



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

November 7, 2025

Betty Mackie  
Henry's Inc.  
P.O. Box 81733  
Rochester, MI 48308

RE: License #: AS820273992  
**Henry's Inc. Paradise Home**  
**30935 Pennsylvania**  
**Romulus, MI 48174**

Dear Betty Mackie:

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) 456-0439.

Sincerely,

A handwritten signature in black ink, appearing to read 'D Walker'.

Denasha Walker, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Pl. Ste 9-100  
3026 W. Grand Blvd  
Detroit, MI 48202  
(313) 300-9922

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

**I. IDENTIFYING INFORMATION**

**License #:** AS820273992

**Licensee Name:** Henrys Inc.

**Licensee Address:** P.O. Box 81733  
Rochester, MI 48308

**Licensee Telephone #:** (313) 910-2951

**Licensee/Licensee Designee:** Betty Mackie, Designee

**Administrator:** Shelia Hawkins

**Name of Facility:** Henry's Inc. Paradise Home

**Facility Address:** 30935 Pennsylvania  
Romulus, MI 48174

**Facility Telephone #:** (313) 363-7018

**Original Issuance Date:** 06/07/2005

**Capacity:** 6

**Program Type:** PHYSICALLY HANDICAPPED  
DEVELOPMENTALLY DISABLED  
MENTALLY ILL  
TRAUMATICALLY BRAIN INJURED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 11/07/2025

Date of Bureau of Fire Services Inspection if applicable:

Date of Health Authority Inspection if applicable:

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 4

No. of others interviewed 1 Role: Administrative Assistant

- 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 Dated 11/09/2023 R400.14312 (4b), R400.14318 (5) 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:

**R 400.619                      Emergency preparedness plan.**

(8) A licensee shall practice the emergency preparedness plan, including the fire safety plan, at least once a quarter per calendar year during each shift, 7 a.m. to 3 p.m., 3 p.m. to 11 p.m. and 11 p.m. to 7 a.m. A record of the practices must be maintained for 2 years.

At the time of inspection, fire drills for the fourth quarter of 2023 were not available for department review.

**\*REPEAT VIOLATION ESTABLISHED\* LSR DATED 11/08/2023; CAP DATED 11/09/2023.**

It should be noted that I observed fire drills that were pre-completed dated 11/15/2025 and 12/9/2025. Home Manager onsite, L. Edwards, was unable to explain why the fire drills were pre-completed.

**R 400.631                      Health screenings.**

(2) A licensee shall have on file a statement signed by a licensed physician or physician's designee attesting to the physical health of the licensee, staff, and members of the household. Statements for the licensee and administrator must be signed no more than 6 months before the issuance of a temporary license and at any other time requested by the department. Statements for staff and members of the household must be obtained within 30 days of employment start date, assumption of duties, or occupancy in the facility.

At the time of inspection, direct care staff Sabrina Jackson employee file did not contain a statement signed by a licensed physician or physician's designee attesting to her health within 30 days of employment start date, assumption of duties in the facility.

**R 400.639                      Staff records.**

(1) A licensee shall maintain a record for each staff that contains all of the following:  
(a) Name, address, telephone number, and Social Security number.

(b) Copy or number of a professional or vocational license, certification, or registration if staff provides professional or vocational services.

(c) Copy of a driver's license if staff provide transportation services.

(d) Verification of age.

(e) Verification of experience, highest level of education completed, and training.

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

(g) Beginning and ending dates of employment on separation.

(h) Health information as required by these rules.

(i) Verification of the receipt by the staff of personnel policies and job descriptions.

At the time of inspection, direct care staff Sabrina Jackson employee file did not contain a verification of not less than 2 reference checks.

**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 Fahrenheit to 120 degrees Fahrenheit.

**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, the resident bathroom was not equipped with nonskid surfacing in the shower area.

**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:

(a) Be trained in the proper handling and administration of medication.

(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.
- (c) Record the reason for each administration of medication that is prescribed on an as needed basis.
- (d) Initiate a review process to evaluate a resident's condition if a resident requires the repeated and prolonged use of a medication that is prescribed on an as-needed basis. The review process must include the resident's prescribing licensed health care professional and resident, resident's designated representative, and responsible agency if applicable.
- (e) Not adjust or modify a resident's prescription medication without instructions from a physician, physician assistant, advanced practice nurse, or a pharmacist who has knowledge of the medical needs of the resident. A licensee shall record in writing any instructions regarding a resident's prescription medication.
- (f) Contact the resident's licensed health care professional or the appropriately licensed health care professional who prescribed the medication when a medication error occurs.
- (g) Contact the appropriately licensed health care professional when a resident refuses a prescribed medication or procedure. A licensee, administrator, or staff shall document and follow the instructions given by the licensed health professional. Documented instructions may include procedures to follow when a resident refuses medication or procedures in the future.

At the time of inspection, Resident A's medication administration records did not contain the initials of the individual who administered the medication on 11/01/2025 at 8:00 a.m. The following medications were not initialed:

- Amlodipine Besylate 10mg tab, take one tablet by mouth every day.
- Docusate Sodium 100mg CAP, take one capsule by mouth every day.
- Ferosul 325mg PO TABE, take one tablet by mouth twice daily.
- Furosemide 20mg tab, take one tablet by mouth every day.
- Lisinopril 2.5mg PO tab, take one tablet by mouth every day.
- Metoprolol Tart 25mg tab, take one tablet by mouth every day.
- Omeprazole 20mg PO CAP, take one capsule by mouth every day.
- Westab Max B tab, take ½ tablet by mouth every day.
- Vitamin D 50000 Unit PO CAP, take 1 capsule by mouth every month.

**\*REPEAT VIOLATION ESTABLISHED\* LSR DATED 11/08/2023; CAP DATED 11/09/2023.**

**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, Residents A and B resident file did not contain health care appraisal or a medical discharge summary by an appropriate health care professional that is completed within the 90-day period before admission.

#### **IV. RECOMMENDATION**

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



11/07/2025

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Denasha Walker  
Licensing Consultant

Date

