



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

September 16, 2026

Ashutosh Karki
Amor Memory Care Of Novi Inc.
G11 1232
405 W Greenlawn Ave
Lansing, MI 48910

RE: License #: AS630418307
Investigation #: 2026A0626031
Amor Novi

Dear Mr. Karki:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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

Sincerely,

A handwritten signature in dark ink, reading "Sara E. Shaughnessy". The signature is fluid and cursive, with the first name "Sara" being more prominent and the last name "Shaughnessy" written in a continuous, flowing script.

Sara Shaughnessy, Licensing Consultant
Bureau of Community and Health Systems
3044 West Grand Boulevard
2nd Floor Annex, Suite 2-730
Detroit, MI 48202
(248) 320-3721

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630418307
Investigation #:	2026A0626031
Complaint Receipt Date:	07/28/2026
Investigation Initiation Date:	07/29/2026
Report Due Date:	09/26/2026
Licensee Name:	Amor Memory Care Of Novi Inc.
Licensee Address:	G11 1232 - 405 W Greenlawn Ave Lansing, MI 48910
Licensee Telephone #:	(248) 536-2303
Administrator:	Ashutosh Karki
Licensee Designee:	Ashutosh Karki
Name of Facility:	Amor Novi
Facility Address:	41600 Borchart Dr. Novi, MI 48375
Facility Telephone #:	(248) 986-4546
Original Issuance Date:	03/18/2025
License Status:	REGULAR
Effective Date:	09/18/2025
Expiration Date:	09/17/2027
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED ALZHEIMERS AGED

II. ALLEGATION(S)

	Violation Established?
Residents are being left in dirty briefs and are not being showered.	No
The home is not following a menu.	Yes
Food is not being stored appropriately.	No
A resident eloped from the home and was found wandering around the neighborhood.	No
Medication errors are happening and insulin pens are being stored in the refrigerator without being locked up. It was also alleged that needles were being left in diabetic medications and testing supplies.	Yes
Amor Novi is not following their refund agreement.	Yes
Additional Findings	Yes

III. METHODOLOGY

07/28/2026	Special Investigation Intake 2026A0626031
07/29/2026	Special Investigation Initiated - Face to Face I completed an unannounced onsite investigation at Amor Novi. I completed interviews with Resident A and Resident B and direct care staff member, Marla Rogers.
07/29/2026	Contact - Telephone call received I received a telephone call from Ashutosh Karki, owner of the home.
07/30/2026	APS Referral I submitted a referral to APS via the MI Bridges mandatory reporter portal.
07/31/2026	Contact- Document Received I received an email from Adult Protective Services (APS), Estelita Horton, indicating she was assigned the investigation.
08/10/2026	Contact - Telephone call made I completed telephone interviews with Relative B1, and Relative A1.
08/12/2026	Contact - Telephone call received I received a phone call from Relative A1.

08/13/2026	Contact- Document Received I received a text message from APS specialist, Estelita Horton, indicating she is not going to substantiate the investigation.
08/24/2026	Contact - Document Received I received new allegations regarding the home's refund policy.
08/24/2026	Contact - Document Sent I sent an email to licensee designee, Cyle Pickett, requesting the signed refund agreement.
08/24/2026	Contact - Document Received I received an email from licensee designee, Cyle Pickett, indicating he is no longer affiliated with Amor Novi. He indicated he has no longer the licensee designee.
08/25/2026	Contact - Document Sent I sent an email to licensee designee, Cyle Pickett, informing him that he is still the licensee designee, therefore, he is responsible for cooperating with the investigation. Mr. Pickett responded by sending an email indicating he was no longer the licensee designee. The owner, Ashutosh Karki, was in the email chain and was sent information on becoming the licensee designee.
08/26/2026	Contact - Telephone call made I completed telephone interviews with direct care staff members, Ebony Blanding, Deanna Crowder, and Lateece Watkins.
08/26/2026	Contact - Telephone call made I completed a telephone interview with Relative F1. I requested a copy of the refund agreement.
08/31/2026	Contact – Document received I received a copy of the refund agreement for Amor Novi from Ashutosh Karki. It was not signed.
09/01/2026	Contact- Telephone call received. I received a telephone call from Ashutosh Karki, the owner of the home.
09/10/2026	Contact- Document received. I received, via email, confirmation that Ashutosh Karki is now the licensee designee and administrator for Amor Novi.

09/11/2026	Exit conference. I completed an exit conference, via telephone, with licensee designee, Ashutosh Karki. The findings were discussed.
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ALLEGATION:

Residents are being left in dirty briefs and are not being showered.

INVESTIGATION:

On 07/28/2026, I received a complaint, via email, indicating there is neglect at Amor of Novi. The allegations indicated residents were not being showered, having briefs changed, unlabeled food in the refrigerator, no menus, medication mistakes, and needles being left in insulin pens. There were additional concerns regarding a resident eloping from the home, and the cleanliness of the home,

On 07/29/2026, I completed an unannounced onsite investigation at Amor Novi. I completed an in-person interview with direct care staff member, Marla Rogers. Ms. Rogers has worked at Amor Novi for approximately five months but has worked for the company for approximately two years. She stated they are a very family-oriented home and family members visit daily, so she does not understand why there was a complaint. She denied having any concerns regarding the care of any of the residents. She shared that they only have one resident in briefs and that that is Resident A. Resident A is almost 102 years old and has a private home care company who come in to care for his needs, paid for by the family, in the morning. She gets him up and ready for the day. Ms. Rogers regularly checks his briefs, especially after he eats. She denied that any of the residents have ever sat long after having an accident. She emphasized that they care for the residents here. Each resident has two weekly scheduled shower days, and it is more if needed. Most of the residents receive a "bed bath" almost every day. The only time a resident does not receive a shower is when they refuse it.

I attempted to have a conversation with Resident A but was unable to. Resident A is almost 102 years old, he was sitting at the dining room table with Resident B. Resident B was talking to Resident A, but he seemed confused. When I started talking to him, he did not know how to answer. He did appear to be neat and clean and without any foul odor.

I completed a private, in-person interview with Resident B. Resident B has lived in the home for approximately one year. He feels well cared for and safe in the home. He showers pretty much every day and has no concerns with how the direct care staff members treat or care for residents. He believes the staff is very good and they make sure that everyone is cared for and fed. He also feels the home is well maintained. He appeared to be neat and clean and without any foul odor.

I completed a private, in-person interview with Resident C. Resident C has not been here that long but says it is nice. She feels she is well taken care of and denied ever seeing any direct care staff members mistreat a resident. She likes to watch television and do crosswords. She said she showers almost daily. She stated the staff members interact with the residents, they are all really nice, and no one is dirty. She appeared to be neat and clean and without any foul odor.

On 08/10/2026, I completed a telephone interview with Relative B1. She is the daughter of Resident B. She denied having any concerns regarding the care her father is receiving. She denied hearing anything concerning. She goes to the home at least once a week and has never witnessed anything that would have her question the level of care her father is receiving. She stated that the only complaints her father has had have been that they have limits on his Diet Pepsi intake and they will not let him answer the door when someone is there. Her father fell out of bed last week, she was notified immediately and they let her know that he was going to Providence Hospital for a check, out of caution due to him being on blood thinners, he was fine. She stated they are very attentive there and provide loving and comfortable care.

On 08/10/2026, I completed a telephone interview with Relative A1. Relative A1 denied any concerns regarding the care of Resident A. He stated that they seem to change Resident A when he needs it. He shared that Resident A has a caregiver, paid for by the Veteran's Administration, who goes there regularly. She will get him up and ready for the day and has not told him of any concerns regarding bathing or being left in dirty briefs. She has not shared any concerns regarding any redness. He has the same aid every day, so if he were not being cared for, she would know and would tell him. Resident A will get urinary tract infections if he is not kept clean, he used to get them often, before coming to Amor Novi. Resident A has been there for over one year and has not had an infection the whole time. He is pleased with the care; they are attentive and they get Resident A whatever he needs, they also ensure they make him foods he will like. He does visit and has never seen the home dirty. They regularly send him pictures and recently sent him a picture of Resident A's new haircut.

On 08/12/2026, I received a phone call from Relative A1 informing me that he had spoken to the health aid for Resident A and she told him that she did not have any concerns regarding Resident A's care. She has never seen any signs of neglect and his brief area is never red or rashy. He also shared that Amor Novi keeps families involved and that he had just received a message from them, regarding a Family and Friends Day at the home on 08/29/2026 for hot dogs and music.

APPLICABLE RULE	
R 400.677	Resident hygiene, clothing.
	(1) A licensee shall offer a resident appropriate opportunity, access to, and instructions for the following daily: (a) Bathing or showering, or both. (b) Shaving.

	(c) Oral care. (d) Grooming. (e) Peri-care. (2) A licensee shall ensure the resident receives or has access to all of the following: (a) Bathing at least weekly. (b) Toileting as needed. (c) Assistance with resident hygiene as needed. (d) Availability of all the following resident hygiene supplies: (i) Deodorant. (ii) Feminine hygiene products. (iii) Razors and shaving cream. (iv) Shampoo. (v) Soap. (vi) Toothpaste. (vii) Toothbrushes. (viii) Toilet paper. (3) A licensee shall assist the resident in obtaining clothing that fits, is clean, and is seasonally appropriate.
ANALYSIS:	Based on the information gathered during my special investigation, it has been determined that there is not enough evidence to support that the residents' hygiene is not being attended to. Based on my own observations during the unannounced onsite investigation, none of the residents appeared to be dirty. All the residents had on clothing that appeared to be neat and clean and none of them had any detectable foul odors. It was stated that Resident A is the only resident in briefs and Relative A1 stated he has a home health aid who changes and cleans him every day, without any concerns. Furthermore, Relative A1 shared that Resident A develops urinary tract infections if he is not cleaned properly, and he has not had any since he moved into Amor Novi approximately one year ago.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATIONS:

The home does not follow a menu.

INVESTIGATION:

On 07/28/2026, I completed an unannounced onsite investigation at Amor Novi. During the onsite investigation, I was given a tour of the home, by direct care staff member,

Marla Rogers, the menu at the home was dated for May 2026. Ms. Rogers did not have a current menu.

APPLICABLE RULE	
R 400.663	Nutrition; adoption by reference.
	(6) Menus, excluding special diets, must be written at least 1 week in advance and posted. Any change or substitution must be documented.
ANALYSIS:	Based on the information collected during my special investigation, it has been determined that there is sufficient evidence to support the finding that the home is not writing menus at least one week in advance.
CONCLUSION:	VIOLATION ESTABLISHED.

ALLEGATION:

The home is dirty.

INVESTIGATION:

On 07/29/2026, I completed an unannounced onsite investigation at Amor Novi. During the onsite investigation, I was given a tour of the home by direct care staff member, Marla Rogers. I went into the bedroom of each resident and the two bathrooms in the home. The home appeared to be neat, clean, and orderly. There were no foul odors detected in the home.

APPLICABLE RULE	
R 400.647	Safety and maintenance of premises.
	(2) Home furnishings and housekeeping standards must present a comfortable, clean, and orderly appearance.
ANALYSIS:	Based on the information obtained during my special investigation, it has been determined there is insufficient evidence to support that the home is comfortable, clean, or orderly. I toured the home during an unannounced onsite investigation and found it to be neat, clean, orderly, and without any foul odors.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Food is not being stored appropriately.

INVESTIGATION:

On 07/29/2026, I completed an unannounced onsite investigation at Amor Novi. During the onsite investigation, I was given a tour of the home by direct care staff member, Marla Rogers. I looked inside the refrigerator, and it appeared to be neat and orderly. The food contained inside the refrigerator was labeled and dates were observed. None of the discard dates were on the date of the onsite investigation or before it.

APPLICABLE RULE	
R 400.665	Food service.
	(7) When food is removed from its original packaging and stored, it must be clearly labeled to identify the prepared or opened date and an expiration or discard date. The discard date must be no more than 7 days on all perishable foods that are opened or if food is prepared and held at safe storage temperatures. The day of opening or day of preparation must be counted as day 1. If there are signs of spoilage, food must be discarded immediately. If any residents of the home have known food allergies, the label must also indicate that this food contains the food or ingredient that the resident is allergic to.
ANALYSIS:	Based on the information gathered during my special investigation, it has been determined that there is not enough evidence to support the allegation that food is not being stored appropriately. I observed the refrigerator and the food in it, everything was covered and had dates on them, none of which were more than seven days prior.
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

A resident eloped from the home and was found wandering around the neighborhood

INVESTIGATION:

On 07/29/2026, I completed an unannounced onsite investigation at Amor Novi. I completed an in-person interview with direct care staff member, Marla Rogers. Ms. Rogers has worked at Amor Novi for approximately five months but has worked for the company for approximately two years. The elopement happened prior to her working here, she does not know the details.

On 08/25/2026, I completed a telephone interview with the owner of the home, Ashutosh Karki. Mr. Karki stated the last time a resident had left the home unsupervised was in October and that it had been investigated already and that a corrective action plan had been submitted.

On 08/26/2026, I completed a telephone interview with direct care staff member, Ebony Blanding. Ms. Blanding has worked at Amor Novi for approximately one year, she denied knowing about any elopements.

On 08/26/2026, I completed a telephone interview with direct care staff member, Deanna Crowder. Ms. Crowder has worked at Amor Novi since December 2025. No one has eloped from the home since she has been there, but she heard that someone did before she was hired.

On 08/26/2026, I completed a telephone interview with direct care staff member, Lateece Watkins. Ms. Watkins stated that they had a resident elope in October and it has not happened since then, they even installed chimes on the door, so they will know if someone tries to elope.

On 08/26/2026, I reviewed special investigation #2026A0991002. The investigation was on 10/20/2025 and was regarding a resident eloping. The resident's name that was listed on the code sheet is no longer a resident at Amor Novi.

On 08/25/2026, I completed a telephone interview with the owner of the home, Ashutosh Karki. Mr. Karki stated the last time a resident had left the home unsupervised was in October and that it had been investigated already. He stated he completed a corrective action plan.

APPLICABLE RULE	
R 400.671	Resident care.
	(4) A licensee shall provide supervision, protection, and personal care as specified in a resident's assessment plan. A hospice service plan, do-not resuscitate order, or any other advance directive must be included as an addendum

	to the resident assessment and maintained with the assessment plan in the resident's record.
ANALYSIS:	Based on the information collected during my special investigation, it has been determined that there is not enough evidence to support that residents were not being provided with protection and supervision and supervision. None of the residents at Amor Novi have unsupervised community access. None of the direct care staff members interviewed knew of any residents eloping, except two, Ms. Crowder stated she heard of a resident eloping before she started at Amor Novi; she started in December 2025. Ms. Watkins stated the last time a resident eloped was in October, this was already investigated (see special investigation: 2026A0991002; dated 12/10/2025).
CONCLUSION:	VIOLATION NOT ESTABLISHED

ALLEGATION:

Medication errors are happening and insulin pens are being stored in the refrigerator without being locked up. It was also alleged that needles were being left in diabetic medications and testing supplies.

INVESTIGATION:

On 07/29/2026, I completed an unannounced onsite investigation at Amor Novi. During the onsite investigation, I observed a Lantus insulin pen to be in the refrigerator, on the door, not in a locked box. The pen had not yet been used or opened and had no needle in it. I requested to see the diabetes testing supplies and noted there was no needle in the pen used to obtain blood.

I was provided with each resident's medication administration record (MAR) at the onsite investigation. On 08/06/2026, I reviewed each MAR and found the following:

Resident A had a prescription for azithromycin tablet 250 mg, take one tablet by mouth daily for four days, until finished. This was written on 07/12/2026 and dispensed on 07/13/2026. the MAR indicates Resident A refused to take this medication on 07/14/2026 and 07/15/2026. There is no indication received the medication after that.

Resident A has a prescription for bupropion HCL ER 150mg, take one tablet crushed by mouth. This medication was not initialed as having been administered on 07/11/2026, 07/12/2026, 07/13/2026, 07/17/2026, 07/18/2026, 07/21/2026, and 07/24/2026.

Resident A has a prescription for midodrine HCL 2.5mg tabs take one tablet, crushed, if systolic nis under 100. On 07/11/2026, 07/12/2026, 07/13/2026, 07/17/2026,

07/18/2026, 07/21/2026, and 07/24/2026, have no documented systolic measures, nor is it indicated that the medication was administered.

Resident A has a prescription for Senna 8.6 mg tabs, one tablet crushed by mouth. This was not initialed as having been administered on 07/11/2026, 07/12/2026, 07/13/2026, 07/17/2026, 07/18/2026, 07/21/2026, and 07/24/2026.

Resident A has a prescription for Xarelto 15mg tabs, tablet crushed daily. This was not initialed as having been administered on 07/11/2026, 07/12/2026, 07/13/2026, 07/17/2026, 07/18/2026, 07/21/2026, and 07/24/2026.

Resident B has a prescription for allopurinol tab 100mg, take one tablet by mouth twice a day for gout. This was not initialed as having been administered on 07/03/2026 (evening), 07/18/2026 (morning), and 07/24/2026 (morning).

Resident B has a prescription for amlodipine tab 10mg, take one tablet by mouth every morning for hypertension. This was not initialed as having been administered on 07/18/2026, and 07/24/2026.

Resident B has a prescription for atorvastatin tab 20mg, take one tablet by mouth at bedtime. This was not initialed as having been administered on 07/03/2026.

Resident B has a prescription for Eliquis tab 5mg, take one tablet by mouth twice a day. This was not initialed as having been administered on 07/03/2026 (evening), 07/18/2026 (morning), and 07/24/2026 (morning).

Resident B has a prescription for magnesium glycinate cap 100mg, take 2 capsules by mouth twice daily. This was not initialed as having been administered on 07/03/2026 (evening), 07/18/2026 (morning), and 07/24/2026 (morning).

Resident B has a prescription for melatonin tab 3mg, take three tablets by mouth at bedtime for sleep aid. This was not initialed as having been administered on 07/03/2026.

Resident B had a prescription for metolazone tab, take one tablet by mouth daily for 7 days. This prescription was written for 07/17/2026-07/24/2026. It was not initialed as having been administered on 07/17/2026, 07/18/2026, and 07/21/2026.

Resident B has a prescription for metoprolol succinate, tab 25mg ER, take one tablet by mouth every morning for hypertension, hold for BP under 110 and pulse under 60. This was not initialed as having been administered on 07/18/2026, and 07/24/2026. There is no notation indicating this medication was held on those days.

Resident B has a prescription for multivitamin tablet, take one tablet by mouth every morning. This was not initialed as having been administered on 07/18/2026 and 07/24/2026.

Resident B has a prescription for potassium chloride micro tab 20MEQ ER, take one tablet by mouth daily. This was not initialed as having been administered on 07/24/2026.

Resident B has a prescription for sertraline tab 50mg, take one tablet by mouth every morning. This was not initialed as having been administered on 07/24/2026 and 07/29/2026.

Resident B has a prescription for lorazepam cap 7.5mg, take one capsule by mouth at bedtime. This was not initialed as having been administered on 07/03/2026.

Resident B has a prescription for terazosin cap 5mg, take one capsule by mouth at bedtime for hypertension. This was not initialed as having been administered on 07/03/2026.

Resident B has a prescription for vitamin B1 100mg, take two tablets by mouth every morning. This was not initialed as having been administered on 07/18/2026 and 07/24/2026.

Resident C has a prescription for acetaminophen 500mg, take two tablets by mouth twice a day for pain. This was not initialed as having been administered on 07/12/2026 (morning), and 07/13/2026 (morning).

Resident C has a prescription for clopidogrel tab 75 mg, take one tablet by mouth daily for blood clot prevention. This was not initialed as having been administered on 07/12/2026 and 07/13/2026.

Resident C has a prescription for dronabinol cap 2.5mg, take one capsule by mouth daily for low appetite. This was not initialed as having been administered on 07/18/2026 and 07/29/2026.

Resident C has a prescription for duloxetine cap 60mg, take two capsules by mouth daily for depression. This was not initialed as having been administered on 07/12/2026, 07/13/2026, and 07/29/2026.

Resident C has a prescription for FeroSul tab 325 mg, take one tablet by mouth daily for supplement. This was not initialed as having been administered on 07/12/2026, 07/13/2026, and 07/29/2026.

Resident C has a prescription for lidocaine PA pad 4%, apply one patch topically to left shoulder and back daily, 12 hours on and 12 hours off. This was not initialed as having been administered on 07/12/2026, 07/13/2026, and 07/29/2026.

Resident C has a prescription for lisinopril tab 5mg, take one tablet by mouth daily for hypertension. This was not initialed as having been administered on 07/12/2026 and 07/13/2026.

Resident C has a prescription for mag oxide tab 400mg, take one tablet by mouth twice a day for hypomagnesemia. This was not initialed as having been administered on 07/12/2026 (morning), 07/13/2026 (morning), and 07/29/2026 (morning).

Resident C has a prescription for multi complete tab/iron, take one tablet by mouth daily for supplement. This was not initialed as having been administered on 07/12/2026, 07/13/2026, and 07/29/2026.

Resident C has a prescription for nitrofurantoin mac cap 50mg, take one capsule by mouth daily for prophylactic. This was not initialed as having been administered on 07/12/2026, 07/13/2026, and 07/29/2026.

Resident C has a prescription for omeprazole cap 40mg, take one capsule by mouth twice a day for GERD. This was not initialed as having been administered 07/12/2026, 07/13/2026, and 07/29/2026 for the morning doses.

Resident C has a prescription for peg 3350 powder give 17gm mixed in 4-8oz of water daily for constipation. This was not initialed as having been administered on 07/12/2026, 07/13/2026, and 07/29/2026.

Resident D has a prescription for acetaminophen tab 500mg, take one tablet by mouth three times daily. This prescription was discontinued on 07/17/2026. It was not initialed as having been administered on 07/12/2026 (morning), 07/04/2026 (afternoon), 07/05/2026 (afternoon), 07/06/2026 (afternoon), 07/07/2026 (afternoon), 07/08/2026 (afternoon), 07/09/2026 (afternoon), 07/11/2026-07/17/2026 (afternoon), and 07/04/2026 (evening).

Resident D has a prescription for acetaminophen tab 650 mg, take one tablet by mouth three times daily. This prescription started on 07/17/2026. This was not initialed as having been administered on 07/17/2026-07/22/2026 (afternoon), 07/24/2026 (afternoon), and 07/27/2026-07/29/2026 (afternoon).

Resident D has a prescription for aspirin low tab 81mg EC, take one tablet by mouth daily. This was not initialed as having been administered on 07/12/2026.

Resident D has a prescription for docusate sodium cap 100mg, take one capsule by mouth daily for constipation. This was not initialed as having been administered on 07/12/2026.

Resident D has a prescription for midodrine tab 10mg, take one tablet by mouth three times daily, hold for systolic BP less than 90. There were no initials indicating BP was

taken or that the medication was administered on 07/12/2026 (morning), 07/01/2026 (afternoon), 07/03/2026-07/09/2026 (afternoon), 07/11/2026-07/22/2026 (afternoon), 07/24/2026 (afternoon), 07/27/2026 (afternoon), 07/28/2026 (afternoon), 07/29/2026 (afternoon), 07/03/2026 (evening), and 07/04/2026 (evening).

Resident D has a prescription for Myrbetriq, tab 25mg, take one tablet by mouth daily. This was not initialed as having been administered on 07/12/2026 and 07/21/2026.

Resident D has a prescription for paroxetine tab 10mg take one tablet by mouth daily. This was not initialed as having been administered on 07/12/2026.

Resident D has a prescription for PEG 350 powder, give 17gm mixed in 4-8oz of water daily. This was not initialed as having been administered on 07/12/2026.

Resident D has a prescription for quetiapine tab 25mg, take one tablet by mouth every morning. This was not initialed as having been administered on 07/12/2026.

Resident D has a prescription for quetiapine tab 50mg, take one tablet by mouth at bedtime. This was not initialed as having been administered on 07/03/2026 and 07/04/2026.

Resident D has a prescription for vitamin D3 1000IU tab, take one tablet by mouth daily. This was not initialed as having been administered on 07/12/2026.

Resident D has a prescription for hydrocortisone cream 2.5%, apply topically to affected area twice a day. This was not initialed as having been administered on 07/12/2026 (morning), 07/03/2026 (evening), and 07/04/2026 (evening).

Resident E has a prescription for Accu-Chek test, and check blood sugars daily. This was discontinued on 07/04/2026. It was not initialed as having been completed on 07/03/2026 and 07/04/2026.

Resident E has a prescription for acetaminophen tab 650mg, take one tablet by mouth every eight hours for seven days. This is not initialed as having been administered on 07/24/2026 (morning), 07/22/2026 (afternoon), 07/24/2026 (afternoon), 07/27/2026 (afternoon), and 07/29/2026 (afternoon).

Resident E has a prescription for aspirin low tab 81mg EC, take one tablet by mouth daily. This was not initialed as having been administered on 07/05/2026, 07/12/2026, 07/18/2026, and 07/24/2026.

Resident E has a prescription for donepezil tab 10mg, take one tablet by mouth daily. This was not initialed as having been administered on 07/05/2026, 07/12/2026, 07/18/2026, 07/24/2026.

Resident E has a prescription for Lantus Solos injection 100/ml, inject 25 units subcutaneously every evening. This was not initialed as having been administered on 07/03/2026, 07/04/2026, 07/05/2026, 07/12/2026, 07/18/2026, and 07/24/2026.

Resident E has a prescription for nifedipine tab 60mg ER, take one tablet by mouth daily on empty stomach. This was not initialed as having been administered on 07/05/2026, 07/12/2026, 07/18/2026, and 07/24/2026.

Resident E has a prescription for Olmesartan medoxomil tab 40mg, take one tablet by mouth daily. This was not initialed as having been administered on 07/05/2026, 07/12/2026, 07/18/2026, and 07/24/2026.

Resident E has a prescription for Softclix lancets, test blood sugar at bedtime. This was not initialed as having been completed on 07/03/2026, 07/04/2026, and 07/05/2026.

Resident E has a prescription for spironolactone tab 25mg, take one tablet by mouth daily. This was not initialed as having been administered on 07/05/2026, 07/12/2026, 07/18/2026, and 07/24/2026.

Resident E has a prescription for diclofenac gel 1%, apply topically to bilateral knees three times daily. This was not initialed as having been administered on 07/05/2026 (morning), 07/12/2026 (morning), 07/18/2026 (morning), 07/24/2026(morning), 07/07/2026 (afternoon), 07/03/2026-07/09/2026 (afternoon), 07/11/2026-07/22/2026 (afternoon), 07/24/2026 (afternoon), 07/27/2026 (afternoon), and 07/29/2026 (afternoon).

APPLICABLE RULE	
R 400.675	Resident medications.
	(2) Prescribed medication must be kept in the original pharmacy container and labeled for a specific resident. Over-the-counter medication must be kept in the original manufacturer's container. Prescription and over-the-counter medication must be kept in a locked cabinet or drawer and refrigerated if required. Equipment necessary to administer a medication must be easily accessible and used only for the resident for whom it is prescribed unless generally used for all residents.
ANALYSIS:	Based on my observations during the unannounced onsite investigation, there is sufficient evidence to determine there was medication in the refrigerator that was not locked up.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
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: (b) Complete an individual medication log that contains all of the following: (v) Initials of the individual who administered the medication at the time given.
ANALYSIS:	Based on the information obtained during my special investigation, it has been determined that there is sufficient evidence to support that the initials of the individual administering medications were missing on at least one MAR for every one of the residents.
CONCLUSION:	REPEAT VIOLATION ESTABLISHED See renewal licensing study report dated 09/11/2025; CAP dated 09/22/2025.

ALLEGATION:

Amor Novi is not following their refund agreement.

INVESTIGATION:

On 08/24/2026, a new intake (212004) was received, with allegations stating Resident F was admitted to the home, then passed away the same day and Amor Novi is not following their refund agreement.

On 08/24/2026, I reviewed the refund policy for Amor Novi. The refund policy indicates that the refund agreement shall provide for, at a minimum, refunds due to an emergency discharge, or in the event that the resident has been determined to be at risk to substantial non-compliance with the licensing rules which results in the department taking action to issue a provisional license or to revoke or summarily suspend, or refuse to renew, a license and a resident relocates. The amount returned will be prorated.

On 08/24/2026, I sent an email to the licensee designee, Cyle Pickett, requesting a copy of the signed refund agreement for Resident F and a copy of his resident information sheet. Mr. Pickett responded, indicating he is no longer employed or associated as the administrator for Amor Novi. I informed him that he is still listed as the licensee designee and would be responsible for getting the requested documents to me.

On 08/25/2026, I completed a telephone interview with licensing consultant, Johnna Cade. Ms. Cade is the consultant for the home, and she has never received any requests for Mr. Pickett to no longer be the licensee designee, either verbal or written.

On 08/25/2026, I completed a telephone interview with the owner of the home, Ashutosh Karki. Mr. Karki explained that he had to terminate an employee due to her not performing her duties and she is not happy. He stated that Mr. Pickett handled the hiring. Mr. Karki only has the files for the current residents in the home; Mr. Pickett has the other files. He does not have a copy of the signed refund agreement and agreed to try to obtain it. He expressed a willingness to work with Resident F's family to resolve the refund issue but wanted to see the signed agreement first. Mr. Karki is planning on designating himself as the licensee designee, I provided him with information regarding that. He could not be the licensee designee when the home was first opened, due to not having enough experience in the field, but he has been working with residents for approximately 1.5 years now and feels he is ready.

On 08/26/2026, I completed a telephone interview with Relative F1. She stated Resident F entered Amor Novi on 03/04/2026, he was supposed to enter on the first, but there was a delay in his bed delivery and then he had to go to the hospital due to low blood pressure. Relative F1 reviewed the refund agreement that was sent to her by licensee designee, Cyle Pickett and she stated, based on the agreement, she was entitled to a refund. Resident F was not under hospice care when he entered the home, he was only supposed to be there for a few months to assist with his radiation treatments. She lives in Arizona, but stayed with Resident F during the winter and she helped move Resident F in. She denied having concerns regarding the care Resident F received during the short time he was a resident. She reached out to Cyle Pickett at least seven times and in the beginning, he was on board assisting her with the refund, but nothing came of it. She stated that on 07/16/2026, she received a text message from Mr. Pickett, indicating the home was under new ownership, and he provided her with the name and number of the new owner, Ashutosh Karki, and he provided Mr. Karki's phone number. She attempted contact with Mr. Karki approximately three times and did not hear back from him. She stated she paid Mr. Pickett \$2000 for a community fee and \$7500 for Resident F's cost of care for the month of March.

On 08/26/2026, Relative F1 forwarded me an email she received from Mr. Pickett, containing all of the resident paperwork for Resident F. In the packet was a refund agreement. She did not get a copy of the signed agreement. The refund agreement read:

"After the rooms have been vacated, and all their property has been removed from the facility, the services rate will terminate. A prorated refund will be issued if there are more than 15 days during the month. A voluntary discharge does not receive a refund without 30-day written notice. No refund will be issued for residents under hospice care in the event of a death"

On 08/26/2026, I sent an email to licensee designee, Cyle Pickett, and the owner of the home, Ashutosh Karki, requesting a signed copy of the refund agreement or if the one provided to me by Resident F1 is what will be used in the investigation to determine compliance.

On 08/31/2026, I received an email from Ashutosh Karki, containing a copy of the Amor Novi refund agreement. The agreement was not signed and is not the same refund agreement that was sent to Relative F1 when she was having Resident F admitted. It was the same as the previous agreement I had reviewed that provided a refund for an emergency discharge or if the facility was not able to safely care for the residents.

On 09/01/2026, I received a phone call from Mr. Karki. He informed me that he is going to make arrangements with Relative F1 for a refund. He stated the forms sent to her were the ones Mr. Pickett uses for his home and were not the ones created and implemented for Amor Novi. Mr. Karki was informed that the form sent to Relative F1 was sent to her by Mr. Pickett, who is the licensee designee and that since he did not have a signed agreement, the one provided to her by the licensee designee should be followed. He stated he did retrieve the files from Mr. Pickett and that the only document that was not signed was the refund agreement. He stated there was a question mark on the agreement, indicating Relative F1 may have had a question about it, but it was not signed.

On 09/10/2026, I received notification that Mr. Karki is now the licensee designee and administrator for Amor Novi.

On 09/11/2026, I completed an exit conference, via telephone, with licensee designee, Ashutosh Karki. The findings were discussed and Mr. Karki expressed that he is already making changes to how the home is being managed, mainly that he visits the home frequently and has been implementing changes. Mr. Karki added that he is going to work with Relative F1 to remediate the issues related to the refund agreement.

APPLICABLE RULE	
R 400.637	Handling of resident funds and valuables.
	(15) A licensee shall have a written refund agreement with a resident or a resident's designated representative. The agreement must state under what conditions a refund of the unused portion of the monthly charge that is paid to the facility is returned to the resident or resident's designated representative.
ANALYSIS:	Based on the information obtained during my special investigation, it has been determined that Amor Novi is in violation of their refund agreement. Their refund agreement clearly states that a prorated refund will be given if a resident leaves and there are more than 15 days left in the month,

	Resident F was officially admitted to the home on 03/01/2026 and died on 03/10/2026. Furthermore, the refund agreement indicates a refund will not be issued if the resident was under the care of hospice, which Resident F was not.
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 08/24/2026, I sent an email to the licensee designee, Cyle Pickett, requesting a copy of the signed refund agreement for Resident F and a copy of his resident information sheet. Mr. Pickett responded, indicating he is no longer employed or associated as the administrator for Amor Novi.

On 08/25/2026, I completed a telephone interview with licensing consultant, Johnna Cade. Ms. Cade is the consultant for the home, and she has never received any requests for Mr. Pickett to no longer be the licensee designee, either verbal or written.

On 08/26/2026, I completed a telephone interview with Relative F1. She stated that on 07/16/2026, she received a text message from Mr. Pickett, indicating the home was under new ownership, and he provided her with the name and number of the new owner, Ashutosh Karki, and he provided Mr. Karki's phone number.

On 09/01/2026, I received a phone call from Mr. Karki. Mr. Karki stated he wants to be appointed the licensee designee for Amor Novi. I informed him of what he needed to do to be appointed as the licensee designee.

On 09/10/2026, I received notification, from licensing consultant, Johnna Cade, that Mr. Karki is now the licensee designee and administrator for Amor Novi.

APPLICABLE RULE	
R 400.605	Rule compliance; cooperation by applicant or licensee.
	2) An applicant or licensee shall cooperate with the department to determine compliance with the act and these rules during the review of an application and during an inspection or investigation. (3) For purposes of these rules, the licensee designee shall meet all the requirements of the licensee.

ANALYSIS:	Based on the information obtained during my special investigation, it has been determined that there is sufficient evidence to support that licensee designee, Cyle Pickett, did not cooperate with the department to determine compliance with the act and the rules during an investigation. I emailed Mr. Pickett, requesting documents and he stopped responding to the emails after he stated he was no longer the licensee designee, even after agreeing to be the licensee designee and never provided any information to the department informing his consultant of that fact.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.611	Required information; fee; posting of license; change of information.
	(4) An applicant or licensee shall give written notice to the department within 10 business days after a change occurs in information that was previously submitted in or with an application for a license.
ANALYSIS:	Based on the information gathered during my special investigation, it has been determined there is sufficient evidence to support that neither the applicant, nor the licensee designee, provided written notice to the department, within 10 business days after a change occurred in the information previously submitted with an application for a license. In July, Mr. Pickett sent a text message to Relative F1 indicating he is no longer the licensee designee or administrator. On 08/24/2026, I received an email from Mr. Pickett, indicating his no longer associated with Amor Novi. The licensing consultant for the home had not received notification of this change within ten days of it occurring.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

Contingent upon receipt of an approved corrective action plan, I recommend no changes to the status of the license.

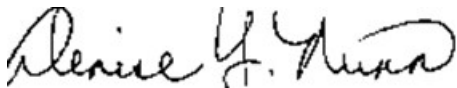


09/15/2026

Sara Shaughnessy
Licensing Consultant

Date

Approved By:



09/16/2026

Denise Y. Nunn
Area Manager

Date