GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

July 27, 2026

Elonda Grubbe
Macomb Residential Opportunities Inc.
Suite #102
14 Belleview
Mt Clemens, MI 48043

RE: License #: AS580401443
Hendricks Home
1117 John L
Monroe, MI 48162

Dear Ms. Grubbe:

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.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

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) 456-0380.

Sincerely,

Pandrea Robinson, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place Ste 2-730
3044 W Grand Blvd, Annex
Detroit, MI 48202
(313) 319-9682

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

I. IDENTIFYING INFORMATION

License #:	AS580401443
Licensee Name:	Macomb Residential Opportunities Inc.
Licensee Address:	Suite #102 14 Belleview Mt Clemens, MI 48043
Licensee Telephone #:	(586) 469-4480
Licensee/Licensee Designee:	Elonda Grubbe
Administrator:	Elonda Grubbe
Name of Facility:	Hendricks Home
Facility Address:	1117 John L Monroe, MI 48162
Facility Telephone #:	(734) 244-5309
Original Issuance Date:	02/24/2020
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 07/23/2026

Date of Bureau of Fire Services Inspection if applicable:

Date of Environmental/Health Inspection if applicable: 07/23/2026

No. of staff interviewed and/or observed 2
No. of residents interviewed and/or observed 2
No. of others interviewed Role:

- 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.
- Corrective action plan compliance verified? Yes ☒ CAP date/s and rule/s: CAP dated07/25/24 Rules 803(6), 208 (1) (e) , 301 (10), 312 (4) (a) new rules as promulgated 11/03/26; 715(4),639 (1)(e) 685 (10) 675(4) (a)
- 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 determined to be in substantial compliance with rules and requirements.

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

R 400.639 Staff records.

(1) A licensee shall maintain a record for each staff that contains all of the following:
(e) Verification of experience, highest level of education completed, and training.

At the time of inspection, staff, Sandra Rheinschmidt's, record did not contain verification of education.

***Repeat violation established* LSR dated 07/22/24; CAP dated 07/25/24.**

R 400.639 Staff records.

(1) A licensee shall maintain a record for each staff that contains all of the following:
(i) Verification of the receipt by the staff of personnel policies and job descriptions.

At the time of inspection, staff, Sandra Rheinschmidt's record did not contain verification of the receipt of all required personnel policies.

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

(10) A resident or resident's designated representative shall provide a written health care appraisal or a medical discharge summary by an appropriate health care professional that is completed within the 90-day period before admission. A written health care appraisal must be completed at least annually thereafter. If a written health care appraisal is not available at the time of an emergency admission, a licensee shall require that the appraisal be completed no later than 30 days after admission.

At the time of inspection, Resident A and B did not have annual health care appraisals completed in 2025.

***Repeat violation established* LSR dated 07/22/24; CAP dated 07/25/24.**

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

(8) A resident care agreement must be signed by all applicable parties. A copy of the signed resident care agreement along with copies of the policies listed in subrule (6) of this rule must be provided to the resident or the resident's designated representative and maintained in the resident's record.

At the time of inspection, Resident A's 2026 care agreement was not signed by the licensee designee.

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

(9) A licensee shall review the written resident care agreement with the resident, resident's designated representative, or responsible agency at least annually or more often if necessary. Any changes to the resident care agreement must be re-signed by all applicable parties. If the annual review results in no changes to the resident care agreement the resident care agreement does not need to be re-signed but the licensee shall document that all applicable parties were contacted and agreed that no changes were necessary.

At the time of inspection, Resident A did not have an annual care agreement completed for 2025.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

Pandrea Robinson
Licensing Consultant

07/27/26
Date