents out of bed and into their wheelchairs. I help with cleaning. I can also pass medication and can give it to the residents. The medication is set out for me to give to the residents. I have never been fingerprinted or completed any paperwork."

On 10/20/2025, I conducted a review of the *Workforce Background Check System (WBCS)* to determine if all employees and volunteers have completed the required criminal history background checks. My review determined the following:

Ms. Poberesky was issued an original license for the facility on 8/23/2018 and created her workforce background check account on 8/27/2018. According to WBCS, Ms. Poberesky submitted an application for a background check for one individual, John Redfield, on 4/10/2023, who is not listed on the employee phone list nor volunteer list. I was unable to locate any of the current employees or volunteers under Ms. Poberesky's workforce background account for this facility.

I conducted a broader search of WBCS and determined that Ms. Poberesky submitted workforce background checks under a home care agency that she operates, called RM Home Care, which is separate from this adult foster care facility. A review of the WBCS account was completed and determined the following:

Employees:

Oleksandra Ostafiichuk: Background check was completed under RM Home Care on 9/14/2022; Deemed eligible

Ekaterina Ilyasova: Background check was completed under RM Home Care on 2/8/2023; Deemed eligible

Olena Zinchenko: Unable to locate in WBCS; Ms. Poberesky sent a copy of an *Eligibility Letter* for Ms. Zinchenko dated 9/9/2022 for this facility, which stated that Ms. Zinchenko is eligible to work in an adult foster care facility. However, I reviewed the WBCS and was unable to locate Ms. Zinchenko in the system. On 10/27/2025, I spoke to Katelyn Haskin, Departmental Analyst from the Workforce Background Check Unit, via telephone and email exchange. Ms. Haskin stated that she also reviewed the WBCS and determined that Ms. Zinchenko has never been fingerprinted under this facility license number. Ms. Haskin stated that this eligibility letter is a falsified document. Ms. Haskin stated, "This document was reviewed by myself and my manager, Kenneth Krajniak, as well as other team members. We have determined this document is falsified. The font is incorrect and does not match the font we use on our documents. The spacing is also off and it is apparent that this document was altered. Ms. Zinchenko has never submitted to fingerprinting by LARA, and she is not in our system as having ever been fingerprinted for this facility."

Volunteers:

Irina Yasenetskaya: Background check was completed under RM Home Care on 2/16/2008; Deemed eligible

Irina Oleynik: Background check was completed under RM Home Care on 2/19/2019; Deemed eligible

Alina Latinsky: Unable to locate in WBCS; Was unable to confirm a background check was completed

Rita Didevich: Unable to locate in WBCS; Was unable to confirm a background check was completed

Marina Davelman: Unable to locate in WBCS; Was unable to confirm a background check was completed

Dmitriy Didevich: Unable to locate in WBCS; Was unable to confirm a background check was completed

Rita Yevzelman: Unable to locate in WBCS; Was unable to confirm a background check was completed

Eugene Umanskiy: Unable to locate in WBCS; Was unable to confirm a background check was completed

Galina Lubyanskaya: Unable to locate in WBCS; Was unable to confirm a background check was completed

Arkady Shargorodsky: Unable to locate in WBCS; Was unable to confirm a background check was completed

On 10/22/2025, I conducted an Exit Conference with Ms. Poberesky via telephone. Ms. Poberesky stated, "I am fingerprinting employees under my other business. Why should this matter, as long as they are fingerprinted? Everyone has been fingerprinted. You did not give me enough time to get documents to you."

APPLICABLE RULE	
MCL 400.734b	Employing or contracting with certain individuals providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; determination of existence of national criminal history; failure to conduct criminal history check; automated fingerprint identification system database; electronic web-based system; costs; definitions.
	(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under subsection (1)(i) or an order or disposition described under

	<p>subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.</p>
<p>ANALYSIS:</p>	<p>According to Ms. Poberesky, she has three direct care staff and 10 volunteers working at the facility. Ms. Poberesky stated that volunteers assist with fire drills, transfers and mobility assistance. On 10/17/2025, Ms. Poberesky sent me an email, stating that she only had basic demographic information for volunteers, as she was unaware that more detailed files were required. On 10/20/2025, Ms. Poberesky sent me an email, stating that she hired all volunteers under a different license years ago and it would take some time to send the documents to me. As of the date of this report, Ms. Poberesky has not provided these documents for review.</p> <p>According to Mr. Didevich, Mr. Umanskiy, Ms. Davelman and Ms. Oleynik, they assist with cleaning the home, transferring residents to and from their bed and wheelchairs, fire drills, and assisting residents to the bathroom. According to Ms. Davelman, she assists with administering medication to residents. Based on this information, all volunteers are being utilized as direct care staff.</p> <p>Ms. Ostafiichuk, Ms. Ilyasova, Ms. Zinchenko, Ms. Yasenetskaya, Ms. Oleynik, Ms. Latinsky, Ms. Didevich, Ms. Davelman, Mr. Didevich, Ms. Yevzelman, Mr. Umanskiy, Ms. Lubyanskaya, and Mr. Shargorodsky have direct access to residents, provide direct care services to residents and act in the capacity of direct care staff while at the facility.</p> <p>According to Mr. Didevich, Mr. Umanskiy, Ms. Davelman and Ms. Oleynik, they did not complete a fingerprint/background check prior to volunteering at the facility.</p> <p>According to the <i>Workforce Background Check System</i>, Ms. Poberesky has not completed the required criminal history checks under her adult foster care license, Absolute Care, LLC, for the 13 employees currently working at the facility.</p> <p>Based on the information above, Ms. Poberesky failed to complete the necessary criminal history checks of all 13 employees under her current adult foster care license and corporation, Absolute Care, LLC, as required per licensing.</p>
<p>CONCLUSION:</p>	<p>VIOLATION ESTABLISHED</p>

APPLICABLE RULE	
R 400.14205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	(3) A licensee shall maintain, in the home, and make available for department review, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of direct care staff, other employees, and members of the household. The statement shall be obtained within 30 days of an individual's employment, assumption of duties, or occupancy in the home.
ANALYSIS:	<p>On 10/17/2025, I spoke to Ms. Poberesky via telephone and email exchange and requested copies of the medical clearances for Ms. Yasenetskaya, Ms. Oleynik, Ms. Latinsky, Ms. Didevich, Ms. Davelman, Mr. Didevich, Ms. Yevzelman, Mr. Umanskiy, Ms. Lubyanskaya, and Mr. Shargorodsky. On 10/17/2025, Ms. Poberesky sent me an email, stating that she only had basic demographic information for volunteers, as she was unaware that more detailed files were required. On 10/20/2025, Ms. Poberesky sent me an email, stating that she hired all volunteers under a different license years ago and it would take some time to send the documents to me. As of the date of this report, Ms. Poberesky has not submitted copies of the medical clearances for review.</p> <p>According to Mr. Didevich, Mr. Umanskiy, Ms. Davelman and Ms. Oleynik, they did not complete a medical clearance form prior to volunteering at the facility.</p> <p>Based on the information above, Ms. Poberesky has failed to submit sufficient documentation to confirm that she has obtained the required medical clearance forms from a licensed physician confirming the physical health of Ms. Yasenetskaya, Ms. Oleynik, Ms. Latinsky, Ms. Didevich, Ms. Davelman, Mr. Didevich, Ms. Yevzelman, Mr. Umanskiy, Ms. Lubyanskaya, and Mr. Shargorodsky.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14205	Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.
	(5) A licensee shall obtain written evidence, which shall be available for department review, that each direct care staff, other employees, and members of the household have been tested for communicable tuberculosis and that if the disease is present, appropriate precautions shall be taken as required by state law. Current testing shall be obtained before an individual's employment, assumption of duties, or occupancy in the home. The results of subsequent testing shall be verified every 3 years thereafter or more frequently if necessary.
ANALYSIS:	<p>On 10/17/2025, I spoke to Ms. Poberesky via telephone and email exchange and requested copies of the communicable tuberculosis testing for Ms. Yasenetskaya, Ms. Oleynik, Ms. Latinsky, Ms. Didevich, Ms. Davelman, Mr. Didevich, Ms. Yevzelman, Mr. Umanskiy, Ms. Lubyanskaya, and Mr. Shargorodsky. On 10/17/2025, Ms. Poberesky sent an email, stating that she only had basic demographic information for volunteers, as she was unaware that more detailed files were required. On 10/20/2025, Ms. Poberesky sent me an email, stating that she hired all volunteers under a different license years ago and it would take some time to send the documents to me. As of the date of this report, Ms. Poberesky has not provided these documents for review.</p> <p>According to Mr. Didevich, Mr. Umanskiy, Ms. Davelman and Ms. Oleynik, they did not complete a TB test prior to volunteering at the facility.</p> <p>Based on the information above, Ms. Poberesky has failed to submit sufficient documentation to confirm that she has obtained the required medical documentation confirming the negative communicable tuberculosis testing of Ms. Yasenetskaya, Ms. Oleynik, Ms. Latinsky, Ms. Didevich, Ms. Davelman, Mr. Didevich, Ms. Yevzelman, Mr. Umanskiy, Ms. Lubyanskaya, and Mr. Shargorodsky.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14208	Direct care staff and employee records.
	<p>(1) A licensee shall maintain a record for each employee. The record shall contain all of the following employee information:</p> <ul style="list-style-type: none"> (a) Name, address, telephone number, and social security number. (b) The professional or vocational license, certification, or registration number, if applicable. (c) A copy of the employee's driver license if a direct care staff member or employee provides transportation to residents. (d) Verification of the age requirement. (e) Verification of experience, education, and training. (f) Verification of reference checks. (g) Beginning and ending dates of employment. (h) Medical information, as required. (i) Required verification of the receipt of personnel policies and job descriptions.
ANALYSIS:	<p>On 10/17/2025, I spoke to Ms. Poberesky via telephone and email exchange and requested copies of the employee files for Ms. Yasenetskaya, Ms. Oleynik, Ms. Latinsky, Ms. Didevich, Ms. Davelman, Mr. Didevich, Ms. Yevzelman, Mr. Umanskiy, Ms. Lubyanskaya, and Mr. Shargorodsky. On 10/17/2025, Ms. Poberesky sent me an email, stating that she only had basic demographic information for volunteers, as she was unaware that more detailed files were required. On 10/20/2025, Ms. Poberesky sent me an email, stating that she hired all volunteers under a different license years ago and it would take some time to send the documents to me. As of the date of this report, Ms. Poberesky has not submitted copies of the employee records for Ms. Yasenetskaya, Ms. Oleynik, Ms. Latinsky, Ms. Didevich, Ms. Davelman, Mr. Didevich, Ms. Yevzelman, Mr. Umanskiy, Ms. Lubyanskaya, and Mr. Shargorodsky for review.</p> <p>According to Mr. Didevich, Mr. Umanskiy, Ms. Davelman and Ms. Oleynik, they did not complete any new hire/employee paperwork, prior to volunteering at the facility.</p> <p>Based on the information above, Ms. Poberesky has failed to submit sufficient documentation to confirm that she has obtained and maintained complete employee files for Ms. Yasenetskaya, Ms. Oleynik, Ms. Latinsky, Ms. Didevich, Ms. Davelman, Mr.</p>

	Didevich, Ms. Yevzelman, Mr. Umanskiy, Ms. Lubyanskaya, and Mr. Shargorodsky.
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 7/23/2025 at 4:01pm, Ms. Poberesky sent me an email, which stated the following information regarding her direct care staff, Ms. Zinchenko, Ms. Ostafiichuk and Ms. Ilyasova:

Olena Zinchenko (speaks Russian and Ukrainian only, very limited English), Oleksandra Ostafiichuk (speaks Russian and Ukrainian only, very limited English), Ekaterina Ilyasova (speaks Russian and Ukrainian only, very limited English)

On 9/24/2025, I attempted to call the facility on three separate occasions. Each time I called the facility, a female adult answered the telephone and stated, “No speak English,” and hung up the phone. I subsequently called Ms. Poberesky via telephone and informed her of these incidents. Ms. Poberesky stated, “Ms. Ostafiichuk is working at the facility right now and she does not speak English. Ms. Zinchenko, Ms. Ostafiichuk and Ms. Ilyasova speak very limited English. Their primary languages are Russian and Ukrainian. Ms. Ostafiichuk is working at the facility right now. She does not speak English so if you want to speak to her, I can translate for you. We only care for the Albanian and Russian population, so our staff need to be able to communicate with our residents. If there is a situation at the facility, the staff will call me or Ms. Maryakhin and then we will call 911 for them. If the staff need someone at the home that speaks English, Ms. Maryakhin or I will go to the facility. If a home care agency or anyone else comes to the home and needs to speak to someone that speaks English, staff call us, and we then translate for them. If staff need us to come in-person for any reason, we are only 15 minutes away. Ms. Zinchenko and Ms. Ostafiichuk cannot read English and cannot write in English. We translate all information and write reports and documents on their behalf. When medical documents, such as homecare/wound care notes are given to our staff, I will take the paperwork and translate it into Russian or Ukrainian and then give it to staff so they are able to read it. We will not hire staff that speak English. We cannot afford to pay more workers, and we also will not discriminate against our staff because they do not speak English.”

On 9/24/2025, I was unable to speak to Ms. Ostafiichuk, Ms. Ilyasova, and Ms. Zinchenko without a translator. Ms. Poberesky conducted a 3-way phone call and translated the interviews between Ms. Ostafiichuk, Ms. Ilyasova, Ms. Zinchenko and me.

On 10/1/2025, I conducted an unannounced investigation at the facility. At the time of my onsite investigation, Ms. Ostafiichuk was the only staff on duty at the facility. Upon arriving at the facility, Ms. Ostafiichuk answered the door and was unable to

communicate with me. I made a physical gesture of holding a phone to my ears, to which Ms. Ostafiichuk directed me to the medication cart and handed me a medication bubble pack. I shook my head and gestured, “no.” I then again gestured the reference of a phone, to which Ms. Ostafiichuk grabbed her phone and proceeded to call Ms. Maryakhin. At this time, I was able to communicate to Ms. Maryakhin that I was there to review additional facility files. Ms. Maryakhin stated, “I will let Ms. Ostafiichuk know what you need, and I am on my way there now to assist.” I reviewed the medications in the medication cart and determined that all of the medications were labeled in English. Ms. Maryakhin arrived at the facility approximately 10 minutes after my arrival. When Ms. Maryakhin arrived at the facility, I asked to see the *Medication Administration Records* (MARS), to which Ms. Maryakhin stated that the MARS are stored electronically on the laptop. I asked Ms. Poberesky to ask Ms. Ostafiichuk to log in to the computer and bring up the MAR for me to review. Ms. Maryakhin called Ms. Poberesky via telephone, spoke to her via phone in Ukrainian, and then stated, “Ms. Ostafiichuk does not speak English and is unable to read the medications labels and she cannot log into the laptop to pass medication. Ms. Poberesky and I come to the facility several times a day to help with passing medication. We come at 9am, 3pm and 9pm only when Ms. Ostafiichuk is working. We come and help with passing medication because she can’t read English. We don’t think this is an issue if we come help.”

On 10/17/2025, I spoke to Ms. Poberesky via telephone. Ms. Poberesky stated, “Ms. Maryakhin and I take turns going to the facility every day. We go in on the days we are not working, and we help pass medications for staff that cannot read English and cannot pass medications. Ms. Maryakhin and I are at the facility every day, sometimes twice a day to help. We have staff that cannot read English or speak it and need help.”

On 10/20/2025, I spoke to Ms. Kiseba, via telephone. Ms. Kiseba stated, “I did see Resident A and provide wound care to him while he was residing at the facility. I saw him on 6/3/2025 and 6/25/2025 for a wound on his left and right buttocks area and a pressure ulcer on his lower tailbone. When I went to the facility, I was unable to communicate with the staff working at the home, so they would call the manager, and I would communicate with them over the phone to provide updates on Resident A’s care.”

On 10/19/2025 and 10/22/2025, I spoke to Ms. Poberesky and Ms. Maryakhin via telephone to complete an Exit Conference. I informed Ms. Poberesky that I would be citing rule violations related to the very limited English communication of direct care staff. Ms. Poberesky stated, “This is bias. Maybe we do need people that speak English, but Ms. Maryakhin and I are at the facility every day to help out. If staff need something, they call us, and we come right away. We only live 10 minutes away. Staff can call us if they need something and we help.”

APPLICABLE RULE	
R 400.14204	Direct care staff; qualifications and training.
	(1) Direct care staff shall not be less than 18 years of age and shall be able to complete required reports and follow

	written and oral instructions that are related to the care and supervision of residents.
ANALYSIS:	<p>According to Ms. Poberesky and Ms. Maryakhin, Ms. Zinchenko, Ms. Ostafiichuk and Ms. Ilyasova speak very limited English. Ms. Poberesky and Ms. Maryakhin acknowledged that direct care staff are unable to communicate with anyone regarding resident care unless they speak Russian or Ukrainian and are unable to complete or read documents in the English language. Ms. Poberesky and Ms. Maryakhin acknowledged that they are at the facility several times per day to assist direct care staff with language translation regarding oral and written instructions related to the care of residents.</p> <p>According to Ms. Kiseba, she provided wound care to Resident A on 6/3/2025 and 6/25/2025 and was unable to communicate directly with the staff working at the home regarding Resident A's medical care.</p> <p>Based on the information above, there is sufficient information to confirm that the direct care staff do not meet the qualifications to complete required reports and follow the written and oral instructions required for the care and supervision of residents.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14204	Direct care staff; qualifications and training.
	<p>(2) Direct care staff shall possess all of the following qualifications:</p> <p>(a) Be suitable to meet the physical, emotional, intellectual, and social needs of each resident.</p> <p>(b) Be capable of appropriately handling emergency situations.</p>
ANALYSIS:	<p>According to Ms. Poberesky and Ms. Maryakhin, Ms. Zinchenko, Ms. Ostafiichuk and Ms. Ilyasova speak very limited English. Ms. Poberesky and Ms. Maryakhin acknowledged that direct care staff are unable to call 911, independently administer prescribed medications, communicate with anyone regarding resident care unless they speak Russian or Ukrainian and are unable to complete or read documents in the English language. Ms. Poberesky and Ms. Maryakhin acknowledged that direct</p>

	<p>care staff call them to assist with language translation related to the physical, emotional and emergent needs of residents.</p> <p>Based on the information above, there is sufficient information to confirm that direct care staff are not suitable to meet the physical and emotional needs of the residents and are not capable of appropriately handling emergency situations.</p>
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 7/21/2205, I conducted an onsite investigation, at which time there were five residents living at the facility. On 10/1/2025, I reviewed the resident files. I did not observe any documentation stating that any of the residents required two-person assistance. I reviewed the *Staff Schedule*, for the months of July 2025, August 2025 and September 2025, which documented that the average staff to resident ratio per shift is 1:5, with only one staff being on duty the majority of the month, with the average shift of 8:00am – 8:00pm and 8:00pm – 8:00am. I reviewed the *Volunteer Schedule* for the months of July 2025, August 2025, September 2025 and October 2025. The volunteer schedule did not specify exact days of each month the volunteers worked. The volunteer schedule documented the following

July 2025:

Mondays: Rita Yevzelman’s shifts: 9:00am – 2:00pm; Dmitriy Didevich’s shifts: 4:00pm – 10:0pm; Galina Lubyanskaya’s shifts: 11:00pm – 7:00am

Tuesdays: Arkady Shargorodosky’s shifts: 8:00am – 2:00pm; Irina Yasenetskaya’s shifts: 5:00pm – 10:00pm; Irina Oleynik’s shifts: 10:00pm – 7:00am

Wednesdays: Rita Didevich’s shifts: 9:00am – 3:00pm; Eugene Umansky’s shifts: 5:00pm – 10:00pm; Alina Latinsky’s shifts: 11:00pm – 7:00am

Thursdays: Rita Yevzelman’s shifts: 9:00am – 2:00pm; Dmitriy Didevich’s shifts: 4:00pm – 9:00pm; Marina Davelman’s shifts: 10:00pm – 7:00am

Fridays: Galina Lubyanskaya’s shifts: 10:00pm – 7:00am; Eugene Umansky’s shifts: 3:00pm 8:00pm; Irina Oleynik’s shifts: 8:00am – 2:00pm

Saturdays: Arkady Shargorodosky’s shifts: 8:00am – 2:00pm; Irina Yasenetskaya’s shifts: 10:00pm – 8:00pm

Sundays: Rita Didevich’s shifts: 10:00pm – 7:00am; Alina Latinsky’s shifts: 4:00pm 11:00pm; Marina Davelman’s shifts: 9:00am – 3:00pm

August 2025:

Mondays: Rita Yevzelman's shifts: 8:00am – 2:00pm; Rita Didevich's shifts: 5:00pm – 10:00pm; Irina Oleynik's shifts: 11:00pm – 7:00am

Tuesdays: Arkady Shargorodosky's shifts: 9:00am – 2:00pm; Irina Yasenetskaya's shifts: 5:00pm – 10:00pm; Marina Davelman's shifts: 10:00pm – 7:00am

Wednesdays: Dmitriy Didevich's shifts: 11:00pm – 7:00pm; Rita Didevich's shifts: 9:00am – 3:00pm; Eugene Umansky's shifts: 6:00pm – 10:00pm

Thursdays: Rita Yevzelman's shifts: 9:00am – 2:00pm; Irina Yasenetskaya's shifts: 11:00pm – 7:00 am; Alina Latinsky's shifts: 4:00pm – 9:00pm

Fridays: Eugene Umanskiy's shifts: 3:00pm – 8:00pm; Irina Oleynik's shifts: 8:00am – 2:00pm

Saturday's: Arkady Shargorodosky's shifts: 9:00am – 3:00pm; Rita Didevich's shifts: 5:00pm – 9:00pm; Marina Davelman's shifts: 10:00pm – 7:00am

Sunday's: Dimitriy Didevich's shifts: 9:00am – 3:00pm; Rita Didevich's shifts: 10:00pm – 7:00am; Alina Latinsky's shifts: 4:00pm – 11:00pm

September 2025:

Mondays: Dmitriy Didevich's shifts: 5:00pm – 10:00pm; Rita Didevich's shifts: 8:00am – 2:00pm; Irina Oleynik's shifts: 11:00pm – 7:00am

Tuesdays: Arkady Shargorodosky's shifts: 5:00pm – 10:00pm; Irina Yasenetskaya's shifts: 8:00am – 3:00pm; Marina Davelman's shifts: 11:00pm – 8:00am

Wednesdays: Rita Yevzelman's shifts: 8:00am – 2:00pm; Dmitriy Didevich's shifts: 11:00pm – 7:00am; Eugene Umansky's shifts: 4:00pm – 10:00pm

Thursdays: Rita Yevzelman's shifts: 4:00pm – 10:00pm; Irina Yasenetskaya's shifts: 11:00pm – 7:00am; Alina Latinsky's shifts: 8:00am – 3:00pm

Fridays: Arkady Shargorodosky's shifts: 8:00am - 3:00pm; Eugene Umanskiy's shifts: 10:00pm – 8:00am; Irina Oleynik's shifts: 4:00pm – 9:00pm

Saturday's: Dmitriy Didevich's shifts: 9:00am – 3:00pm; Rita Didevich's shifts: 5:00pm – 9:00pm; Marina Davelman's shifts: 10:00pm – 7:00am

Sunday's: Galina Lubyanskaya's shifts: 9:00am – 3:00pm; Rita Didevich's shifts: 10:00pm – 7:00am; Alina Latinsky's shifts: 4:00pm – 11:00pm

October 2025:

Mondays: Galina Lubyanskaya's shifts: 5:00pm – 10:00pm; Rita Didevich's shifts: 9:00am – 3:00pm; Irina Oleynik's shifts: 10:00pm – 7:00am

Tuesdays: Rita Yevzelman's shifts: 8:00am – 3:00pm; Arkady Shargorodosky's shifts: 5:00pm – 10:00pm; Marina Davelman's shifts: 11:00pm – 8:00am

Wednesdays: Dmitriy Didevich's shifts: 11:00pm – 7:00am; Eugene Umansky's shifts: 4:00pm – 10:00pm; Irina Oleynik's shifts: 8:00am – 3:00pm

Thursdays: Galina Lubyanskaya's shifts: 11:00pm – 7:00am; Irina Yasenetskaya's shifts: 4:00pm – 10:00pm; Alina Latinsky's shifts: 8:00am – 3:00pm

Fridays: Rita Yevzelman's shifts: 8:00am – 3:00pm; Rita Didevich's shifts: 4:00pm – 9:00pm; Eugene Umanskiy's shifts: 10:00pm – 8:00am

Saturday's: Dmitriy Didevich's shifts: 9:00am – 3:00pm; Irina Yasenetskaya's shifts: 5:00pm – 9:00pm; Marina Davelman's shifts: 10:00pm – 7:00am

Sunday's: Arkady Shargorodosky's shifts: 9:00am – 3:00pm; Rita Didevich's shifts: 10:00pm – 7:00am; Alina Latinsky's shifts: 4:00pm – 11:00pm

I reviewed the *Fire Drill Log* for 2025, which documented that all fire drills are being conducted with two staff on duty, which differs from the average staff to resident ration of 1:6. I compared the *Staff Schedule*, *Volunteer Schedule* and *Fire Drill Log* to determine how many staff were on duty during fire drills. I did not observe any of the volunteer's' names on the fire drill logs. I determined the following discrepancies:

A fire drill was completed on 8/11/2025 at 4:40pm by two staff by the initials of RP and EI, referring to Ms. Poberesky and Ms. Ilyasova. However, according to the staff schedule, only Ms. Ilyasova was on the schedule and working on this day from 8:00am – 8:00pm.

The fire drill logs did not include the names of any of the volunteers.

On 10/17/2025 and 10/20/2025, I emailed Ms. Poberesky to request verification that all volunteers have completed the required trainings to have direct access to residents and/or provide direct care to residents. As of the date of this report, Ms. Poberesky has not provided these documents to me for review.

On 10/17/2025 and 10/19/2025, I spoke to Ms. Poberesky, via telephone. Ms. Poberesky stated, "I use volunteers for an average of six hours per day. The volunteers help with fire drills and help wheel the residents in and out of the home. We always have on staff on duty at all times but when we do fire drills, we have two people at the

facility, usually one staff and one volunteer. Our volunteers are from the Russian or Ukrainian community or are family members of residents that used to live here and have passed away. We usually have volunteers at the facility every day. It is not realistic for us to do fire drills with only one person. The volunteers come for the fire drills and offer support to the residents. There would be no way to get the residents out of the home without the help of the volunteers. Ms. Maryakhin, Ms. Zinchenko and I also go to the facility every day, sometimes several times a day to check on staff and help with passing medication to residents when staff are busy and need help. Sometimes, when I go to the facility, staff may be busy helping a resident when it is time to pass medication, so I will pass the medication for the staff.”

On 10/20/2025, I spoke to Ms. Oleynik, via telephone. Ms. Oleynik stated, “I have volunteered at the facility for several years. When I am at the facility, I sit with the residents and color with them, talk to them, play games with them. I help the staff with getting residents out of bed. I also clean and help move the residents around the home and I help with taking the residents outside for fire drills. I do not know anything about the fire drills except that we are told to help get them out of bed, into their wheelchairs and take them outside. I am not sure of any other information on this.” Ms. Oleynik stated she is not aware of the residents’ personal care, supervision and protection needs specified in their assessment plans and the required emergency fire drill and evacuation procedures for the facility.

On 10/20/2025, I spoke to Mr. Didevich, via telephone. Mr. Didevich stated, “I have been volunteering at the facility for three or four years. I work at the facility two times per month. When I am at the facility, I help with cleaning the home, moving residents, transporting them from the bed to the wheelchair and taking them outside for fresh air. I help them out of bed if they need to use the bathroom. I help residents in and out of their wheelchairs. And help them move around the home. I help the staff with fire drills. I help get the residents from their beds to their wheelchairs and take them outside. The staff need help lifting some of the heavier residents. I have not completed any trainings because I am only a volunteer.” Mr. Didevich stated that he is not aware of the residents’ personal care, supervision and protection needs specified in their assessment plans and the required emergency fire drill and evacuation procedures for the facility.

On 10/20/2025, I spoke to Mr. Umanskiy, via telephone. Mr. Umanskiy stated, “I have been helping at the facility for many years. I help with moving the residents to and from their bedrooms and I help with fire drills. I don’t know why we have to do fire drills, but I help the staff when I am there. I help clean the facility. I help where I can. Some of the residents are heavy and need volunteers to help get the residents out of bed. During the day and at nighttime, I assist residents to the bathroom.” Ms. Umanskiy stated he is not aware of the residents’ personal care, supervision and protection needs specified in their assessment plans and the required emergency fire drill and evacuation procedures for the facility.

On 10/20/2025, I spoke to Ms. Davelman, via telephone. Ms. Davelman stated, “I have been helping at the facility since 2020. I have been helping on a continuous basis for

the last two years. The staff need volunteer help to care for the residents, and I have been volunteering for a long time. I help the residents get in and out of bed, move them in their wheelchairs, play music, help them use the restroom. I can do any activity or care needed for the residents because I have been working there for so long and they trust that I can help. I work two times per week and sometimes two times per month. I also help with fire drills and get the residents out of bed and into their wheelchairs and take them outside. I also help with cleaning.” Ms. Davelman stated she is not aware of the residents’ personal care, supervision and protection needs specified in their assessment plans and the required emergency fire drill and evacuation procedures for the facility.

On 10/22/2025, I conducted an exit conference with Ms. Poberesky regarding insufficient staffing and use of volunteers for fire drills. Ms. Poberesky stated, “I hired volunteers to specifically assist with the fire drills because I was previously told by another licensing consultant that I needed more staff in the home. I was told it was okay to have volunteers help out. If I don’t have volunteers help, then we would not be able to complete the fire drills. We wouldn’t be able to get the residents out with only one staff.”

APPLICABLE RULE	
R 400.14206	Staffing requirements.
	(2) A licensee shall have sufficient direct care staff on duty at all times for the supervision, personal care, and protection of residents and to provide the services specified in the resident’s resident care agreement and assessment plan.
ANALYSIS:	<p>According to the <i>Staff Schedule</i>, there is an average of one staff on duty at all times. According to the <i>Volunteer Schedule</i>, the facility has volunteers working at the home an average of 15 hours per day if all days of the month are calculated.</p> <p>According to Ms. Oleynik, Mr. Didevich, Mr. Umanskiy, and Ms. Davelman, they assist direct care staff with the care of residents, including transfers, fire drills and medication administration. Mr. Didevich and Mr. Umanskiy both stated that they assist direct care staff with lifting and transferring residents and that the staff are unable to transfer without assistance from another person. Ms. Oleynik, Mr. Didevich, Mr. Umanskiy, and Ms. Davelman did not have knowledge of the residents’ assessment plans and care needs.</p> <p>According to Ms. Poberesky, one direct care staff is not sufficient to conduct and complete fire drills, requiring use of volunteers. Ms. Poberesky also stated that Ms. Maryakhin, Ms. Zinchenko and herself go to the facility several times per day to</p>

	<p>assist the staff on-duty with medication administration and direct care of residents.</p> <p>Based on the information above, the facility does not have sufficient staff on duty at all times to meet the supervision, personal care and protection needs of residents.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.14318	Emergency preparedness; evacuation plan; emergency transportation.
	(4) A licensee shall ensure that residents, all employees, volunteers under the direction of the licensee, and members of the household are familiar with emergency and evacuation procedures.
ANALYSIS:	<p>On 10/17/2025 and 10/20/2025, I emailed Ms. Poberesky to request verification that all volunteers have completed the required emergency evacuation/fire safety training to have direct access to residents and/or provide direct care to residents. As of the date of this report, Ms. Poberesky has not provided these documents to me for review.</p> <p>According to Ms. Oleynik, Mr. Didevich, Mr. Umanskiy, and Ms. Davelman, they assist direct care staff with fire drills. Ms. Oleynik, Mr. Didevich, Mr. Umanskiy, and Ms. Davelman stated that they have not completed formal training related to emergency and evacuation procedures for the facility.</p> <p>Based on the information above, the facility has not ensured that all staff and/or volunteers are familiar with, and properly trained in, the emergency and evacuation procedures.</p>
CONCLUSION:	VIOLATION ESTABLISHED

INVESTIGATION:

On 10/1/2025, I conducted an unannounced investigation at the facility. At the time of my onsite investigation, Ms. Ostafiichuk was the only staff on duty at the facility. Upon arriving at the facility, Ms. Ostafiichuk answered the door and was unable to communicate with me. I made a physical gesture of holding a phone to my ears, to which Ms. Ostafiichuk directed me to the medication cart and handed me a medication bubble pack. I shook my head and gestured, "no." I then again gestured the reference of

a phone, to which Ms. Ostafiichuk grabbed her phone and proceeded to call Ms. Maryakhin. At this time, I was able to communicate to Ms. Maryakhin that I was there to review additional facility files. Ms. Maryakhin stated, "I will let Ms. Ostafiichuk know what you need, and I am on my way there now to assist." I reviewed the medications in the medication cart and determined that all of the medications were labeled in English. Ms. Maryakhin arrived at the facility approximately 10 minutes after my arrival. When Ms. Maryakhin arrived at the facility, I asked to see the *Medication Administration Records* (MARS), to which Ms. Maryakhin stated that the MARS are stored electronically on the laptop. I asked Ms. Poberesky to ask Ms. Ostafiichuk to log in to the computer and bring up the MAR for me to review. Ms. Maryakhin called Ms. Poberesky via telephone, spoke to her via phone in Ukrainian, and then stated to me, "Ms. Ostafiichuk does not speak English and is unable to read the medications labels and she cannot log into the laptop to pass medication. Ms. Poberesky and I come to the facility several times a day to help with passing medication. We come at 9:00am, 3:00pm and 9:00pm only when Ms. Ostafiichuk is working. We come and help with passing medication because she can't read English. Ms. Ostafiichuk cannot administer medications if we are not here to assist. We don't think it is an issue if we come help. When I help pass medication, most of the time I have Ms. Ostafiichuk initial the MARS." Ms. Poberesky acknowledged that Ms. Ostafiichuk is not properly trained and able to independently administer prescribed medications to residents.

On 10/1/2025, I reviewed the MARS for July 2025, August 2025, and September 2025 and compared it to the *Staff Schedules for July 2025, August 2025 and September 2025*. I observed the following discrepancies:

According to the *Staff Schedule*, Ms. Ostafiichuk's work schedule is daytime hours, and fluctuates between the work shifts of 8:00am – 12:00pm and 8:00am – 8:00pm. Ms. Ostafiichuk's initials are documented in the MAR as the staff that administered medications to Resident B, Resident C, Resident D, Resident E and Resident F on the following dates and times that she was the only staff scheduled to be on duty at the facility during the morning medication administration times of 8:00am and 9:00am:

7/2/2025, 7/3/2025, 7/4/2025, 7/5/2025, 7/9/2025, 7/10/2025, 7/11/2025, 7/12/2025, 7/16/2025, 7/17/2025, 7/18/2025, 7/19/2025, 7/23/2025, 7/24/2025, 7/25/2025, 7/26/2025, 7/30/2025, 7/31/2025, 8/1/2025, 8/2/2025, 8/6/2025, 8/7/2025, 8/8/2025, 8/9/2025, 8/13/2025, 8/14/2025, 8/15/2025, 8/16/2025, 8/20/2025, 8/21/2025, 8/22/2025, 8/23/2025, 8/27/2025, 8/28/2025, 8/29/2025, 8/30/2025, 9/3/2025, 9/4/2025, 9/5/2025, 9/6/2025, 9/10/2025, 9/11/2025, 9/12/2025, 9/13/2025, 9/17/2025, 9/18/2025, 9/19/2025, 9/20/2025, 9/24/2025, 9/25/2025, 9/26/2025, 9/27/2025

On 10/17/2025 and 10/19/2025, I spoke to Ms. Poberesky, via telephone. Ms. Poberesky stated, "I use volunteers for an average of six hours per day. We usually have volunteers at the facility every day. The volunteers come to offer support to the residents. Ms. Maryakhin, Ms. Zinchenko and I also go to the facility every day, sometimes several times a day to check on staff and help with passing medication to residents when staff are busy and need help. We have staff that cannot read English or

“speak it and need help.” Sometimes, when I go to the facility, staff may be busy helping a resident when it is time to pass medication, so I will pass the medication for the staff. Ms. Ostafiichuk still helps with passing medications, and I supervise her. Because she cannot read English, I will take the medications out and then hand them to Ms. Ostafiichuk and then she will give the medication to the resident. I supervise this and then I have Ms. Ostafiichuk initial the MAR.” Ms. Poberesky acknowledged that Ms. Ostafiichuk is unable to read the residents’ prescription medication labels.

On 10/17/2025 and 10/20/2025, I emailed Ms. Poberesky to request verification that all volunteers have completed medication training. As of the date of this report, Ms. Poberesky has not provided these documents to me for review.

On 10/20/2025, I spoke to Ms. Davelman, via telephone. Ms. Davelman stated, “I have been volunteering at the facility since 2020. I have been helping on a continuous basis for the last two years. I pass medication to residents when the staff need help. I can do this for the residents because I have been working there for so long and they trust that I can help. I work two times per week and sometimes two times per month. I do not sign anything when I give medication to residents. I am just helping the staff.” Ms. Davelman stated that she has no knowledge of completing formal medication administration training prior to assisting with administering residents’ medication.

On 10/22/2025, I conducted an exit conference with Ms. Poberesky via telephone. Ms. Poberesky stated, “This is bias. I understand that the staff need to be able to take care of the residents, but Ms. Maryakhin and I are at the facility every day to help out. We supervise Ms. Ostafiichuk when she passes medication, and she is able to when we are there. As long as we supervise Ms. Ostafiichuk, this should not be a problem. Volunteers do not pass medication. This is not true. This has never happened. I am not aware of any volunteer passing medications to residents.”

APPLICABLE RULE	
R 400.14312	Resident medications.
	<p>(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:</p> <p style="padding-left: 40px;">(a) Be trained in the proper handling and administration of medication.</p> <p style="padding-left: 40px;">(b) Complete an individual medication log that contains all of the following information:</p> <p style="padding-left: 80px;">(i) The medication.</p> <p style="padding-left: 80px;">(ii) The dosage.</p> <p style="padding-left: 80px;">(iii) Label instructions for use.</p> <p style="padding-left: 80px;">(iv) Time to be administered.</p> <p style="padding-left: 80px;">(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</p>

<p>ANALYSIS:</p>	<p>During the months of July 2025, August 2025 and September 2025, Ms. Ostafiichuk has worked at the facility 52 days, during which time she has not been able to independently administer medication to residents due to a limited English proficiency that prevents her from being trained in the proper handling and administration of medication.</p> <p>According to Ms. Davelman, she has been volunteering at the facility for five years and does assist with administering medication to residents on occasion. Ms. Davelman acknowledged that she has not completed medication training through the facility and does not sign any paperwork with her initials when she administers medication to residents.</p> <p>On 10/17/2025 and 10/20/2025, I emailed Ms. Poberesky to request verification that Ms. Davelman has completed medication training. As of the date of this report, Ms. Poberesky has not provided these documents to me for review.</p> <p>According to Ms. Poberesky, she comes to the facility daily when Ms. Ostafiichuk is working, to assist in administering medication to residents. However, Ms. Poberesky stated she documents Ms. Ostafiichuk's initials on the MARS. Ms. Poberesky denied knowledge of Ms. Davelman administering medication to residents and acknowledged that Ms. Davelman has not been trained in medication administration.</p> <p>Based on the information above, Ms. Ostafiichuk and Ms. Davelman are not properly trained in the handling and administration of medication. Additionally, Ms. Poberesky and Ms. Davelman are not properly completing the medication logs with their initials at the times that they are administering medication to residents.</p>
<p>CONCLUSION:</p>	<p>VIOLATION ESTABLISHED</p>

IV. RECOMMENDATION

I recommend revocation of the license.

Stephanie Gonzalez

10/30/2025

Stephanie Gonzalez
Licensing Consultant

Date

Approved By:

Denise Y. Nunn

11/20/2025

Denise Y. Nunn
Area Manager

Date