



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

November 12, 2024

Julia Hill
Centered Care LLC
15945 Wood Rd
Lansing, MI 48820

RE: License #: AS190412341
Investigation #: 2024A0466061
Centered Care Turner

Dear Ms. Hill:

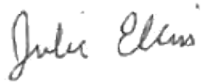
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- 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) 284-9727.

Sincerely,

A handwritten signature in cursive script that reads "Julie Elkins".

Julie Elkins, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS190412341
Investigation #:	2024A0466061
Complaint Receipt Date:	09/20/2024
Investigation Initiation Date:	09/23/2024
Report Due Date:	11/19/2024
Licensee Name:	Centered Care LLC
Licensee Address:	15945 Wood Rd Lansing, MI 48820
Licensee Telephone #:	(517) 394-1234
Administrator:	Julia Hill
Licensee Designee:	Julia Hill
Name of Facility:	Centered Care Turner
Facility Address:	14333 Turner Road Dewitt, MI 48820
Facility Telephone #:	(517) 394-1234
Original Issuance Date:	09/19/2022
License Status:	REGULAR
Effective Date:	03/18/2023
Expiration Date:	03/17/2025
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED TRAUMATICALLY BRAIN INJURED

II. ALLEGATION:

	Violation Established?
Residents are not being provided transportation for physician ordered fitness program services.	Yes
Additional Findings	Yes

III. METHODOLOGY

09/20/2024	Special Investigation Intake 2024A0466061.
09/23/2024	Special Investigation Initiated – Telephone Complainant interviewed.
09/24/2024	Contact - Document Received email from Complainant.
09/24/2024	Contact - Telephone call received telephone call from Complainant.
09/24/2024	Contact - Telephone call made to Guardian A1, message left.
09/24/2024	Contact - Telephone call made Guardian B1 interviewed.
09/24/2024	Contact - Telephone call made Guardian C1, message left.
09/25/2024	Contact - Telephone call received Guardian C1 interviewed.
09/25/2024	Inspection Completed On-site.
10/01/2024	Contact - Telephone call received Guardian A1 interviewed.
10/31/2024	Contact- Document sent/received to/from licensee designee Julia Hill.
10/31/2024	Contact- Document sent/received to/from Jeremy Hodges.
11/04/2024	Contact- Document sent/received to/from licensee designee Julia Hill.
11/06/2024	Contact- Document sent/received to/from Jeremy Hodges.
11/06/2024	Contact- Document sent to licensee designee Julia Hill.
11/07/2024	Contact- Document received to/from licensee designee Julia Hill.

11/12/2024	Exit conference with licensee designee Julia Hill.
------------	--

ALLEGATION: Residents are not being provided transportation for physician ordered fitness program services.

INVESTIGATION:

On 09/20/2024, Complainant reported that as of 09/16/2024 due to the facility van being in the repair shop, residents would not be transported to fitness therapy with A2 Fitness Professionals (A2FP) for up to 6 weeks. Complainant reported that A2FP came up with five options to maintain physician prescribed fitness therapy sessions however all these options were declined by Centered Care of Michigan (CCMi) administration staff, Heather Kluemper and Joel Mann. Complainant reported that because these are physician prescribed therapies six weeks off can be extremely detrimental to resident progress. Complainant reported that Heather Kluemper and Joel Mann blocked all options, even those related to providing fitness therapy at the facility, allowing A2FP to provide/pay for external transportation by renting a vehicle and providing transport by a licensed driver. Complainant reported that all efforts to provide services by A2FP have been denied by Heather Kluemper and Joel Mann without cause.

On 09/16/2024, at 1:47pm Joel P. Mann Director of Rehabilitation Services (CCMi) emailed Demond Johnson President A2FP. The email stated:

“One of Centered Care’s transport vans will be going into the shop on 9/23/24 for repairs. From my understanding the repair shop is anticipating a 6-week timeframe until completion. Due to limited transportation availability during the repair time, CCMi will not be able to provide transportation to/from the MAC while the vehicle is in the shop. Let us know if you have questions. I’m hoping they can obtain the parts they need sooner than the estimate provided by the shop.”

On 09/17/2024 at 10:05am Mr. Johnson sent an email to Mr. Mann, Kaitlyn Shaffer (CCMi) and A2FP therapist, Jeremy Hodges which stated:

“In response to your email regarding disruption of fitness therapy due to lack of transportation, I would not agree that this is our best course of action and I would ask that we work together to solve the issue rather than allow it to create an obstacle. These clients [Resident A, Resident B, Resident D and Resident E] would be adversely affected by this decision, and it would cause severe setbacks. As we are aware, putting any therapy on hold for a six (6) week duration would be detrimental to any individual and, when you add the neurological aspect, this adds to that equation immensely. As a treatment team we have a responsibility to ensure that the client’s well-being and best interest are met and, ensuring that their therapy continues is a tremendous part of that responsibility. With a disruption of this magnitude, we will increase the probability of negative effects pertaining to (but not limited to) continued recovery of post MVA related injuries, post-surgical recovery,

chronic pain, neurocognitive disorder, sleep deficits, cognitive deficits, and impulsivity.

Fitness therapy is a critical intervention component for these clients to achieve optimal recovery and functional improvement for further success with all that they do in the community as well and, long-term disruptions would significantly impact their ability to perform daily activities and maintain an adequate quality of life. A six (6) week hold could result in increased pain, limited range of motion, muscle weakness, impaired mobility, impaired balance and stability, reduced community integration, along with stress/tension upon restarting.

Please keep in mind that fitness therapy is also prescribed and re-evaluated by the treating physician. This treatment plan is based on the consistency of sessions for that duration in order to support the efficacy of fitness therapy in managing post MVA related diagnosis and enhancing patient outcomes.

To assist with the transportation issues that CCMi is experiencing, we would ask that we all explore the numerous alternative solutions available. Jeremy and I have taken a bit of time to brainstorm, and we would like to propose the following solutions:

- Allow our team (Jeremy and Jaden will spearhead this) limited access to work with the affected clients [Resident A, Resident B, Resident D and Resident E] at the Sanctuary location for the duration of the transportation issue.*
- Team A2FP can rearrange our schedule and/or expand our hours of availability to give you all more flexibility to transport with the limited transportation that you do have.*
- We can explore together and team A2FP can contact other facilities and/or resources in the Lansing area to see if there are any forms of outside transportation available for clients in need.*
- With the transport van that you all have, we could have the aforementioned clients transported from your Sanctuary location to your LBV location for this duration.*
- Team A2FP could look into renting a transport van for the duration (we have a licensed driver on staff) and possibly figure out either a cost split and/or we can absorb all cost associated.*

We sincerely hope that the above solutions bridge the gap while assisting you all with your transportation issues. Our goal is to work together for the benefit of positive client outcomes, and we are always willing to go beyond the extra mile to ensure this. Let's set up a conference call if needed so we can work together quickly to ensure that we have an appropriate plan in place to maintain and ensure the meeting of client needs during this time.

Thank you for your attention to this matter. Please do not hesitate to contact us if you require additional information or have any questions regarding this fix plan."

On 09/18/2024, at 8:00am, Mr. Mann (CCMi) emailed Mr. Johnson (A2FP), Kaitlyn Shaffer (CCMi) was copied on the email along with Jeremy Hodges (A2FP) Heather Kluemper (CCMi). The email stated:

- "CCMi is not willing to allow A2FP access to the Sanctuary to work with clients.*

- *I Appreciate your willingness to rearrange and/or expand your hours of availability. Although this will not impact CCMi's ability to transport to/from the MAC, it may become important as I revise the treatment schedule for other disciplines working with clients impacted by this transportation issue.*
- *Please send me any options you think of so that I can review and discuss with the CCMi team.*
- *Due to limited space inside the building and in the parking lot, we do not see this as a practical solution.*
- *CCMi is not willing to split the cost for alternate transportation options; Any licensed drivers you submit for consideration for the task will require drug screening, background checks, and any other requirements requested by CCMi."*

On 09/18/2024, at 4:15pm Ms. Kluemper (CCMi) emailed Mr. Johnson (A2FP), Mr. Mann (CCMi) was copied on the email along with Mr. Hodges (A2FP). The email stated that on behalf of Resident A's family and case manager Cindy Hinkle Resident A's parents would like to discontinue personal training. The discontinuance of A2's personal training is effective immediately.

On 09/20/2024 at 5:13pm, Mr. Mann (CCMi) emailed Mr. Hodges (A2FP), Ms. Kluemper (CCMi) and copied Mr. Desmond (A2FP). The email stated that medical transport is being setup for Resident D and Resident E. Resident D's dad is going to provide transport if needed until it is setup for her. Per case manager for Resident E, medical transport company should be reaching out to Kaitlyn Shaffer over the weekend and it may very well be setup for 09/23/2024. Resident C and Resident D have reported they don't want to participate, and Resident A has been disenrolled in A2FP at this time.

On 09/24/2024, Mr. Mann (A2FP) reported that each resident that works with the A2FP program has a tailored fitness program to expand upon their physical needs. Mr. Mann reported that if they are also receiving physical or occupational therapy we work in collaboration to strengthen certain muscle groups and build upon their needs while utilizing typical gym equipment and adaptable equipment to accomplish fitness goals. Mr. Mann reported that the ability to take the residents out into public gyms also presents opportunities for socializing and a level of normalcy not easily attainable when limited to working out at their care facilities.

On 09/24/2024, I interviewed Guardian B1 who reported that Resident B has not been going to the MAC with A2FP since the beginning of September 2024 because he is slowing down and does not want to go. Guardian B1 reported that there is a beautiful gym at the facility and that he is receiving physical therapy therefore Resident B no longer requires services though A2FP.

On 09/24/2024, I conducted an unannounced investigation and I reviewed all the resident records that were available for Resident A, Resident B, Resident C, Resident D and Resident E. Resident A, Resident B, Resident C, Resident D and

Resident E all have written physician orders that state, "fitness program/fitness therapy, evaluate and treat up to three times weekly including individual and group therapy in house/community or therapeutic setting." The resident records did not contain any physician orders discontinuing the services nor was there any documentation of resident refusals. Carrie Wolf was with me while I reviewed the files and she reported that she was not familiar with the resident records and any questions regarding the resident records should be addressed to Kaitlyn Schaefer.

On 09/25/2024, I interviewed Guardian C1 who reported being aware of the discontinuing of services through A2FP for Resident C.

On 09/25/2024, at 6:18pm Ms. Kluemper (CCMi) emailed Mr. Johnson (A2FP), Mr. Mann, Ms. Shaffer (CCMi) was copied on the email along with Mr. Hodges (A2FP). The email stated that Guardian B1 request to remove Resident B from the A2 exercise group effective immediately 9/25/2024.

On 10/01/2024, I interviewed Guardian A1 who reported being aware of the discontinuing of services through A2FP for Resident A.

On 10/31/2024, licensee designee Julia Hill reported that Guardian A1 discontinued Resident A's services with A2FP for fitness services on 09/18/2024. Licensee designee Hill reported that Resident A did receive services from A2FP on 9/2/2024, 9/04/2024, 9/09/2024, 9/11/2024, 09/16/2024, 2p-3p at the Michigan Athletic Club (MAC) 2900 Hannah Blvd, East Lansing, Michigan. On 9/30/2024, Harmony Cares Medical Group, Jessica Bates DNP, AGNP, "discontinued fitness programming due to neuro fatigue."

Licensee designee Hill reported that Resident B attended fitness services on 9/13/2024, 12p-1p at the MAC. Licensee designee Hill reported that Resident B has refused to attend fitness service since it moved to the MAC. At the time of the unannounced investigation, Resident C's record did not contain any documentation of fitness service refusals and licensee designee Hill did not provide any documentation of Resident B's refusals for fitness services when additional documentation was provided on 10/31/2024. Licensee designee Hill reported that Guardian B1 is aware and in agreement with Resident B not attending fitness services. Licensee designee Hill reported contacting his PMR, Dr. Andary (date unknown) to alert him of this change and reported that he is in agreement that Resident B can choose not to attend fitness. Licensee designee Hill did not provide any documentation of the above occurrence nor was a physician discontinue order provided.

Licensee designee Hill reported that Resident C does not go to the MAC or anywhere else for fitness services. It is unknown if Resident C ever received these services and/or for how long Resident C refused services. At the time of the unannounced investigation, Resident C's record did not contain any documentation of fitness service refusals and licensee designee Hill did not provide any

documentation of Resident C's refusals nor has a physician discontinue order been issued.

Licensee designee Hill reported that Resident D attended fitness at the MAC from 1:30p-2:30p on 9/2/2024, 9/04/2024, 9/06/2024, 9/09/2024, 9/11/2024, 9/13/2024, 9/16/2024, 9/18/2024, 9/20/2024, 9/23/2024, 9/25/2024, 9/27/2024, 9/30/2024, 10/2/2024, 10/4/2024, 10/7/2024, 10/9/2024, 10/11/2024, 10/14/2024, 10/16/2024, 10/18/2024, 10/21/2024, 10/23/2024, 10/25/2024. 10/27/2024-11/1/2024: no fitness as Resident D is currently at University of Michigan for a medical procedure.

Licensee designee Hill reported that Resident E attended fitness at the MAC from 1:00p-2:00p on 09/06/2024, 09/13/2024, 09/20/2024, 09/27/2024, 10/4/2024, 10/11/2024, 10/18/2024, 10/25/2024 and is scheduled for an appointment on 11/01/2024

On 10/31/2024, Mr. Hodges reported that A2FP provided services to the following Residents on the dates listed:

- Resident A on 9/16/2024 and 9/18/2024, then services were discontinued per the request of CCMi.
- Resident B has not attended.
- Resident C has not attended.
- Resident D attended on 9/16/2024, 9/18/2024, 9/20/2024, 9/23/2024, 9/27/2024, 9/30/2024; 10/2/2024, 10/04/2024, 10/14/2024, 10/18/2024, 10/21/2024, 10/23/2024 and 10/25/2024.
- Resident E attended on 9/16/2024, 9/18/2024, 9/20/2024, 9/23/2024, 9/25/2024; 10/02/2024, 10/04/2024, 10/07/2024, 10/09/2024, 10/14/2024, 10/16/2024, 10/18/2024, 10/21/2024, 10/23/2024 and 10/25/2024.

After reviewing the service dates provided by licensee designee Hill and Mr. Hoges (both documented above) there was a discrepancy with Resident D's dates of fitness service. Licensee designee Hill reported that Resident D received services on 10/07/2024, 10/09/2024, 10/11/2024, 10/16/2024 with a scheduled appointment for 11/01/2024, but those dates were not confirmed by Mr. Hodges. Licensee designee Hill also reported that Resident E was receiving fitness services one time per week, however Mr. Hodges reported that Resident E was being seen three times per week.

On 11/06/2024, due to discrepancy in fitness service dates, Mr. Hodges was contacted as he is the service provider. Mr. Hodges reported that Resident E receives fitness services on Monday, Wednesday and Friday. Mr. Hodges reported that the facilities van was no longer accessible as of 9/23/2024. Mr. Hodges reported Resident A's services were discontinued on 9/18/2024 while Resident B and Resident C's services discontinued on 9/20/2024 and Resident E missed her appointments on 9/27/2024 and 9/30/2024 due to transportation issues.

On 11/07/2024, licensee designee Hill reported that Resident B had a physician discontinue order dated 10/14/2024 for fitness services. Licensee designee Hill also

reported that Resident E missed her appointment for fitness on 9/27/2024 due to a care conference meeting and counseling assessment. Licensee designee Hill reported that on 9/30/2024, Resident E broke a tooth and she went to a dental appointment instead of fitness therapy that day. Licensee designee Hill reported direct care staff documents refusals and that she would send those over for all of the residents if they had refusals for fitness therapy.

On 10/14/2024, Resident B's physician, Dr. Michael Andary, MD documented "Patient can miss fitness on Friday."

On 11/07/2024, Mr. Hodges reported that Resident B's last day of attendance for fitness therapy was 9/13/2024.

On 11/08/2024, Mr. Hodges reported that 07/15/2024 was his last day Resident C participated in fitness therapy. Mr. Hodge reported that on 07/17/2024, fitness therapy started outside of the facility and for the following week Resident C was listed as "working" in transportation, he wasn't officially canceled until later. Mr. Hodges reported that A2FP did create a membership for him at both the Hannah center and then the MAC waiting on his participation to occur.

APPLICABLE RULE	
R 400.14303	Resident care; licensee responsibilities.
	(3) A licensee shall assure the availability of transportation services as provided for in the resident care agreement.
ANALYSIS:	Based on interviews with Guardians, licensee designee Hill and documentation provided by Mr. Hodges, A2FP there is no documenting to support that any resident missed a fitness therapy session due to the facility not providing/arranging transportation.
CONCLUSION:	VIOLATION NOT ESTABLISHED

APPLICABLE RULE	
R 400.14310	Resident health care.
	(1) A licensee, with a resident's cooperation, shall follow the instructions and recommendations of a resident's physician or other health care professional with regard to such items as any of the following: (d) Other resident health care needs that can be provided in the home. The refusal to follow the instructions

	and recommendations shall be recorded in the resident's record.
ANALYSIS:	<p>Resident A, Resident B, Resident C, Resident D and Resident E all have written physician orders that state, "fitness program/fitness therapy, evaluate and treat up to three times weekly including individual and group therapy in house/community or therapeutic setting."</p> <p>Licensee designee Hill and Guardian A1 reported that Resident A discontinued services with A2FP for fitness services on 09/18/2024. On 9/30/2024, Harmony Cares Medical Group, Jessica Bates DNP, AGNP, wrote an order stating, "discontinued fitness programming due to neuro fatigue." There were 12 days that fitness services were physician ordered but not provided to Resident A as prescribed.</p> <p>Licensee designee Hill reported that Resident B attended fitness services on 9/13/2024 from 12p-1p at the MAC. Licensee designee Hill reported that Resident B has refused to attend fitness since it moved to the MAC. Guardian B1 is aware and in agreement with this. Licensee designee Hill reported contacting Dr. Andary to alert him of this change and reported that he is in agreement that Resident B can choose not to attend fitness. Licensee designee Hill did not provide any documentation of Resident B's refusals to attend fitness services. Dr. Andary discontinued Resident B's fitness services on 10/14/2024. Prior to the discontinuation all fitness services, Resident B's refusal to participate were not documented as required.</p> <p>Licensee designee Hill reported that Resident C does not go to the MAC or anywhere else for fitness services. Licensee designee Hill did not provide any documentation that Resident C refuses these services nor was a physician order discontinuing the services issued.</p> <p>In summary, any resident health care need that can be provided in the home (and/or with a third-party provider) must be provided to the residents to meet their medical needs. Although Resident A was provided with a physician discontinue order on 9/30/2024, there were 12 days that fitness services were physician recommended but not provided to Resident A as prescribed therefore a violation has been established.</p> <p>If a resident(s) refuses to follow the instructions and recommendations of the physician, refusals shall be recorded in the resident's record. At the time of the unannounced</p>

	investigation nor when licensee designee Hill provided additional documentation on 10/31/2024, Resident B and Resident C were not attending physician prescribed fitness serviced and there was no documentation of their refusals. On 11/07/2024, licensee designee Hill provided a physician discontinue order date of 10/14/2024 for Resident B. Resident C does not have a physician discontinue order for fitness services therefore a violation has been established.
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

On 09/24/2024, I conducted an unannounced investigation and I reviewed all resident records that were available for Resident A, Resident B, Resident C, Resident D and Resident E. Resident A, Resident B, Resident C, Resident D and Resident E's records did not contain written assessment plans. While at the facility, I asked CCMi employee Carrie Wolf about the written assessment plans and she was not aware of the documents and she suggested I call or email care coordinator Kaitlyn Schaeffer to obtain the documents.

On 10/31/2024, I requested the written assessment plans for Resident A, Resident B, Resident C, Resident D and Resident E from licensee designee Hill. Licensee designee Hill's response to my email was for me to clarify what I meant by the assessment plan for each resident. I sent licensee designee Hill a copy of the BCAL 3265, *Assessment Plan for AFC Residents*. On 11/04/2024, licensee designee Hill sent over the facilities written assessment plans for Resident A, Resident B, Resident C, Resident D and Resident E.

APPLICABLE RULE	
R 400.14301	Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.
	(4) At the time of admission, and at least annually, a written assessment plan shall be completed with licensee. A licensee shall maintain a copy of the resident's written assessment plan on file in the home.
ANALYSIS:	On 09/24/2024, at the time of the unannounced investigation written assessment plans were not in the resident record for Resident A, Resident B, Resident C, Resident D and Resident E therefore a violation has been established.
CONCLUSION:	VIOLATION ESTABLISHED

On 11/12/2024 an exit conference was conducted with licensee designee Julia Hill who understood the violations that were established during the investigation.

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan I recommend no change in license status.




11/12/2024

Julie Elkins
Licensing Consultant

Date

Approved By:



11/12/2024

Dawn N. Timm
Area Manager

Date