



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

October 27, 2025

Kristina Yates
H N P H Inc
852 W. Elm
Monroe, MI 48161

RE: License #: AL580007271
Investigation #: 2026A0116001
Elm House

Dear Ms. Yates:

Attached is the Special Investigation Report for the above referenced facility. No substantial violations were found.

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 (313) 456-0439.

Sincerely,

A handwritten signature in blue ink that reads "Pandrea Robinson".

Pandrea Robinson, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 319-9682

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL580007271
Investigation #:	2026A0116001
Complaint Receipt Date:	10/01/2025
Investigation Initiation Date:	10/02/2025
Report Due Date:	11/30/2025
Licensee Name:	H N P H Inc
Licensee Address:	852 W. Elm Monroe, MI 48161
Licensee Telephone #:	(734) 242-2177
Administrator:	Kristina Yates
Licensee Designee:	Kristina Yates
Name of Facility:	Elm House
Facility Address:	852 W Elm Monroe, MI 48161
Facility Telephone #:	(734) 242-2177
Original Issuance Date:	10/01/1980
License Status:	REGULAR
Effective Date:	04/30/2024
Expiration Date:	04/29/2026
Capacity:	16
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL TRAUMATICALLY BRAIN INJURED

II. ALLEGATION(S)

	Violation Established?
Resident A fell last week, his leg is black, and he can barely walk. Resident A went to church, they called 911 and he was transported to the hospital. The hospital referred Resident A to an orthopedic surgeon. The staff has not taken him to the orthopedic surgeon as recommended by the hospital.	No

III. METHODOLOGY

10/01/2025	Special Investigation Intake 2026A0116001
10/01/2025	APS Referral Received, denied for investigation.
10/02/2025	Special Investigation Initiated - On Site Licensee designee, Kristina Yates, reviewed incident report and Resident A's most recent physical.
10/02/2025	Contact - Telephone call received Medication coordinator, Armildred Larabell.
10/06/2025	Contact - Face to Face Resident A.
10/17/2025	Contact - Telephone call made Staff, Roberta Hatfield. Left a message requesting a return call.
10/17/2025	Contact - Telephone call made Monroe County Guardian, Jessica Tower. Left a message requesting a return call,
10/20/2025	Contact - Telephone call received Staff, Roberta Hatfield.
10/21/2025	Contact - Telephone call made Monroe County Guardian, Jessica Tower Left a message requesting a return call.
10/22/2025	Contact - Telephone call received Monroe County Guardian, Jessica Towers.
10/22/2025	Exit Conference

	With licensee designee, Kristina Yates.
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ALLEGATION:

Resident A fell last week, his leg is black, and he can barely walk. Resident A went to church, they called 911 and he was transported to the hospital. The hospital referred Resident A to an orthopedic surgeon. The staff has not taken him to the orthopedic surgeon as recommended by the hospital.

INVESTIGATION:

On 10/02/25, I conducted an unscheduled onsite inspection and interviewed licensee designee, Kristina Yates. Ms. Yates reported that on 09/19/25, Resident A, who is fully ambulatory, had an unwitnessed fall in the upstairs hallway outside of his bedroom. Ms. Yates reported that she was not present at the time of the incident, however, reviewed the incident report completed by staff, Roberta Hatfield, who was on shift at the time of the fall. Ms. Yates reported that she also spoke with Ms. Hatfield and Resident A about the incident. Ms. Yates reported that Ms. Hatfield reported she was on the main floor of the facility completing chores, when Resident B came and told her that Resident A had fallen outside of his bedroom and was on the floor. Ms. Hatfield went upstairs and observed Resident A sitting on the floor. Ms. Hatfield reported that she asked Resident A how he fell, and he reported that he did not know. Ms. Hatfield asked Resident A if he was able to get up and if he was in any pain. Resident A was able to get up and reported that his right knee was a little sore. Ms. Yates reported that Ms. Hatfield gave Resident A an icepack for his knee and reported that he applied it to his knee, did not complain of any additional pain and went to his workshop program. Ms. Yates reported that since the fall Resident A has not complained of pain but had some bruising around his knee area. Ms. Yates reported that Resident A resumed all of his normal activities and was his normal self. She reported that Resident A is a walker and was out walking to his church, went to the church picnic the following day (09/20/25), walked to subway and in the community with no issues or complaints of pain. Ms. Yates reported that Resident A went to church on 09/21/25 and must have shared with some of the members that he had fallen and was not taken to the hospital. One of the members, unknown to her, called 911 and had Resident A taken to the hospital, where he was evaluated and released the same day. Resident A was diagnosed with muscle pain. Ms. Yates reported that Resident A is an attention seeker, and she can only imagine what he told the church members.

Ms. Yates reported that the hospital discharge paperwork recommended follow up with the orthopedic surgeon. Ms. Yates reported that their medical coordinator, Armildred Larabell, called the orthopedic surgery department as recommended by the treating physician at the hospital. However, after their review of the hospital

records, they informed Ms. Larabell that they did not need to see Resident A as he was diagnosed with muscle pain and no findings of any broken or fractured bones.

Ms. Yates reported that Resident A was seen by his primary care physician on 10/01/25 and he reported that Resident A was in good health and documented no concerns regarding his knee. Ms. Yates reported that Resident A's physician advised him to limit all of the walking he has been doing until his knee soreness subsides, as it could contribute to more pain and swelling. Ms. Yates reported that she has had ongoing issues with the church members over stepping and also using the residents that frequent the church to do chores and jobs that they can't get anyone else to do. She reported that she has been in touch with several of the guardians and is working with them to try to intervene on behalf of the residents. Ms. Yates reported that she is bothered that the church is taking advantage of the residents.

Ms. Yates reported that Resident A was at his workshop program and is home daily after 3:30.

I reviewed the incident report dated 09/19/25, completed by staff, Roberta Hatfield. The incident report documents the unwitnessed fall of Resident A in the hallway outside his bedroom.

On 10/02/25, I interviewed medication coordinator, Armildred Larabell. Ms. Larabell reported that she contacted the orthopedic surgeon's office on 09/22/25 (the day after the hospital visit) and spoke with the receptionist (Ms. Larabell could not recall her name). Ms. Larabell reported that the receptionist called her back after speaking with the orthopedic surgeon. After the surgeon's review of the hospital records, which show all the testing that was completed and Resident A's diagnosis, they would not need to see him. Ms. Larabell reported that the hospital did a brain scan, computed tomography (CT) scan, x-rays of Resident A's leg and femur, and documented that he did not sustain any broken or fractured bones. Resident A was only diagnosed with muscle pain. Ms. Larabell reported if Resident A needed medical care, the staff would have sought it for him as they always do.

Ms. Larabell reported that she took Resident A to see his primary care physician, Dr. Steckmeyer, for his annual physical on 10/01/25. During the visit the doctor looked at Resident A's knee and observed some slight swelling. Ms. Larabell reported that Dr. Steckmeyer, advised Resident A to limit the walking, as it was likely causing the swelling and soreness.

Ms. Larabell added that Resident A was out the following day after the fall walking over a mile away to subway and never complaining of pain to her or the other staff.

On 10/06/25, I conducted a scheduled onsite inspection and interviewed Resident A. Resident A reported that he fell a couple weeks ago outside his bedroom. Resident A reported that he was unsure of what happened or how he fell. He reported that he

had some bruising, swelling and soreness to his right knee. Resident A reported that the bruises are gone and that he is not in any pain. Resident A reported that staff, Roberta Hatfield, gave him an ice pack to put on his knee right after he fell and he felt better. Resident A reported that he went to program shortly after the fall because he was not hurt. Resident A reported that he did not complain of pain to any of the staff, because he was not in pain. He reported that his knee was just a little sore, especially after he finished walking in the community. Resident A reported that he went to church a couple days after falling and told a couple of the members that he had fallen and hadn't seen a doctor yet. Resident A reported that the members felt that he needed to go to the hospital. He reported that they called non-emergency transport, and he was taken to the hospital and later returned home. Resident A reported he does not have any broken bones and feels good. He reported that he loves living at the home, the staff treat him really nice and take good care of him.

On 10/20/25, I interviewed staff, Roberta Hatfield, and she reported that she was the staff on shift at the time of the incident. Ms. Hatfield reported that she was on the main floor of the home, when Resident B came to her and reported that Resident A had fallen and may need help. Ms. Hatfield reported that she went upstairs and observed Resident A sitting on his buttocks on the floor. She asked him what happened, and he reported that he fell, but did not know how. Ms. Hatfield asked him if he was in any pain and able to move or get up. Resident A reported that he his knee was a little sore, but he was able to get up and move it with no problem. Ms. Hatfield looked at Resident A's knee and did not observe anything concerning. She gave him an icepack which he placed on his knee. She asked him if he planned to stay home or was he okay to go to his workshop program. Ms. Hatfield reported that Resident A reported that he was fine and wanted to go to his program. Ms. Hatfield reported that she was off work when Resident A returned from program, however reported the days that she has worked since the fall, he has been fine, continues to walk to subway and in the community and has not complained of any pain or discomfort to her.

On 10/22/25, I interviewed Monroe County Guardian, Jessica Towers, and she reported that she is the guardian advocate for Resident A. She reported that Elm House staff provide great care to its residents, and she has not had any concerns. Ms. Towers reported that if Resident A needed medical care the staff at the home would have sought it for him. She reported that Resident A exhibits attention seeking behaviors and uses ailments to get attention from the church or whomever.

On 10/22/25, I conducted the exit conference with licensee designee, Kristina Yates, and informed her of the findings of the investigation. Ms. Yates agreed with the findings.

APPLICABLE RULE	
R 400.15310	Resident health care.
	(4) In case of an accident or sudden adverse change in a resident's physical condition or adjustment, a group home shall obtain needed care immediately.

<p>ANALYSIS:</p>	<p>Based on the findings of the investigation, which included interviews of licensee designee, Kristina Yates, medication coordinator, Armildred Larabell, Resident A, staff, Roberta Hatfield, and Monroe County Guardian, Jessica Towers, there is not a preponderance of evidence to substantiate the allegation.</p> <p>Ms. Yates reported that Resident A's fall did not require medical care and medication coordinator, Armildred Larabell, followed up with the orthopedic surgeon's office as recommended. The orthopedic surgeon reported that Resident A did not need to be seen as he did not sustain any fractured or broken bones.</p> <p>Ms. Larabell reported that she called the orthopedic surgeon's office on 09/22/25 (the day after the hospital visit) and was informed that after review of the hospital work up and findings, Resident A did not require a visit with the orthopedic surgeon.</p> <p>Resident A reported that he fell but was fine. Resident A reported that his right knee was sore and had some bruising after the fall, but he denied being in pain. Resident A reported his church members believed that he needed to be seen by a doctor.</p> <p>Ms. Hatfield reported that after the fall Resident A reported that he was fine, and that his knee was just a little sore. She provided an ice pack to Resident A to apply to his knee, and he went to his workshop program. Ms. Hatfield reported Resident A did not complain of any pain or discomfort to her during the other shifts she worked after the fall.</p> <p>Ms. Towers reported that she does not have any concerns regarding the staff or the care they provide. She reported if Resident A required medical attention, the staff would have sought it. Ms. Towers added that Resident A is an attention seeker and uses his ailments to get attention from the church members or whomever.</p> <p>This violation is not established as Resident A's fall did not elicit a change in his physical condition or adjustment and did not require medical attention.</p>
<p>CONCLUSION:</p>	<p>VIOLATION NOT ESTABLISHED</p>

IV. RECOMMENDATION

I recommend the status of the license remain unchanged.



Pandrea Robinson
Licensing Consultant

10/24/25
Date

Approved By:



10/27/25

Ardra Hunter
Area Manager

Date