GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 22, 2025

Robert Chapman
Community Choices, Inc.
26405 Plymouth Rd
Redford, MI 48239

RE: License #: AS820397689
Investigation #: 2026A0122006
Lilly II

Dear Mr. Chapman:

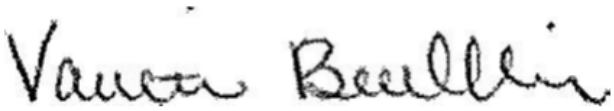
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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) 284-9720.

Sincerely,



Vanita C. Bouldin, Licensing Consultant
Bureau of Community and Health Systems
22 Center Street
Ypsilanti, MI 48198
(734) 395-4037

Enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS**
**BUREAU OF COMMUNITY AND HEALTH SYSTEMS**
**SPECIAL INVESTIGATION REPORT**
**THIS REPORT CONTAINS QUOTED PROFANITY**

## I. IDENTIFYING INFORMATION

| | |
|---|---|
| **License #:** | AS820397689 |
| | |
| **Investigation #:** | 2026A0122006 |
| | |
| **Complaint Receipt Date:** | 12/10/2025 |
| | |
| **Investigation Initiation Date:** | 12/11/2025 |
| | |
| **Report Due Date:** | 01/09/2026 |
| | |
| **Licensee Name:** | Community Choices, Inc. |
| | |
| **Licensee Address:** | 26405 Plymouth Rd<br>Redford, MI 48239 |
| | |
| **Licensee Telephone #:** | (313) 937-4170 |
| | |
| **Administrator:** | Robert Chapman |
| | |
| **Licensee Designee:** | Robert Chapman |
| | |
| **Name of Facility:** | Lilly II |
| | |
| **Facility Address:** | 42279 Palmer<br>Canton, MI 48188 |
| | |
| **Facility Telephone #:** | (734) 329-2193 |
| | |
| **Original Issuance Date:** | 12/16/2019 |
| | |
| **License Status:** | REGULAR |
| | |
| **Effective Date:** | 06/16/2024 |
| | |
| **Expiration Date:** | 06/15/2026 |
| | |
| **Capacity:** | 4 |
| | |
| **Program Type:** | PHYSICALLY HANDICAPPED<br>DEVELOPMENTALLY DISABLED |

| | |
|---|---|
| | MENTALLY ILL<br>AGED |

## II. ALLEGATION(S)

| | **Violation Established**? |
|---|---|
| Staff member, Karen Terry, yelled and forcefully pushed Resident A's head. | Yes |

## III. METHODOLOGY

| | |
|---|---|
| 12/10/2025 | Special Investigation Intake<br>2026A0122006 |
| 12/10/2025 | APS Referral |
| 12/11/2025 | Special Investigation Initiated - On Site<br>Observed Resident A. Reviewed Resident A's file. Completed interview with home manager, Denise Woods. |
| 12/12/2025 | Contact – Telephone call made<br>Completed interviews with executive director, Norma Chapman, staff member, Karen Terry, and staff member 1. |
| 12/12/2025 | Contact – Document received<br>Reviewed the video tape submitted to social worker, Helen Wills, by staff member 1. |
| 12/22/2025 | Contact – Telephone call made<br>Conducted interview with Supports Coordinator, Tasha Thomas. |
| 12/22/2025 | Exit Conference<br>Discussed findings with licensee designee, Robert Chapman. |

**ALLEGATION: Staff member, Karen Terry, yelled and forcefully pushed Resident A's head.**

**INVESTIGATION:** On 12/11/2025, I conducted an onsite inspection and observed Resident A in his bedroom. Initially he was lying on his bed but got up once introductions were made. I observed Resident A to be appropriately dressed, showing no signs of discomfort. Resident A walked around the facility appropriately, interacting with staff members, making requests from them as needed. I observed

no injuries on his face or exposed areas of his body, such as his hands or neck. Resident A is non-verbal and unable to participate in an interview.

I conducted an interview with home manager, Denise Woods. Ms. Woods stated that she had no knowledge of the allegation, that staff member, Karen Terry, yelled and used force against Resident A until today. Ms. Woods received contact from a representative of the Office of Recipient Rights and was informed of the allegation by that person. Per Ms. Woods, she observed no injuries on Resident A's person nor had she received a report from staff 1, who may have witnessed the incident.

Ms. Woods stated that Karen Terry has been taken off the staff schedule and is not working until an internal investigation is completed. Ms. Woods reported that staff 1 has not reported to work since 12/03/2025. Ms. Woods stated that staff 1 was scheduled to work on 12/05/2025, 12/07/2025 and 12/09/2025, however she did not show up or call off for her assigned shifts.

On 12/12/2025, I conducted an interview with executive director, Norma Chapman. Ms. Chapman stated that she had reviewed the video tape submitted by staff 1 documenting the allegations that staff member, Karen Terry, yelled and forcefully pushed Resident A's head. Ms. Chapman reported that the video does not record any person, as it is pointed towards the floor, but she confirmed that she could hear Karen Terry yelling at Resident A, telling him to eat his soup and to "sit his ass back down."

Ms. Chapman stated he heard a "slapping sound," but could not determine if anyone had been hit physically.

On 12/12/2025, I conducted an interview with Staff 1. Staff 1 confirmed that she worked with direct care staff, Karen Terry, on 12/08/2025 and that she video recorded the incident. Staff 1 stated for confidentiality reasons she aimed her telephone at the floor but recorded the incident as it made her uncomfortable. Staff 1 confirmed that she observed what was reported by Norma Chapman. Staff 1 reported that Ms. Terry did not physically hit anyone, the slapping sound heard on the video recording was another resident clapping their hands while seated at the table.

On 12/12/2025, I received a copy of the video recording of the incident involving Resident A and staff member, Karen Terry. I heard Karen Terry (identified by Norma Chapman) yelling at Resident A, telling him to eat his soup. I also heard Ms. Terry state, "Well you won't get your ass up, how about that." I also observed on the video; Ms. Terry use her hand to push Resident A's hair away from his face.

On 12/12/2025, I conducted an interview with staff member, Karen Terry. Ms. Terry denied yelling at Resident A or any other resident of the facility. Ms. Terry stated that she has a loud voice, and it carries, she has received feedback that she is loud. Ms. Terry also denied using profanity when speaking with Resident A.

On 12/22/2025, I reviewed Resident A's Assessment Plan dated 09/15/2025. It documents that "staff remain present during each meal to prevent choking…staff provide frequent prompts and assistance to keep hands and face clean and redirect him as needed to manage OCD behaviors and complete meals safely."

On 12/22/2025, I conducted an interview with supports coordinator, Tasha Thomas. Ms. Thomas confirmed that she had been informed of the allegations involving Resident A and staff member, Karen Terry. Ms. Thomas stated other than the current allegations, she has no issues with the care Resident A receives by the staff members of Lilly II adult foster care facility.

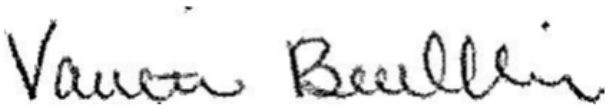
On 12/22/2025, I conducted an exit conference with licensee designee, Robert Chapman, and discussed my findings with him. Mr. Chapman agreed with my findings and stated he would submit a corrective action plan to address rule violations found.

| **APPLICABLE RULE** | |
|---|---|
| **R 400.641** | **Resident behavior interventions.** |
| | **(6) A licensee, staff, volunteers, or any person who lives in the facility shall not do any of the following:**<br>**(b) Use any form of restraint without an order from an appropriately licensed health care professional or physical force, other than physical restraint for crisis intervention.** |
| **ANALYSIS:** | Based upon my investigation, which consisted of multiple interviews with home manager, Denise Woods, Executive Director, Norma Chapman, staff member, Karen Terry, staff 1, and supports coordinator, Tasha Thomas and review of pertinent documentation relevant to this investigation, there is sufficient evidence to substantiate the allegation that staff member, Karen Terry, yelled and forcefully pushed Resident A's head. Therefore, staff member, Karen Terry, used physical force with Resident A. |
| **CONCLUSION:** | **VIOLATION ESTABLISHED** |

| APPLICABLE RULE | |
|---|---|
| **R 400.681** | **Resident rights; licensee responsibilities.** |
| | **(3) A licensee and staff shall respect and safeguard all of the following resident rights to:**<br>**(p) Be treated with consideration and respect with due recognition of personal dignity, individuality, and need for privacy.** |
| **ANALYSIS:** | Based upon my investigation, which consisted of multiple interviews with home manager, Denise Woods, Executive Director, Norma Chapman, staff member, Karen Terry, staff 1, and supports coordinator, Tasha Thomas and review of pertinent documentation relevant to this investigation, there is enough evidence to substantiate the allegation that staff member, Karen Terry, yelled, used profanity, and forcefully pushed Resident A's head. Therefore, Resident A was not treated with respect and personal dignity by staff member, Karen Terry. |
| **CONCLUSION:** | **VIOLATION ESTABLISHED** |

## IV. RECOMMENDATION

Contingent upon receipt and approval of a corrective action plan, I recommend no change to the status of the license.



Vanita C. Bouldin
Licensing Consultant
Date: 12/22/2025

Approved By:

Ardra Hunter
Area Manager
Date: 12/22/2025