GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 29, 2026

David Call
Freedom Adult Foster Care Corp.
PO Box 1588
Clarkston, MI 48347

RE: License #: AS630012315
Investigation #: 2026A0605022
Gunn Road Home

Dear David Call:

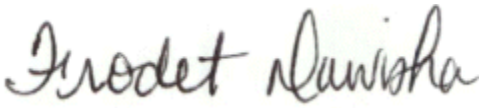
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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 (248) 972-9136.

Sincerely,



Frodet Dawisha, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3044 W. Grand Blvd.
2nd Floor Annex, Ste 2-730
Detroit, MI 48202
(248) 303-6348

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630012315
Investigation #:	2026A0605022
Complaint Receipt Date:	05/18/2026
Investigation Initiation Date:	05/18/2026
Report Due Date:	07/17/2026
Licensee Name:	Freedom Adult Foster Care Corp.
Licensee Address:	3990 Bird Road Clarkston, MI 48348
Licensee Telephone #:	(248) 625-7923
Administrator/ Licensee Designee:	David Call
Name of Facility:	Gunn Road Home
Facility Address:	895 Gunn Road Rochester, MI 48306
Facility Telephone #:	(248) 923-2833
Original Issuance Date:	01/09/1981
License Status:	REGULAR
Effective Date:	06/13/2025
Expiration Date:	06/12/2027
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED

II. ALLEGATION(S)

	Violation Established?
On 05/15/2026, an Oakland County Office of Recipient Rights (ORR) specialist found unauthorized door and window alarms at this group home.	No
On 05/15/2026, an Oakland County Office of Recipient Rights (ORR) specialist found unauthorized padlocks on the refrigerator at this group home.	No
Additional Findings	Yes

III. METHODOLOGY

05/18/2026	Special Investigation Intake 2026A0605022
05/18/2026	Special Investigation Initiated - Telephone Left message for Oakland County Office of Recipient Rights (ORR) worker Amber Oliver
05/18/2026	Contact - Telephone call received Discussed allegations with ORR Amber Oliver
05/18/2026	Contact - Document Received Email from ORR Amber Oliver
05/18/2026	APS Referral Adult Protective Services (APS) referral was not made due to no allegations of abuse/neglect
05/20/2026	Inspection Completed On-site Unannounced on-site investigation conducted
06/11/2026	Contact - Telephone call made Discussed allegations with Easterseals/Macomb Oakland Regional Center (MORC) assistant care coordinator Laura Clarkston and DCS.
06/11/2026	Contact - Document Sent Sent email to Easterseals/MORC supervisor Kari Arms
06/11/2026	Contact - Telephone call made Left messages for DCS and licensee designee David Call

06/11/2026	Contact - Document Received Email from licensee designee David Call
06/15/2026	Contact - Telephone call made Follow-up with Laura Clarkston and Laurie Sears with Open Arms
06/15/2026	Contact - Telephone call received Discussed allegations with DCS, Nicholas Tate with Open Arms, and licensee designee David Call
06/23/2026	Contact - Document Sent Email to David Call
06/29/2026	Contact - Telephone call made Follow-up with home manager LaTonya Addison
06/29/2026	Exit Conference Conducted exit conference with licensee designee David Call with my findings

ALLEGATION:

On 05/15/2026, an Oakland County Office of Recipient Rights (ORR) specialist found unauthorized door and window alarms at this group home.

INVESTIGATION:

On 05/18/2026, intake #210686 was referred by Oakland County Office of Recipient Rights (ORR). ORR specialist Amber Oliver is investigating these allegations.

On 05/18/2026, I discussed the allegations with ORR specialist, Amber Oliver. Ms. Oliver stated that there is an alarm system in the home that is connected to all the doors and the windows. In the past, staff had access to a keypad to disarm the alarms, but currently, the keypad has been removed and now staff cannot disarm the alarms. Whenever the door and/or windows are open, the alarm blares until the door and/or windows are closed. About two years ago, there was a resident eloping from Gunn Road, so the alarm was added; however, that resident passed away and there are currently no elopement issues. Resident B was eloping in the past, but there have not been any current elopement concerns; therefore, there should not be alarms on the doors or the windows since no residents' individual plan of service (IPOS) has anything regarding elopements. Ms. Oliver is looking at this as "limitation of freedom of movement." I advised her that I will follow up with the licensee designee, David Call.

On 05/20/2026, I interviewed the home manager, LaTonya Addison, regarding the allegations. Since LaTonya has been working for this company, there have been alarms on the doors and windows. About two years ago, they had a resident that was eloping, so the alarms were added; however, staff had the ability to turn the alarm off using a keypad. That resident passed away, but the alarms were still on the doors and windows. Resident C had elopement issues in the past, but that was a long time ago and there are not any current concerns. Recently, there was an issue with the alarm system, so Community Housing Network (CHN) replaced the alarm system and now the alarms blare whenever the doors and windows are open. Staff no longer have access to a keypad, so the alarms continue to blare until the doors/windows are closed. The new alarm was installed about two months ago. There is central air in this group home; however, when the power is out, which occurred yesterday for about an hour, staff were unable to manually turn the alarm off when staff opened the doors and windows for ventilation. Therefore, the alarm was blaring until the doors and windows were closed. The residents' well-being is interrupted when the alarm goes off. All the residents enjoy going outside so every time the door opens, the alarm goes off. Resident B starts "pacing back and forth," and becomes anxious, as do Residents A and C. I advised LaTonya that I will follow up with Easterseals and licensee designee David Call.

During the onsite inspection, I observed the alarm sound, and it was deafening. The alarm continues to go off until the door is closed. The alarm goes off every time the door is opened, and staff cannot manually turn it off unless the door closes.

On 06/11/2026, I interviewed Easterseals assistant support coordinator, Laura Clarkston, regarding the allegations. Ms. Clarkston has been having ongoing discussions with licensee designee David Call regarding the alarms on the doors and the windows. There was a concern for elopement with Resident C a long time ago which was in his IPOS, but staff have not reported any current concerns, so Resident C does not have any current behavioral support for elopement. Therefore, there is no need to have the alarms on the doors or windows. Mr. Call stated that the alarms were already installed in the home, so he wanted to keep them. Ms. Clarkston is no longer the assistant support coordinator for Gunn Road and referred me to speak with support coordinator Lori Sears or to email Kari Arms regarding the individual responsible for Gunn Road.

On 06/11/2026, I emailed Kari Arms with Easterseals requesting to speak with the support coordinator for Gunn Road.

On 06/11/2026, I interviewed direct care staff (DCS), Tanae Mason, regarding the allegations. When Tanae first started working at this group home, the alarm would go off, but then staff would turn it off using the keypad. However, that changed about a month later when CHN installed a new alarm system that goes off continuously when the doors/windows are open and does not turn off unless the doors and windows are closed. Resident C has never eloped during Tanae's shift. Tanae stated that sometimes the residents want the doors or windows open to get fresh air, but they're not able to do that due to the alarm going off. She is concerned about the power going out since she

has not experienced that yet at Gunn Road and how the continuous blaring alarm will impact the residents if they need to open the doors/windows to get ventilation inside the home.

On 06/11/2026, I interviewed DCS Allanah Pollard regarding the allegations. About a couple of months ago, CHN came to the group home to make repairs to the alarm system. After the installation of the new alarm system, the alarm can no longer be turned off by staff using the keypad, as the keypad was removed. Prior, staff could turn the alarm off but currently, the only way to turn off the alarm is to close the doors and the windows. Allanah stated, “the issue is if/when the power goes out and we need to open the doors/windows for fresh air, how is the alarm blaring going to impact the residents.” She recalled Resident B’s IPOS included an alarm as a behavioral support in the past when he had an elopement issue, but due to no elopement issues, the behavioral support was removed, and the alarm was no longer needed. However, the alarm is still in the home and continues to blare whenever the door opens, which is frequent since the residents enjoy going outside.

On 06/11/2026, I interviewed the licensee designee, David Call, regarding the allegations. The alarms have always been on all the doors and windows at Gunn Road. In the past, staff could turn the alarms off using the keypad, but due to the alarms not working properly, CHN came to the home and installed a new alarm. The new alarm no longer has a keypad, so staff were unable to turn it off whenever they opened the doors and windows. The only time the alarms are off is when the doors and the windows are closed. Staff began complaining to Mr. Call regarding the continuous alarms going off and it being an interruption to the residents, so he emailed the assistant support coordinator Laura Clarkston on 05/07/2026. He requested Ms. Clarkston to amend Resident C’s IPOS to reflect that Gunn Road no longer requires the alarm system because Resident C is no longer an elopement risk. He did not receive a response from Ms. Clarkston or anyone else from Easterseals. He stated that Easterseals removed Resident C’s behavioral support (alarm system) from his IPOS without any discussions with Mr. Call. Mr. Call stated that CHN will require some documentation showing that Resident C no longer requires the alarm because there is no concern about supporting the alarm system in the home. Mr. Call stated, for example in the past, Resident C had behavioral supports of “locking up the knives,” but after discussions with all parties, Mr. Call and Easterseals, the IPOS was amended to reflect that due to no concerns regarding knives, the behavioral support of locking up the knives was removed. Mr. Call does not want to remove the alarms until he is provided with documentation to say that after discussing that Resident C has had no current elopement issues, the alarms on the doors and windows are no longer required or necessary. He then will take the documentation to CHN to have the alarm disarmed. I advised him that I will follow up with Easterseals.

On 06/11/2026, I received an email from licensee designee David Call regarding the email he sent to Laura Clarkston with Easterseals on 05/07/2026 regarding the alarm system. “We cannot have a door screen to the alarm system. Also, I never got a response about updating the crisis plans to reflect the use of the alarm. I was not aware

that it had been taken out. I had done a 30-day notice on Resident C several years ago as a Corrective Action Plan due to a licensing violation. I reluctantly rescinded the 30-day discharge after a couple of years at your agency's request. I did this largely due to the fact that we had the alarm in place and that the crisis plans reflected that. All three gentlemen have histories of elopement and we as the provider need to insist that we have the alarm activated and that at least one of the plans reflects its use."

On 06/15/2026, I contacted Easterseals support coordinator Lori Sears. Ms. Sears just took over this home and is not familiar with the residents yet, so she referred me to Nicholas Tate. She stated she would have Mr. Tate call me regarding these allegations.

On 06/15/2026, I received a return call from DCS Stacy Seals regarding the allegations. Stacy stated that the alarm system was sporadically going off and on during her shift. Someone from CHN came to fix the alarm and told Stacy, "Because you had a runner, we have to install this new alarm system." Stacy advised the person from CHN, "we don't have a runner," but the person installed the alarm anyway and left. The alarm now went off every time the door and/or window opened, and it was continuous until the doors/windows were closed. Stacy stated, "it was annoying that the residents and us staff had to listen to the alarm blaring every time that door opened. The residents like going outside so it was going off often." Stacy and the rest of the staff were trying to figure out how to turn it off but realized there was no keypad, so they were unsuccessful. There is concern when the power goes out and they must open the doors/windows for fresh air and cannot because of the alarms blaring and impacting their residents.

On 06/15/2026, I received a return call from Nicholas Tate with Easterseals. Mr. Tate stated that there was an elopement issue with Resident C over a year ago which was the reason for the behavioral support of the alarms on the doors and windows. However, it has been over a year since he received any incident reports or concerns reported by staff regarding Resident C eloping. Therefore, the behavioral support was removed from Resident C's IPOS. There is currently no medical necessity to have the alarm system in the home. He was told that the alarm system had malfunctioned, going off/on occasionally, so he reached out to David Call to have it deactivated. CHN came to the home, installed the alarm system that now cannot be deactivated by staff which is a concern because the alarm blares whenever the doors/windows are open and cannot be turned off until the doors/windows are closed. This is an issue if the power is out and staff need to open the doors/windows for fresh air. Mr. Tate stated, "David did not like that the alarm was taken off Resident C's plan," but Mr. Tate stated there is no reason to have the alarm in the plan if there is no concern for elopements at the home. I advised Mr. Tate that according to Mr. Call, he would like an amendment to the IPOS to reflect that due to no elopement concerns with Resident C, the alarm is no longer required as a behavioral support. Mr. Tate stated he will do whatever he can do to assist the home in getting the alarm removed.

On 06/15/2026, I contacted David Call and advised him to follow up with Mr. Tate who agreed to discuss the amendment to Resident C's IPOS and to have the alarm

deactivated if it is no longer necessary for Gunn Road. Mr. Call acknowledged and stated he will address this issue with Mr. Tate.

On 06/23/2026, I emailed licensee designee David Call seeking an update on the alarm system and on Resident C's IPOS.

On 06/23/2026, I received an email from David Call that stated, "I did receive a response from Nicholas Tate, Supports Coordinator, stating that the alarm was not part of the current IPOS. I did request that an addendum be done documenting the removal of the alarm restriction as was done with the knives restriction but have not received a response. The alarm was disengaged today by Quality First Alarm."

On 06/29/2026, I followed up with home manager LaTonya Addison who confirmed that the door/window alarms have been deactivated.

APPLICABLE RULE	
R 400.645	**Environmental health.**
	(8) A habitable room must have direct outside ventilation by means of windows, louvers, air-conditioning, or mechanical ventilation. From April to November, each door, openable window, or other opening to the outside that is used for ventilation purposes must be supplied with a standard screen of not less than 16 mesh.
ANALYSIS:	Gunn Home had an alarm system installed by CHN due to Resident C's elopements in the past. Staff were able to deactivate the alarm when the doors and windows were open; however, after CHN installed a new alarm, staff were no longer able to deactivate the alarm. Every time the door/window was open, the alarm would continuously sound until the door/window was closed. Although Gunn Road has an air-conditioning system, the air-conditioning system stops working when the power goes out. When staff opened the doors/windows for outside ventilation during a power outage, the alarm was on continuously. Licensee designee David Call reached out to Easterseals support coordinator Nicholas Tate for an addendum to Resident C's IPOS to reflect no behavioral supports and CHN deactivated the alarm; therefore, the doors/windows can be used for outside ventilation during a power outage.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

ALLEGATION:

On 05/15/2026, an Oakland County Office of Recipient Rights (ORR) specialist found unauthorized padlocks on the refrigerator at this group home.

INVESTIGATION:

On 05/18/2026, I discussed the allegations with ORR specialist, Amber Oliver. Ms. Oliver interviewed the home manager LaTonya Addison regarding the allegations. There are locks on the refrigerator and pantry at this home because Resident A requires these locks to monitor his food intake to prevent choking, which is in his individual plan of service (IPOS); however, the locks are not in Resident B nor Resident C's IPOS. However, both Residents B and Resident C have access to the keys to unlock the locks should they want to access the refrigerator and the pantry. The residents can bring the keys to staff if the residents do not know which key it is and staff assist them with the locks. Ms. Oliver's concern is that Resident B's and Resident C's IPOS must include that there are locks on the refrigerator/pantry but that both individuals have access to the keys.

On 05/18/2026, I received an email from ORR specialist Amber Oliver with Resident A, Resident B, and Resident C's IPOS. According to Resident A's IPOS dated 04/07/2026, "(Resident A) has behavioral supports approval for locked refrigerator/freezer/pantry/ office where extra food is stored. (Resident A) was going into the refrigerator and taking food that is not safe as well as non-thickened liquids which are required due to (Resident A's) dysphasia." I reviewed both Resident B's IPOS dated 04/07/2026 and Resident C's IPOS dated 02/02/2026 and neither have any statements regarding the locks on the refrigerator/freezer/pantry/office.

On 05/20/2026, I conducted an unannounced on-site investigation at Gunn Road. Present was the home manager, LaTonya Addison, Resident A, and Resident B. I observed Resident A sitting in the living room watching TV. He is non-verbal, so he was not interviewed. Resident B was walking around the home, but he too was not interviewed, as he was unable to carry on a conversation. Resident C was in school during this visit. I interviewed LaTonya regarding the allegations. LaTonya has been working for this corporation for over 20 years; however, has only been working at Gunn Road since 10/2025. I observed a lock on the refrigerator/freezer doors and on the pantry. LaTonya stated that Resident A's IPOS has the locks as a behavioral support due to Resident A accessing food and aspirating; therefore, the locks ensure he cannot access food without staff assistance. Whenever Resident A wants food, he points to the refrigerator or the pantry and uses the keys that are in the living room above the computer to unlock the locks. I observed the keys sitting above the computer in the living room. Resident B and Resident C have full access to both the refrigerator and pantry. Resident B does not know how to use the keys, but he will come to LaTonya and point to the refrigerator. She gets the keys and unlocks the lock so Resident B gets access to the food. There has never been a time when Resident A, Resident B, and Resident C did not have access to the food. LaTonya stated that Resident B and

Resident C's IPOS did not reflect the locks on the refrigerator or pantry, but they should be amended by Easterseals supports coordinator Laura Clarkston after their meeting that was completed in 04/2026. LaTonya has yet to receive the amended IPOS for either Resident B or Resident C.

On 06/11/2026, I interviewed assistant supports coordinator Laura Clarkston with Easterseals regarding the allegations. Ms. Clarkston stated that the locks on the refrigerator/freezer/pantry/office were approved for Resident A and have been approved to be in both Resident B and Resident C's IPOS which were amended at the end of 04/2026. All residents have full access to the refrigerator and pantry by accessing the keys in the living room. If the resident does not know which key to use, then staff assist those residents. There have not been any concerns about residents not having access to the food. She will send me the updated IPOS for Resident B and Resident C reflecting the locks on the refrigerator/freezer/pantry/office were approved.

On 06/11/2026, I interviewed direct care staff (DCS) Tanae Mason regarding the allegations. Tanae has been working for this corporation for about three months. She works from 2PM-10PM. There are locks on the refrigerator/freezer/pantry because Resident A cannot access food due to his choking. It is in his IPOS that there must be locks on the doors where food is. However, Resident B and Resident C have access and know where the keys are. They would grab the keys and bring them to Tanae to assist them with opening the locks. There has never been a time when residents did not have access to the food. To her knowledge, the locks are in each resident's IPOS as of the end of 04/2026.

On 06/11/2026, I interviewed DCS Allanah Pollard regarding the allegations. Allanah has been working for this corporation for two years. She works the midnight shift from 2PM-10AM. Resident A requires locks on the refrigerator/freezer/pantry because he requires his food to be thickened and he can choke if the food is not. Resident B and Resident C have access to the keys. If Resident B wants food, he grabs the keys and brings them to Allanah to help him access food. Resident C also knows where the keys are above the computer in the living room and he can unlock the locks on the refrigerator and the pantry. All three residents have access to the food; however, staff must assist Resident A who points to the refrigerator whenever he is hungry and wants something to eat. There has never been a time when the residents did not have access to the food. She believes the locks are in each resident's IPOS as of the end of 04/2026.

On 06/11/2026, I received a return call from licensee designee David Call regarding the allegations. The locks on the refrigerator/freezer/pantry are a behavioral support for Resident A because he chokes if his food is not thickened. This behavioral support is in Resident A's IPOS and as of the end of 04/2026, it was in both Resident B and Resident C's IPOS too. Both these residents have full access to the food either by using the keys sitting in the living room above the computer or having staff access the food for them. There have never been any concerns about any of the residents not having access to the food.

On 06/15/2026, I received a return call from DCS Stacy Seals. Stacy has been working for this corporation since 11/2025. The locks are on the refrigerator/freezer/pantry because Resident A requires it, so he does not eat the food and choke. The locks are in Resident A's IPOS. Resident B and Resident C have access to the food. Resident B brings the key, located in the living room above the computer, to Stacy and she unlocks the lock and Resident B has access. She stated that Resident C "knows how to pop the lock," without the key and can access the food too. Both residents always have access and there has never been a time when they did not have access to food. She believes that the IPOS for Resident B and Resident C were updated at the end of 04/2026 to reflect the locks.

APPLICABLE RULE	
R 400.671	**Resident care.**
	(2) Care and services provided to a resident must be designed to maintain or improve a resident's physical and intellectual functioning and independence.
ANALYSIS:	Based on my investigation and information gathered, the padlock on the refrigerator and pantry door is a protective measure in place for Resident A. Resident A had access to food and would choke, so a padlock was added as a behavioral support. Resident B and Resident C have access to food by either using the keys to unlock the padlocks or having staff assist with accessing food. All the residents have access to food without any issues. Easterseals Laura Clarkston stated that during their 04/2026 IPOS meeting, padlocks were added to both Resident B and Resident C's IPOS that had been agreed upon by all parties.
CONCLUSION:	**VIOLATION NOT ESTABLISHED**

ADDITIONAL FINDINGS:

INVESTIGATION:

On 05/20/2026, during the unannounced on-site investigation, I observed the side screen door with damage to both the inside and outside of the wood/particle board that had holes in the middle of the door and on the lower left corner of the door. I also observed the mini blinds broken in the living room.

On 06/29/2026, I followed up with home manager LaTonya Addison who stated she was in the process of getting the miniblinds for the living room window replaced after taking

measurements and that David Call was also in the process of taking care of the side screen door. Therefore, they have not been repaired/replaced yet.

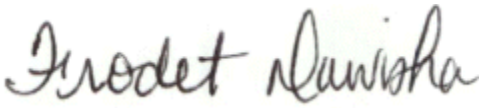
On 06/29/2026, I conducted the exit conference via telephone with licensee designee David Call with my findings. He acknowledged the findings.

APPLICABLE RULE	
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.
ANALYSIS:	During the on-site investigation on 05/20/2026, the miniblinds in the living room were broken, which poses a safety risk to Resident A, Resident B, and Resident C.
CONCLUSION:	**VIOLATION ESTABLISHED**

APPLICABLE RULE	
R 400.647	**Safety and maintenance of premises.**
	(4) Roofs, exterior walls, doors, skylights, and windows must be weathertight and watertight and maintained in good repair.
ANALYSIS:	During the on-site investigation on 05/20/2026, the side screen door was not in good repair, as there were holes in both the inside and outside of the door.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receiving an acceptable corrective action plan, I recommend no change to the status of the license.



06/29/2026

Frodet Dawisha Date
Licensing Consultant

Approved By:

WOC Area Manager for 06/29/26

Denise Y. Nunn Date
Area Manager