GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

September 28, 2026

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

RE: License #: AS580291609
Investigation #: 2026A0575043
Elderly Solutions Inc - II

Dear Mr. Sathri:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

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 (517) 284-9720.

Sincerely,

Jeffrey J. Bozsik, Licensing Consultant
Bureau of Community and Health Systems
(734) 417-4277

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

I. IDENTIFYING INFORMATION

License #:	AS580291609
Investigation #:	2026A0575043
Complaint Receipt Date:	09/21/2026
Investigation Initiation Date:	09/22/2026
Report Due Date:	10/21/2026
Licensee Name:	Elderly Solutions, Inc.
Licensee Address:	100 Santure Road Monroe, MI 48162
Licensee Telephone #:	(734) 240-2374
Administrator:	Harish Sathri
Licensee Designee:	Harish Sathri
Name of Facility:	Elderly Solutions Inc - II
Facility Address:	100 Santure Rd #2 Monroe, MI 48162
Facility Telephone #:	(734) 240-2374
Original Issuance Date:	09/12/2007
License **Status:**	REGULAR
Effective Date:	04/09/2026
Expiration Date:	04/08/2028
Capacity:	6
Program Type:	PH; AGED; ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Owners are violating staffing rules by having only one staff member per shift, making two-person assist care unsafe.	Yes

III. METHODOLOGY

09/21/2026	Special Investigation Intake-2026A0575043
09/21/2026	APS Referral
09/22/2026	Special Investigation Initiated - On Site
09/22/2026	Inspection Completed On-site- Interviews with: (a) direct care staff Gabby Sprinkle; (b) home manager Amy South; (c) Residents A, E; (d) hospice nurse Lindsay Barron
09/22/2026	Contact - Telephone call made-(1) Guardian A1; (2) direct care staff (a) Nicole Bashaw; (b) Anne Rockey; (c) Hannah Taylor.
09/22/2026	Inspection Completed-BCAL Sub. Compliance
09/22/2026	Exit Conference with Harish Sathri, licensee designee

ALLEGATION:

Owners are violating staffing rules by having only one staff member per shift, making two-person assist care unsafe.

INVESTIGATION:

On 9/21/2026, an APS referral was received.

On 9/22/2026, I interviewed direct care staff Gabby Sprinkle. She stated that there is only one staff member scheduled to work per shift. She provided a copy of the staffing schedule that showed one staff member per shift, except for an hour in the morning (6:00am-7:00am), and for 3 hours in the evening (7:00pm-10:00pm) when there are two staff members on duty. She further stated that Resident A is the resident who requires two staff to assist him getting out of bed. She said the other residents only need assistance from one staff member.

On 9/22/2026, I interviewed Residents A and E. Residents B, C, and D were not interviewed because they were sleeping. Resident A was lying in bed and stated that he needed staffs assistance to get out of bed. Resident E stated that she used a walker but only needed one staff member to assist her getting up.

On 9/22/2026, I interviewed Guardian A1. She stated that she had no knowledge of Resident A needing 2 staff to assist him out of bed.

On 9/22/2026, I interviewed home manager Amy South. She stated that she completes the schedule, but Harish Sathri, the licensee designee decides the staffing level. She provided Residents A-E current year AFC assessment plans which showed that Resident A was the only resident requiring additional staffing, although the language describing resident assistance was vague. She stated that Resident A gets a bed bath, his diaper is changed in bed, and he only needs a 2 person assist when he is being weighed weekly. She stated that there was only one staff on duty because there are only 5 residents in the facility and it would cost too much to have a second staff on duty 24/7.

Furthermore, I requested Amy South to provide me copies of the staffs training in providing 2 person assistance. I found that none of the current staff have any documented training on how to properly perform a 2 person assist to prevent injury to both Resident A and the staff.

On 9/22/2026, I interviewed Resident A's hospice nurse, Lindsay Barron. She stated that Resident A does require 2 person assistance since the staff use a Hoyer lift to get him out of bed.

On 9/22/2026, I interviewed direct care staffs Nicole Bashaw, Anne Rockey, and Hannah Taylor. Nicole Bashaw stated that sometimes they require 2 staff members on duty to assist Resident A. Staff Anne Rockey stated that she is pregnant and needs 2 staff on duty to assist with Resident A for his safety and her own. Staff Hannah Taylor did not return my telephone calls.

On 9/22/2026, I conducted an exit conference with Harish Sathri, licensee designee. He thanked me for calling him, said he understood my findings, and stated that he would send in a plan of correction once he receives the final special investigation report.

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.

ANALYSIS:	Since Resident A requires two staff for transfers and there are only two staff on duty for 4 hours per day, Harish Sathri does not provide supervision, protection, and personal care as specified in Resident A's assessment plan.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt of an acceptable plan of correction,
I recommend no change in the license status.



Jeffrey J. Bozsik
Licensing Consultant
Date: 9/23/2026

Approved By:



Ardra Hunter
Area Manager
Date: 9/28/2026