



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

January 14, 2022

Paul Wyman  
Retirement Living Management Of Ionia, L.L.C.  
1845 Birmingham SE  
Lowell, MI 49331

RE: License #: AL340390582  
Investigation #: 2022A1029011  
Green Acres of Ionia

Dear Mr. Wyman:

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.

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.

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 (231) 922-5309.

Sincerely,

A handwritten signature in black ink that reads "Jennifer Browning". The script is cursive and fluid.

Jennifer Browning, Licensing Consultant  
Bureau of Community and Health Systems

[Browningj1@michigan.gov](mailto:Browningj1@michigan.gov)

(989) 444-9614

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL340390582
<b>Investigation #:</b>	2022A1029011
<b>Complaint Receipt Date:</b>	11/19/2021
<b>Investigation Initiation Date:</b>	11/19/2021
<b>Report Due Date:</b>	01/18/2022
<b>Licensee Name:</b>	Retirement Living Management Of Ionia, L.L.C.
<b>Licensee Address:</b>	1845 Birmingham SE Lowell, MI 49331
<b>Licensee Telephone #:</b>	(616) 897-8000
<b>Administrator:</b>	Paul Wyman
<b>Licensee Designee:</b>	Paul Wyman
<b>Name of Facility:</b>	Green Acres of Ionia
<b>Facility Address:</b>	2550 Commerce Lane Ionia, MI 48846
<b>Facility Telephone #:</b>	(616) 527-3300
<b>Original Issuance Date:</b>	01/11/2018
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	07/11/2020
<b>Expiration Date:</b>	07/10/2022
<b>Capacity:</b>	20
<b>Program Type:</b>	AGED

**II. ALLEGATION(S)**

	<b>Violation Established?</b>
Green Acres of Ionia refused to provide care for residents who tested positive for COVID-19 by sending them to Sparrow Ionia Hospital or to family members. Sparrow Ionia could not admit the residents because they did not meet admission criteria and the residents' families also could not provide care.	Yes

**III. METHODOLOGY**

11/19/2021	Special Investigation Intake 2022A1029011
11/19/2021	Special Investigation Initiated – Telephone - Text message from complainant.
11/19/2021	APS Referral Made - APS referral to Centralized Intake
11/19/2021	Contact - Telephone call received Text message from Lisa Harris. Several texts between 11/19/21-11/22/21 regarding residents at hospital.
11/22/2021	Contact - Document Received Email that Zach Blevins was the APS worker assigned to investigation APS
11/22/2021	Contact - Telephone call received from Vicki Pohl, APS Worker
11/22/2021	Contact - Telephone call made to Lisa Harris RN
11/22/2021	Contact - Telephone call made Calli Peabody Admin. Green Acres Ionia
11/22/2021	Contact - Document Received Email back from licensee Paul Wymans - all residents will be returned to facility today.
11/29/2021	Contact - Document Received Email from Amber Fry with revised policies for COVID.
12/17/2021	Contact - Telephone call made to direct care staff member, Kara Fullriede
12/17/2021	Contact - Telephone call made with Calli Peabody and Amber Fry

12/17/2021	Inspection Completed On-site Virtual inspection due to COVID in facility
12/29/2021	Inspection Completed On-site- Met with Calli Peabody, administrator at Green Acres of Ionia, direct care staff members, Brianna Wiles and Danielle Curtiss
12/29/2021	Contact - Telephone call made direct care staff member, Sarah Rodel and Abby Fields
01/03/2022	Contact - Document Sent - Emailed Calli Peabody
01/03/2022	Contact - Telephone call made to Julie Elkins, AFC licensing consultant
01/06/2022	Exit conference with licensee designee, Paul Wyman. There was no answer and a detailed voice mail was left.

**ALLEGATION:**

**Green Acres of Ionia refused to provide care for residents who tested positive for COVID-19 by sending them to Sparrow Ionia Hospital or to family members. Sparrow Ionia could not admit the residents because they did not meet admission criteria and the residents' families also could not provide care.**

**INVESTIGATION:**

A week before receiving this complaint, I received a call from Kelly Nelson, Regional director for Retirement Living Management Of Ionia, L.L.C on November 12, 2021. A discussion ensued regarding the AFC's facility policy for resident's who test positive for COVID-19 while living in the facility. Ms. Nelson stated residents are "sent out of the facility" until they are testing negative and facility administration drops the resident's individual care rate to the basic room rate during that time. Ms. Nelson stated facility administration was told by Michigan Occupational Safety and Health Administration (MIOSHA) that since the AFC facility does not have a respirator program in place, direct care staff members at any Green Acres facilities cannot provide care for residents once they test positive. Ms. Nelson stated approximately six months ago one of the corporation's facilities in Mt. Pleasant were cited by MIOSHA because the facility did not have the means to fit test for respirators and per MIOSHA respirators were required when caring for COVID-19 residents. Ms. Nelson stated since that citation by MIOSHA, residents testing positive for COVID-19 have been sent to the hospital for care or to a resident's family member. In the past, Ms. Nelson stated COVID-19 hubs in Frankenmuth, Traverse City, or Kalamazoo were also used. Ms. Nelson stated this option allowed resident to be provided with care for 10 days and return to the facility upon completing their care and a negative COVID test. Ms. Nelson stated that she was

informed recently by AFC licensing consultants, Bridget Vermeesch and Elizabeth Elliott that she was not able to send COVID-19 positive residents out of the facility if they did not need medical care. Ms. Nelson stated that she would forward the COVID-19 policies and the MIOSHA violation for review by email. Ms. Nelson sent over a list of COVID-19 hubs that have been utilized in the past for COVID-19 positive residents.

In another contact previous to this November 19, 2021 complaint being called in but related to this same allegation, I received a telephone call from Sparrow Ionia Hospital reporting the facility refused to pick up two residents who were ready to be discharged from the emergency department after being evaluated for COVID-19. Upon learning this information, on November 12, 2021 I called and left voice mails for both Amber Fry and Kelly Nelson regarding the residents at Sparrow Ionia Hospital. I then sent an email to Amber Fry and Calli Peabody at Green Acres of Ionia to inform them the residents at the hospital were ready to return to Green Acres of Ionia from Sparrow Ionia Hospital. They were informed in this email that the facility must continue to provide care even if the resident was positive for COVID-19 and medically able to quarantine at the facility. I also informed them a 30 day discharge could be given to any resident but the discharge could not be back dated. They were instructed to reach out to the hospital and make a plan to return any residents to the facility that did not meet admission criteria at Sparrow Ionia Hospital.

On November 19, 2021, a complaint was received alleging Green Acres of Ionia was refusing to allow residents to return to the facility from Sparrow Ionia Hospital who tested positive for COVID-19. According to the complaint, the residents were asymptomatic and did not meet criteria for admission to Sparrow Ionia Hospital. Complainant reported during the previous week Green Acres of Ionia sent five residents to the hospital who tested positive for COVID-19 even though the residents did not need hospital care. Complainant stated upon attempting to have these residents return to the facility, Green Acres of Ionia refused to pick the residents up and reported relatives of each resident would be caring for each resident during the quarantine period. Complainant stated these family members were also refusing to pick up residents so the residents were remaining in the hospital waiting room area. Resident A and B were at Sparrow of Ionia Hospital when the referral was called in on November 19, 2021.

On November 19, 2021, a text message was received from Sparrow Ionia Chief Nursing Officer, Lisa Harris, RN stating there were two patients at Sparrow Ionia Hospital, Resident A and Resident B. She stated they did not meet admission criteria but they were going to be moved to the inpatient unit as observation patients because Green Acres of Ionia was refusing to take the residents back to the facility. I responded to RN Harris letting her know that I spoke with Ms. Fry, Regional Director at Green Acres and let her know that she would need to have the residents discharged from the hospital and they could not stay there if they did not meet admission criteria.

On November 21, 2021, I received a text message from RN Harris indicating Resident A and B were still at the hospital and had not been discharged from the hospital during the

weekend nor had they been picked up by Green Acres of Ionia or any relative of the residents.

On November 22, 2021, I spoke with RN Harris. She stated she was not sending any of the residents to COVID-19 Hubs since they did not meet admission criteria and were not ill enough to be sent there. She said there used to be one at Pine Rest they could use, however, it has closed.

On November 22, 2021, I spoke with Green Acres Regional Director Amber Fry. She stated there were four residents currently at Sparrow. She did not have any information regarding the health status of either Resident A or Resident B. She was told Resident C was going to be sent to Sparrow Lansing Hospital and be there until November 28, 2021. Ms. Fry stated there was a fourth resident however he was a resident in the independent living building and was not living in their licensed AFC setting. He was discharged to a family member. Ms. Fry stated licensee designee Mr. Wyman was having a meeting later that day with corporate administrative staff to develop a plan to address this current facility policy.

On November 22, 2021, I sent an email to licensee designee, Paul Wyman clarifying again that residents who tested positive for COVID-19 and did not require medical intervention were to remain in the facility and per licensing rules, they were not able to send residents to the hospital if they were not meeting criteria for hospital admission. Mr. Wyman responded less than an hour later indicating all residents who were at Sparrow Ionia Hospital would be returned to Green Acres of Ionia that afternoon and they would resume providing care. Mr. Wyman also indicated that he had been in communication with Area Manager, Dawn Timm regarding the situation. He also stated the hospital had communication with Ms. Peabody on Friday, November 19, 2021 and it sounded like there was inaccurate information.

On November 29, 2021, I reviewed the report from MIOSHA authored by Sundari Murthy. There was an inspection completed on December 15, 2020-January 14, 2021 at Green Acres Mt. Pleasant resulting in a citation and notification of penalty on February 17, 2021 which prompted the change to their COVID-19 policy. The report document in part the following:

1. "Rule 7 (6): The employer shall require face coverings in shared spaces, including during in person meetings and in the restrooms and hallways.
  - a. The employer did not require face coverings in shared spaces including in person meetings.
2. Rule 8 (3): In establishments that that provide medical treatment or housing to known or suspected cases of COVID-19, the employer shall ensure the employees in frequent or prolonged close contact with such cases are provided with and wear, at a minimum, and N95 respirator, goggles or face shield, and a gown.
  - a. The employer did not ensure the employees in frequent or prolonged close contact with known or suspected cases of COVID-19 were provided with and wear at a minimum, an N95 respirator.

3. Rule 4 (1): The employer shall develop and implement a written COVID-19 preparedness and response plan consistent with the current guidance for COVID-19 from the US Centers for Disease Control and Prevention (CDC) and recommendations in Guidance on Preparing Workplaces for COVID-19 developed by Occupational Health and Safety Administration (OSHA).
  - a. The employer did not develop and implement a written COVID-19 preparedness and response plan. The firm's COVID-19 protocols did not include an employee exposure determination required by Rule 3 of MIOSHA emergency rules.”

On November 29, 2021, the document, *House Guidelines*, submitted from Green Acres of Ionia was also reviewed by this AFC Consultant. In this three page document updated February 2021 which resident and designated representatives sign was the following statement regarding COVID-19:

*“In the event that a resident needs treatment, care, or recovery including isolative care due to an infectious illness, the resident and/or designated representative will be notified and may be asked to remove resident from the facility if and Retirement Living Management is unable to provide the necessary care under local, state, or federal health requirements.”*

I reviewed COVID-19 Protocol Updated September 13, 2021 in the Positive COVID-19 Case Associated with the Facility Procedure which stated the following: “A resident who tests positive for COVID-19 will be sent out to their hospital of choice or with family and unable to return for a minimum of 10 days.”

The *House Guidelines* were updated on November 29, 2021 after this investigation to reflect the following change in their policy.

*Quarantine Procedure:*

1. *Residents will quarantine in their apartment for at least 10 days due to the following:*
  - a. *Are positive for Covid-19*
  - b. *They are symptomatic of COVID-19 and awaiting testing.*
  - c. *They had close contact (within 6ft or less and for 15 minutes or more) with someone who has tested positive for COVID-19 in the last 14 days and the resident is not fully vaccinated for COVID-19. (Fully vaccinated is considered 2 weeks after the 2nd COVID-19 vaccine dose). Residents who are fully vaccinated against COVID-19 are not required to quarantine due to a close contact with someone who tested positive for COVID-19.*

On December 17, 2021 a virtual onsite investigation via facetime with Calli Peabody and Amber Fry due to positive COVID-19 residents being in the facility. Ms. Fry explained there was a MIOSHA citation was received for the Green Acres facility in Mt. Pleasant on February 17, 2021 which prompted the administration at Green Acres to change their policy regarding COVID-19 and how positive cases were handled. Ms. Fry



stated she sent the first COVID-19 procedures to the families in June 2020 and those were in effect until December 2021 when this investigation occurred. Ms. Fry stated she has since updated the House Guidelines and resent it to the families. Ms. Fry stated the residents' families did not have any pushback regarding quarantining when there is a positive COVID-19 case. The new House Guidelines were sent out the week of December 10, 2021.

Ms. Fry stated she was in communication with RN Harris from Sparrow Ionia while the residents were at the hospital multiple times about hospital discharge plans.

Amber Fry stated after they were told they had to bring the residents back by this licensing consultant on November 12, 2021, they were still in the process of purchasing a N95 mask fit test and purchasing a fit test and respirator program to have in place at Green Acres of Ionia so the facility administrative staff continued to refuse to allow the resident back to Green Acres of Ionia after they were told they needed to provide care. This was the reason that Resident A remained living with a relative for the ten days of her quarantine and did not return until November 22, 2021.

Ms. Fry stated Resident A and Resident B both came back to Green Acres of Ionia because their family members could not provide care for them during quarantine. Now that the residents are quarantining in the facility if they are positive and do not require medical intervention, Ms. Fry stated isolation carts are used and signs posted to make sure that everyone is familiar with where the COVID-19 positive rooms are. Ms. Fry stated since all the resident bedrooms are within private apartments it makes it easier to isolate. There was one resident that was sent out to the hospital since then but that was because her health conditions worsened and she required additional care.

On December 17, 2021, I interviewed direct care staff member, Kara Fullriede. She stated when the pandemic first started there was one resident who tested positive but she was not showing symptoms and she remained at Green Acres of Ionia. She stated the rules changed after that time when another wave of COVID-19 and cases increased. Ms. Fullriede stated direct care staff members were told by administration that due to a MIOSHA citation because they did not have a respiratory program at Green Acres of Ionia, they could not have COVID-19 positive residents at the facility. At that point, Ms. Fullriede stated direct care staff members were trained that the family would either provide care or the resident would be sent to the hospital through 911 transport. Ms. Fullriede stated the facility is currently they are screening people when they come in with a temperature check and sign in with their information, encourage any visitors to sanitize and wear a mask. Ms. Fullriede stated masks are available along with full PPE gear to anyone visiting a COVID-19 positive resident. Ms. Fullriede stated direct care staff are using the KN95 masks now. Ms. Fullriede stated direct care staff members use a different type of mask when caring for COVID-19 positive residents and gowns, gloves, and full PPE are also worn.

On December 29, 2021, I called direct care staff member, Sarah Rodel who stated she thought during November 2021 there were a number of residents who were COVID-19

positive. Ms. Rodel stated direct care staff members were instructed if any resident had a positive test, they could not remain at the facility but instead had to be home with family or sent to the hospital. Ms. Rodel described this was a Green Acres policy for all their facilities. Ms. Rodel stated the policy has changed in December 2021 and since then all positive COVID-19 residents have remained at the facility. Since they have been quarantining the residents in their rooms, they have only had two new cases of COVID-19.

On December 29, 2021, I completed an unannounced on-site investigation at Green Acres of Ionia and spoke with Cali Peabody, administrator at Green Acres of Ionia. She gave me a tour of the facility and introduced me to various direct care staff member that were working. Ms. Peabody stated since the new quarantine policy has been in place, there have only been two residents that have tested positive for COVID-19.

<b>APPLICABLE RULE</b>	
<b>R 400.15303</b>	<b>Resident care; licensee responsibilities.</b>
	<b>(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.</b>
<b>ANALYSIS:</b>	Resident A and Resident B tested positive for COVID-19 and were sent to Sparrow Ionia Hospital for evaluation by the staff members at Green Acres of Ionia and per the current policy of the AFC facility. Upon learning from the hospital that neither resident met the criteria for hospital admission, administrator Amber Fry refused to allow Resident A and Resident B to return to the facility based on the corporate COVID-19 positive policy. The two residents remained at the hospital without care for a prolonged period of time. During the virtual inspection on December 17, 2021, Ms. Fry stated the reason residents were not returned to Green Acres of Ionia after being advised by this consultant on November 12, 2021 to do so, was due to the facility trying to start a respirator program and follow MIOSHA guidelines. The residents did not return to the facility until November 22, 2021. Consequently, Resident A's and Resident B's supervision, protection, and personal care needs were not provided by the licensee during this time from at least November 19, 2021 through November 22, 2021.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 400.15304</b>	<b>Resident rights; licensee responsibilities.</b>
	<p><b>(1) Upon a resident’s admission to the home, a licensee shall inform a resident or the resident’s designated representative of, explain to the resident or the resident’s designated representative, and provide to the resident or the resident’s designated representative, a copy of all the following resident rights:</b></p> <p><b>(j) The right of reasonable access to and use of his or her personal clothing and belongings.</b></p> <p><b>(p) The right of access to his or her room at his or her discretion.</b></p> <p><b>(2) A licensee shall respect and safeguard the resident’s rights specified in subrule (1) of this rule.</b></p>
<b>ANALYSIS:</b>	<p>Complainant, administrator Ms. Fry and regional director Ms. Nelson reported that the facility updated <i>House Guidelines</i> on February 2021 to reflect that COVID-19 positive residents cannot remain at the facility and that they need to leave for no less than 10 days. I reviewed the <i>House Guidelines</i> which documented in number 13 of the document: “In the event that a resident needs treatment, care, or recovery including isolative care due to an infectious illness, the resident and/or designated representative will be notified and may be asked to remove resident from the facility if and Retirement Living Management is unable to provide the necessary care under local, state, or federal health requirements.” The <i>House Guidelines</i> conflict with a resident’s right to access their belongings and their room at their discretion; therefore, a violation has been established.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

Upon receipt of an acceptable corrective action plan, I recommend no change in the license status.

*Jennifer Browning*

1/7/2022

Jennifer Browning  
Licensing Consultant

Date

Approved By:

*Dawn Timm*

01/14/2022

Dawn N. Timm  
Area Manager

Date