



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

October 24, 2025

Madeline Heierman
Legacy at Orchard Grove
71301 Orchard Crossing Ln
Romeo, MI 48065

RE: License #: AH500367780
Legacy at Orchard Grove
71301 Orchard Crossing Ln
Romeo, MI 48065

Dear Ms. Heierman:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules.

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 feel free to contact the local office at (517) 335-5985.

Sincerely,

A handwritten signature in cursive script that reads "Brender d. Howard".

Brender Howard, Licensing Staff
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(313) 268-1788

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH500367780
Licensee Name:	Trilogy Healthcare of Romeo, LLC
Licensee Address:	#200 303 N. Hurstbourne Pkwy. Louisville, KY 40222
Licensee Telephone #:	(502) 412-5847
Authorized Representative/Administrator:	Madeline Heierman
Name of Facility:	Legacy at Orchard Grove
Facility Address:	71301 Orchard Crossing Ln Romeo, MI 48065
Facility Telephone #:	(586) 372-4899
Original Issuance Date:	03/14/2017
Capacity:	35
Program Type:	ALZHEIMERS AGED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 10/23/2025

Date of Bureau of Fire Services Inspection if applicable:

Inspection Type: Interview and Observation Worksheet
 Combination

Date of Exit Conference: 10/24/2025

No. of staff interviewed and/or observed 11
No. of residents interviewed and/or observed 23
No. of others interviewed 3 Role Residents family members

- Medication pass / simulated pass observed? Yes No If no, explain.
- Medication(s) and medication records(s) reviewed? Yes No If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes No If no, explain. No funds held for the residents
- Meal preparation / service observed? Yes No If no, explain.
- Fire drills reviewed? Yes No If no, explain.
Interviewed the staff on the policy and procedures
- Water temperatures checked? Yes No If no, explain.
- Incident report follow-up? Yes IR date/s: N/A
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
09/25/2025 2025A0784071 1931(2)
- Number of excluded employees followed up? 1 N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility was found to be in substantial compliance with the public health code and administrative rules regulating home for the aged facilities.

IV. RECOMMENDATION

Renewal of the license is recommended.

Brenden D. Howard

10/24/2025

Date

Licensing Consultant