GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

January 16, 2026

Sally Londry
S & D Senior Living Home
1359 S. Colling Rd.
Caro, MI 48723

RE: License #: AM790388202
Investigation #: 2026A0572013
S&D Senior Living Home

Dear Sally Londry:

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.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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) 643-7960.

Sincerely,

Anthony Humphrey, Licensing Consultant
Bureau of Community and Health Systems
411 Genesee
P.O. Box 5070
Saginaw, MI 48605
(810) 280-7718

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM790388202
Investigation #:	2026A0572013
Complaint Receipt Date:	12/02/2025
Investigation Initiation Date:	12/05/2025
Report Due Date:	01/31/2026
Licensee Name:	S & D Senior Living Home
Licensee Address:	1359 S. Colling Rd. Caro, MI 48723
Licensee Telephone #:	(989) 286-3711
Administrator:	Sally Londry
Licensee Designee:	Sally Londry
Name of Facility:	S&D Senior Living Home
Facility Address:	1359 S. Colling Rd. Caro, MI 48723
Facility Telephone #:	(989) 286-3711
Original Issuance Date:	10/18/2018
License **Status:**	REGULAR
Effective Date:	04/18/2025
Expiration Date:	04/17/2027
Capacity:	10
Program Type:	AGED

II. ALLEGATION(S)

	Violation Established?
There were no medication lists during annual assessments, so unable to verify the resident's prescribed medications. There is concern the resident may not be receiving the correct medications or dosages due to the facility's lack of proper medication documentation.	Yes

III. METHODOLOGY

12/02/2025	Special Investigation Intake 2026A0572013
12/05/2025	Special Investigation Initiated - On Site Licensee Designee, Shelly Londry, Resident A and Resident B.
01/14/2026	Contact - Telephone call made Resident A's Public Guardian.
01/15/2026	Contact - Telephone call made Resident A's Case Manager, Mandy Geister.
01/16/2026	Inspection Completed-BCAL Sub. Compliance
01/16/2026	Contact - Document Sent Licensee Designee, Sally Londry.
01/16/2026	Exit Conference Licensee Designee, Sally Londry.
01/16/2026	APS referral An APS referral has been made.

ALLEGATION:
There were no medication lists during annual assessments, so unable to verify the resident's prescribed medications. There is concern the resident may not be receiving the correct medications or dosages due to the facility's lack of proper medication documentation.

INVESTIGATION:
On 12/02/2025, the local licensing office received a complaint for investigation. An onsite will be conducted within the week.

On 12/05/2025, I made an unannounced onsite at S&D Senior Living home in Tuscola County Michigan. Interviewed were Licensee Designee, Shelly Londry, Resident A and Resident B.

On 12/05/2025, I interviewed Licensee Designee, Shelly Londry regarding the allegation. Shelly Londry informed that they had to change pharmacies several times for multiple reasons. They are now using Vassar Pharmacy which is in town. Vassar Pharmacy uses the bubble pack, so they know what date medications are administered because of the dates on the bubble pack. Shelly Londry informed me that she ran out of Medication Administration Records (MAR) and just initialed the bubble packs.

On 12/05/2025, I observed medications were in the locked office. There were no current MARs for the medication, so it is difficult to know what medications each resident was prescribed. Initials were observed on the dates in which the medications were popped. Medications were popped and initialed for the morning medications today.

On 12/05/2025, I interviewed Resident B. Resident B informed that she takes medication every morning before breakfast and does not take noon or bedtime medications. There was only one time she missed, but it was because her co-pay went up and Sally Londry had to find a different pharmacy.

On 12/05/2025, I interviewed Resident A regarding the allegation. Resident A informed that she takes medication every morning and again during supper. Resident B denied ever running out of medication. There was a time she didn't take medication, because she refused due to stomach was hurting from bad pancreas.

On 01/14/2026, I contacted Resident A's Public Guardian regarding the allegation. The Public Guardian is not aware of any issues with regards to Resident A not being administered medications and was not aware that S&D Senior Living Home did not have proper documentation for the medications. The only issue that they had with the medication is that S&D Senior Living Home kept having to change pharmacies due to pharmacies either closing or refusing to fill prescriptions because of back co-pays that were owed for other residents in the home. She had to call one of the pharmacies because they received a large bill for insulin, which used to be free.

Resident A's Public Guardian says that it's always a possibility that medications are missed, especially if the home does not have proper documentation.

On 01/15/2026, I contacted Resident A's Case Manager, Mandy Geister, regarding the allegation. Mandy Geister recalled going to the home to conduct annual assessment and observed that S&D Senior Living Home did not have any MARs, therefore she was unable to verify the medications that were prescribed for physical and mental health. Because of this, there is no verification of what medications are being administered and what medications are prescribed. Sally Londry informed that insulin was missing because either insurance wouldn't cover it or pharmacy wouldn't fill it. Mandy Geister wasn't sure because she couldn't verify the insulin on a MAR.

On 01/16/2026, I emailed Licensee Designee, several blank forms, including MARs so that she can print them when needed.

APPLICABLE RULE	
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.**
ANALYSIS:	Based on my interviews of Licensee Designee, Resident A, Resident B, Resident A's Case Manager and Resident A's Guardian, there is enough evidence to establish a licensing rules violation. Sally Londry informed that she had run out of MARs and was just putting initials on bubble packs. The Case Manager informed that while conducting annual assessment, there were no MARs to verify medication prescribed or administered. I also made an unannounced visit to the home and there were no MARs in the medication room. I was unable to verify medications prescribed, administered, missed or discontinued.
CONCLUSION:	**VIOLATION ESTABLISHED**

On 01/16/2026, an exit conference was held with Licensee Designee, Sally Londry. Sally Londry was informed of the findings of this special investigation.

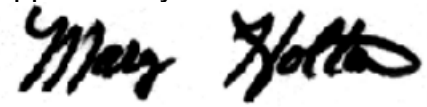
IV. RECOMMENDATION

I recommend that no changes be made to the licensing status of this medium-sized adult foster care group home, pending the receipt of an acceptable corrective action plan (capacity 7-10).

01/16/2026

Anthony Humphrey — Date
Licensing Consultant

Approved By:



01/16/2026

Mary E. Holton — Date
Area Manager