



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 17, 2026

Elizabeth McCalla
4391 Onondaga Rd
Onondaga, MI 49264

RE: License #: AF330377657
McCalla AFC
4391 Onondaga Rd
Onondaga, MI 49264

Dear Ms. McCalla:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan on 04/17/2026 addressing the violations cited in the report.

To verify your implementation and compliance with this corrective action plan:

- You are to submit documentation of compliance by 4/30/2026.
 - Send MARS updated for the months of 10/2025-present for Resident A.
 - Send MARS updated for the months of 1/2026-present for Resident B.
 - Send missing fire drills for the months of 9/2024-5/2025.
 - Send a picture of a thermometer showing the correct temperature from the bathroom and kitchen. Temperature should not be over 120 degrees.

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 (517) 335-5985.

Sincerely,

A handwritten signature in cursive script that reads "Jennifer Browning".

Jennifer Browning, Licensing Consultant
Bureau of Community and Health Systems
browningj1@michigan.gov - 989-444-9614

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

I. IDENTIFYING INFORMATION

License #:	AF330377657
Licensee Name:	Elizabeth McCalla
Licensee Address:	4391 Onondaga Rd Onondaga, MI 49264
Licensee Telephone #:	(517) 628-8700
Licensee:	Elizabeth McCalla
Name of Facility:	McCalla AFC
Facility Address:	4391 Onondaga Rd Onondaga, MI 49264
Facility Telephone #:	(517) 628-8700
Original Issuance Date:	10/21/2015
Capacity:	5
Program Type:	DEVELOPMENTALLY DISABLED
Certified Programs:	DEVELOPMENTALLY DISABLED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 04/17/2026

Date of Bureau of Fire Services Inspection if applicable: Not applicable.

Date of Health Authority Inspection if applicable: 02/18/2026

No. of staff interviewed and/or observed 1

No. of residents interviewed and/or observed 4

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. There were no personal funds kept by Ms. McCalla.
- Meal preparation / service observed? Yes No If no, explain.
The inspection was not done during meal times. The food at the facility appeared safe and free from spoilage and contamination, the food service equipment was in good repair, and the facility appeared equipped to prepare and serve adequate meals.
- 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:
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:

<p>R 400.619</p>	<p>Emergency preparedness plan.</p>
	<p>(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.</p>
<p>Ms. McCalla was unable to provide verification that fire drills were completed during the time frame of 9/2024-5/2025.</p>	
<p>R 400.645</p>	<p>Environmental health.</p>
	<p>(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.</p>
<p>The water temperature in the kitchen was 140 degrees and the temperature in the bathroom was 143 degrees.</p>	
<p>R 400.675</p>	<p>Resident medications.</p>
	<p>(4) A licensee, administrator, or direct care staff shall comply with the following when supervising the taking of medication by a resident:</p> <ul style="list-style-type: none"> (b) Complete an individual medication log that contains all of the following: <ul style="list-style-type: none"> (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.

Ms. McCalla was unable to provide a Medication Administration Record for Resident A for the time period of 10/2025-present and Resident B did not have a Medication Administration Record for the time period of January- April 2026.	
R 400.685	Resident admission; resident assessment plan; resident care agreement; health care appraisal.
	(4) A written assessment plan must be completed with and signed by the resident or the resident's designated representative, responsible agency if applicable, and the licensee at the time of admission and annually thereafter. A licensee shall maintain a copy of the resident's most recent assessment plan on file at the facility for up to 2 years after discharge.
Resident A and Resident B's resident record did not include an <i>Assessment Plan for AFC Residents</i> at the time of admission or an updated one completed annually.	

A corrective action plan was requested and approved on 04/17/2026. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license and special certification.

IV. RECOMMENDATION

An acceptable corrective action plan has been received. Renewal of the license is recommended.

Jennifer Browning

Jennifer Browning
Licensing Consultant

04/17/2026

Date