



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

January 27, 2026

Harish Sathri  
Elderly Solutions, Inc.  
100 Santure Road  
Monroe, MI 48162

RE: License #: AS580255782  
**Elderly Solutions, Inc.**  
**100 Santure Road**  
**Monroe, MI 48162**

Dear Mr. Sathri:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 licensee or licensee designee or home for the aged authorized representative and a date.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan within 15 days.

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (313) 456-0439.

Sincerely,

A handwritten signature in blue ink that reads "Pandrea Robinson". The signature is written in a cursive, flowing style.

Pandrea Robinson, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
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**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

**License #:** AS580255782

**Licensee Name:** Elderly Solutions, Inc.

**Licensee Address:** 100 Santure Road  
Monroe, MI 48162

**Licensee Telephone #:** (734) 219-1290

**Licensee Designee:** Harish Sathri

**Administrator:** Harish Sathri

**Name of Facility:** Elderly Solutions, Inc.

**Facility Address:** 100 Santure Road  
Monroe, MI 48162

**Facility Telephone #:** (734) 240-2374

**Original Issuance Date:** 07/11/2003

**Capacity:** 6

**Program Type:** PHYSICALLY HANDICAPPED  
ALZHEIMERS  
AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 01/12/2026

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 6

No. of others interviewed [redacted] Role: [redacted]

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication record(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain.
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.
- Fire safety equipment and practices observed? Yes  No  If no, explain.
- E-scores reviewed? (Special Certification Only) Yes  No  N/A   
If no, explain.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  No  If no, explain.  
No incident reports required additional follow up.
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s:  
CAP dated 02/01/24; Rule 631(5) 631(4) 675(4) and 619(8) are the updated rules  
for 205(5), 205(6) 312 (4) 318(5) as promulgated 11/03/2025 N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes  (please explain) No  N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

**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.**

**(6) If an adult foster care facility determines it necessary to employ or independently contract with an individual before receiving the results of the individual's criminal history check or criminal history record information required under this section, the adult foster care facility may conditionally employ the individual if all of the following apply:**

**(c) Except as otherwise provided in this subdivision, the adult foster care facility does not permit the individual to have regular direct access to or provide direct services to residents in the adult foster care facility without supervision until the criminal history check or criminal history record information is obtained and the individual is eligible for that employment. If required under this subdivision, the adult foster care facility shall provide on-site supervision of an individual in the facility on a conditional basis under this subsection by an individual who has undergone a criminal history check conducted in compliance with this section. An adult foster care facility may permit an individual in the facility on a conditional basis under this subsection to have regular direct access to or provide direct services to residents in the adult foster care facility without supervision if all of the following conditions are met:**

**(i) The adult foster care facility, at its own expense and before the individual has direct access to or provides direct services to residents of the facility, conducts a search of public records on that individual through the internet**

**criminal history access tool maintained by the department of state police and the results of that search do not uncover any information that would indicate that the individual is not eligible to have regular direct access to or provide direct services to residents under this section.**

**(ii) Before the individual has direct access to or provides direct services to residents of the adult foster care facility, the individual signs a statement in writing that he or she has resided in this state without interruption for at least the immediately preceding 12-month period.**

**(iii) If applicable, the individual provides to the department of state police a set of fingerprints on or before the expiration of 10 business days following the date the individual was conditionally employed under this subsection.**

At the time of inspection, I reviewed 2 of 9 employee records and observed that Modesti Stump's employee record did not contain verification that she had submitted fingerprints. Ms. Stump was conditionally hired on 12/17/25. Home manager, Brandy Bray, reported that Ms. Stump is scheduled to submit her fingerprints on 01/14/26. Ms. Stump has been working independently with residents and has been counted in the staff to resident ratio since 12/22/25.

**R 400.615 Resident register.**

**A licensee shall maintain a chronological register of all residents admitted that includes the following information for each resident:**

- (a) Resident full name.**
- (b) Resident date of birth.**
- (c) Date of admission.**
- (d) Date of discharge and location, if known, where the resident moved.**

At the time of inspection, I observed the following;

- The resident register was not a chronological register of all residents admitted.
- It did not contain the residents' dates of birth.
- Resident B's date of admission was incorrect.

**R 400.637 Handling of resident funds and valuables.**

**(4) A licensee shall record in the resident record a resident funds and itemized transactions including payment for services provided for each resident.**

At the time of inspection, I reviewed 3 of 5 resident records and observed that Residents A-C did not have an itemized transaction record documenting cost of care payments.

**R 400.639                    Staff records.**

(1) A licensee shall maintain a record for each staff that contains all of the following:

(f) Verification of not less than 2 reference checks. If reference checks cannot be obtained, documentation verifying reference checks were attempted must be maintained.

At the time of inspection, I observed 2 of 9 employee records and observed that Modesti Stump's record did not contain verification of reference checks or documentation verifying reference checks were attempted.

**R 400.645                    Environmental health.**

(3) A licensee shall provide hot and cold running water under pressure. A licensee shall maintain the hot water temperature for a resident's use at a range of 105 degrees Fahrenheit to 120 degrees Fahrenheit at the fixture.

At the time of inspection, the hot water in the home tested at 78 degrees Fahrenheit.

**R 400.645                    Environmental health.**

(7) Poisons, caustics, and other dangerous materials must be stored and safeguarded in nonresident, non-food preparation areas, and storage areas.

At the time of inspection, I observed caustics stored in the kitchen under the sink in an unlocked cabinet.

**R 400.647                    Safety and maintenance of premises.**

(1) A facility must be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.

At the time of inspection, I observed the following:

- The parking lot had two large potholes and crumbling asphalt. There was another area of the parking lot that was covered in ice. Licensee designee, Harish Sathri, reported that a city pipe underground had burst causing large amounts of standing water.
- In bedroom #3 near the recliner there were multiple extension cords that present a trip/fall risk.

**R 400.647                      Safety and maintenance of premises.**

(14) Handrails and nonskid surfacing must be installed in showers and bath areas.

At the time of inspection, I observed the tub did not contain non-skid surfacing.

**R 400.647                      Safety and maintenance of premises.**

(2) Home furnishings and housekeeping standards must present a comfortable, clean, and orderly appearance.

At the time of inspection, I observed bedroom #1 was missing the window covering over the large picture window. Licensee designee, Harish Sathri, reported someone must have taken it down and never put it back up.

**R 400.647                      Safety and maintenance of premises.**

(5) Floors, walls, and ceilings must be cleanable, maintained clean, and in good repair.

At the time of inspection, I observed the following:

- The walls throughout the home had paint chips, dings/dents, scratches, and areas of discoloration.
- The ceiling in bedroom #1 appeared to have some repair work. The area still had a crack through it and was not in good repair. The ceiling also had areas that had dust webs.

**R 400.661                      Bedroom furnishings.**

(2) The bed and mattress in subrule (1) of this rule can be removed from the bedroom if the resident or resident representative requests that it be removed, the resident's health care professional approves an alternative sleeping arrangement, and it is documented in the assessment plan.

At the time of inspection, Resident C's bedroom did not contain a bed. Resident C's record did not contain approval from her health care professional approving an alternative sleeping arrangement nor was it documented in her assessment plan.

**R 400.665                      Food service.**

(10) Food preparation surfaces and areas must be clean and in good repair.

At the time of inspection, I observed the kitchen island to have two very large deep cracks on each side. The stove was filthy with dried food and liquid that stained the inside of the stove door.

**R 400.665                      Food service.**

(8) Kitchen appliances must be properly installed and maintained according to the manufacturer's instructions.

At the time of inspection, the oven in the kitchen was inoperable. Licensee designee, Harrish Sathri, reported that the employees are preparing all the meals at their adjoining licensed home. I also observed the island cooktop range missing 3 of the 5 control knobs. Home manager, Brandy Bray, reported that they use the island cooktop and remove the control knobs for the safety of the residents. Ms. Bray was unable to locate the control knobs.

**R 400.671                      Resident care.**

(3) A licensee shall ensure that interactions with residents promote and encourage cooperation, self-esteem, self-direction, independence, and normalization.

At the time of inspection, I observed a lock on the refrigerator. Home manager, Brandy Bray, reported that the lock was there because they have a resident that goes in and out of the refrigerator trying to constantly eat. Locking the refrigerator does not promote or encourage independence and normalization.

**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:

- (i) Medication name.
- (ii) Dosage.

- (iii) Label instructions for use.
- (iv) Time to be administered.
- (v) Initials of the individual who administered the medication at the time given.
- (vi) Resident's refusal to accept prescribed medication or procedures at time of refusal.

At the time of inspection, I observed Resident A's medication administration record (MAR) and observed the following:

- Initials of the individual who administered Resident A's Humalog pen were missing for the 11:30 a.m. dosage on 01/02/26, 01/03/26, 01/08/26 and 01/11/26. Initials were also missing for the 3:30 p.m. dosage on 01/01/26, 01/02/26, 01/04/26, 01/05/26, 01/06/26.
- The 3:30 p.m. dose 01/12/26 was initialed as given, however, I reviewed the MARS at 11:57 a.m. on 01/12/26.
- The initials were also missing on 01/03/26 and 01/05/26, for Resident A 1:30 a.m. peanut butter with jelly sandwich and full glass of milk.

**R 400.685                      Resident admission; resident assessment plan; resident care agreement; health care appraisal.**

(4) A written assessment plan must be completed with and signed by the resident or the resident's designated representative, responsible agency if applicable, and the licensee at the time of admission and annually thereafter. A licensee shall maintain a copy of the resident's most recent assessment plan on file at the facility for up to 2 years after discharge.

At the time of inspection, I reviewed 3 of 5 resident records and observed that Resident B was admitted into the home in September of 2025. Licensee designee, Harish Sathri, was unable to provide her exact admission date. He reported that Resident A lived at the adjoining licensed home before moving here. Resident A's assessment plan was not completed until 12/22/25 and is not signed by the licensee designee. Resident C's assessment plan was not fully completed and had areas on each page that were blank and unanswered.

**R 400.685                      Resident admission; resident assessment plan; resident care agreement; health care appraisal.**

(6) A licensee shall complete a written resident care agreement at the time of a resident's admission that includes all of the following:

- (a) A statement that the facility is licensed to provide foster care to adults.

- (b) The services to be provided and the fee for those services.
- (c) Any additional costs in addition to the basic fee that is charged.
- (d) A resident's rights policy.
- (e) A discharge policy.
- (f) Transportation services provided for a basic fee and services that are provided at an extra cost.
- (g) A refund policy.
- (h) A resident's funds and valuables policy.
- (i) An agreement by the licensee to provide care, supervision, and protection to the resident and to ensure transportation services as indicated in the resident's assessment plan and resident care agreement.
- (j) An agreement by the licensee to respect and safeguard the resident's rights.
- (k) An agreement by the licensee and resident or the resident's designated representative to follow the facility's discharge policy.
- (l) An agreement by the resident, resident's designated representative, or responsible agency to provide necessary intake information, including health-related information, at the time of admission.
- (m) An agreement by the resident or the resident's designated representative to provide a current health care appraisal.
- (n) An agreement by the resident to follow written house rules if any.

At the time of inspection, I reviewed 3 of 5 resident records and observed that Resident B did not have a complete care agreement at the time of admission. A copy of a blank care agreement was in her record. Resident B was admitted in September of 2025.

**R 400.691            Resident records.**

- (1) A licensee shall complete and maintain a separate record for each resident that includes all of the following:
  - (g) Admission and monthly weight record.

At the time of inspection, I observed 3 of 5 resident records and observed that Resident B's record did not contain an admission weight (September 2025) or monthly weights for October, November, and December 2025.

**R 400.725            Means of egress.**

- (1) A means of egress must be considered the entire way and method of passage through the facility and out an exit door to

free and safe ground outside the facility and must be arranged and maintained to provide free and unobstructed egress from all parts of the facility.

At the time of inspection, I observed the second means of egress, which is equipped with a ramp, to have tree branches growing through some of the wood slats and other debris on the ramp. The ramp also terminated on grass, which does not allow wheelchairs to safely move to free and safe ground, preventing unobstructed egress.

On 01/12/26, I conducted the exit conference onsite and via telephone on 01/23/26, with licensee designee, Harish Sathri, and informed him of the rules cited. Mr. Sathri reported an understanding and willingness to do what is required to come into compliance.

On 11/05/2025, the department received an on-line renewal application from Harish Sathri. When a licensee and or applicant submit an application, they attest to the following:

- I have read 1979 PA 218 and the Administrative Rules regulating the operation of Adult Foster Care Facilities. If granted a license I will comply with the Act and these rules.

Having attested to the reading of 1979 PA 218 and the Administrative Rules and further to be in compliance with the Act and these rules, Mr. Sathri is in substantial noncompliance with the Act or administrative rules. The totality of the rules cited in this licensing study report jeopardizes the health, safety, care, treatment, maintenance, or supervision of individuals receiving services.

#### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, issuance of a provisional license is recommended.



Pandrea Robinson  
Licensing Consultant

01/23/26  
Date

Approved by:



Ardra Hunter  
Area Manager

01/27/26  
Date