ELECTRONICALLY FILED
COURT OF COMMON PLEAS
Friday, February 27, 2026 9:20:23 AM
CASE NUMBER: 2026 CV 01231 Docket ID: 326570823
Mike Foley
CLERK OF COURTS MONTGOMERY COUNTY OHIO

IN THE COURT OF COMMON PLEAS
MONTGOMERY COUNTY, OHIO

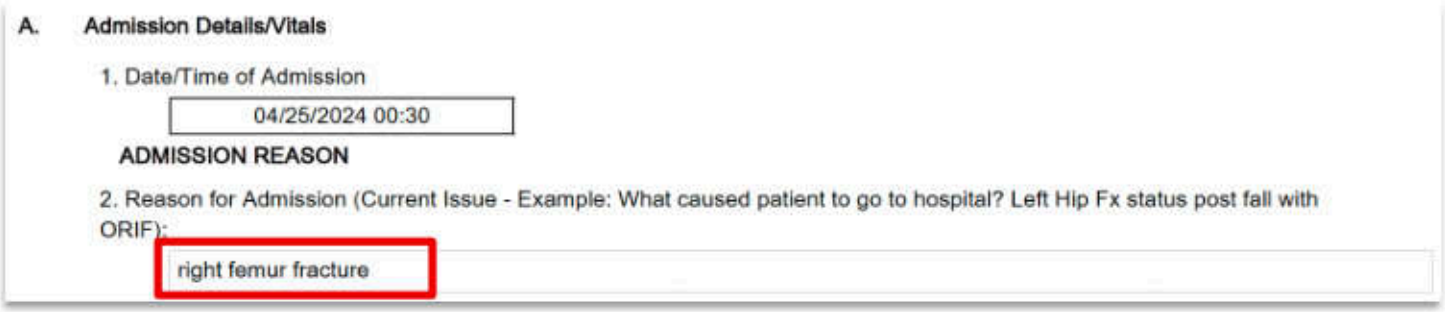
ESTATE OF BONNIE L. MCGUFFEY, DECEASED Through Estate Representative James McGuffey c/o Michael Hill Trial Law 815 Superior Avenue, Suite 623 Cleveland, Ohio 44114 Plaintiff, vs. STONESPRING OF VANDALIA AKA STONESPRING TRANSITIONAL CARE CENTER, LLC 4000 Singing Hills Boulevard Dayton, Ohio 45414 Also Serve c/o Registered Agent: Barry N. Bortz 390 Wards Corner Road Loveland Ohio 45140 and CARESPRING HEALTH CARE MANAGEMENT, LLC c/o Registered Agent: David Eppers 390 Wards Corner Road Loveland Ohio 45140 and STONESPRING TRANSITIONAL CARE CENTER REALTY, LTD c/o Registered Agent: Barry N. Bortz 390 Wards Corner Road Loveland Ohio 45140	CASE NO. JUDGE **COMPLAINT** **WITH JURY DEMAND** **MOTION FOR EXTENSION OF TIME TO FILE AFFIDAVIT OF MERIT INCLUDED**

Plaintiff, the Estate of Bonnie L. McGuffey, Deceased, through Estate Representative James McGuffey, for this Complaint against the above-named Defendant(s), states and avers upon information and belief:

INTRODUCTION

1. This action involves multiple claims (medical negligence, recklessness, wrongful death, Resident's Rights Law violations, civil conspiracy, and fraud) involving Stonespring of Vandalia aka Stonespring Transitional Care Center, LLC's ("Facility's") inadequate care of Bonnie L. McGuffey and the corporate control of the facility leading to such inadequate care that led to Bonnie L. McGuffey's untimely and wrongful death on April 03, 2025.

2. On April 25, 2024, Bonnie McGuffey was admitted to Stonespring of Vandalia aka Stonespring Transitional Care Center, LLC for post-acute care after being released from Miami Valley Hospital, where she had an operation to correct a periprosthetic fracture of the right femur. Bonnie's right femur was placed in a brace following the operation.


A. Admission Details/Vitals

1. Date/Time of Admission

04/25/2024 00:30

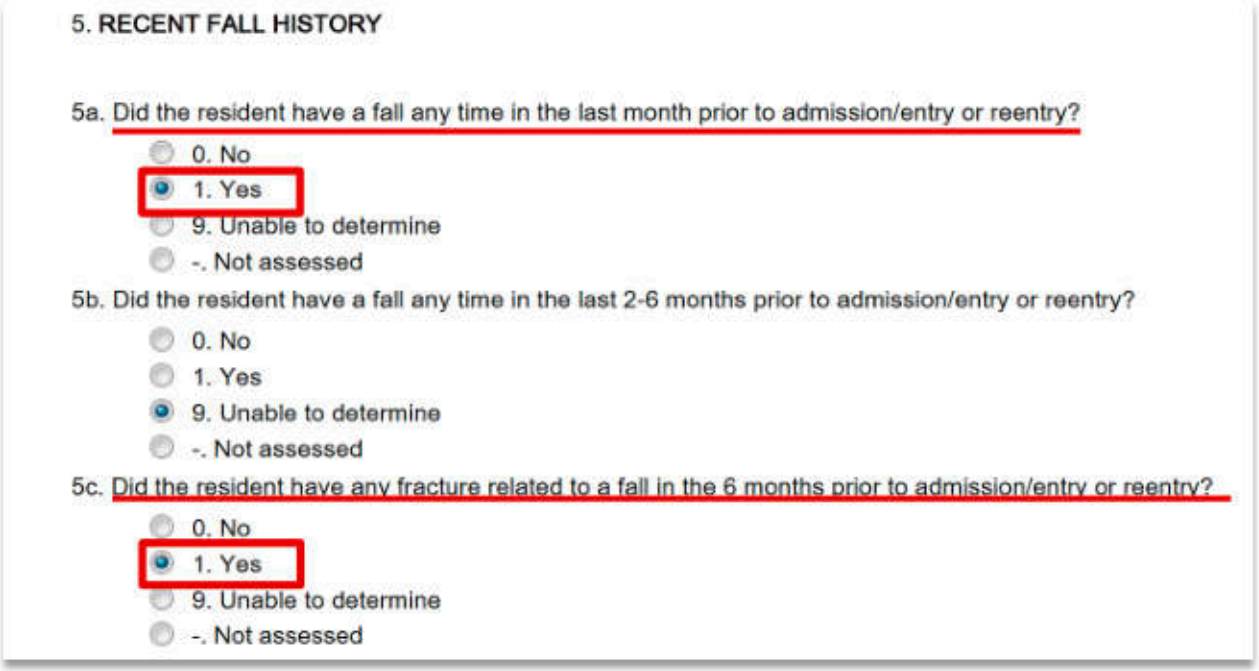
ADMISSION REASON

2. Reason for Admission (Current Issue - Example: What caused patient to go to hospital? Left Hip Fx status post fall with ORIF):

right femur fracture

Bonnie McGuffey was admitted to Stonespring of Vandalia for post-acute care after an operation to correct a periprosthetic fracture of the right femur.

3. At the time Bonnie was admitted, Stonespring of Vandalia was well aware of her mobility issues and recent fall history.


5. RECENT FALL HISTORY

5a. Did the resident have a fall any time in the last month prior to admission/entry or reentry?

- 0. No
- (•) 1. Yes
- 9. Unable to determine
- -. Not assessed

5b. Did the resident have a fall any time in the last 2-6 months prior to admission/entry or reentry?

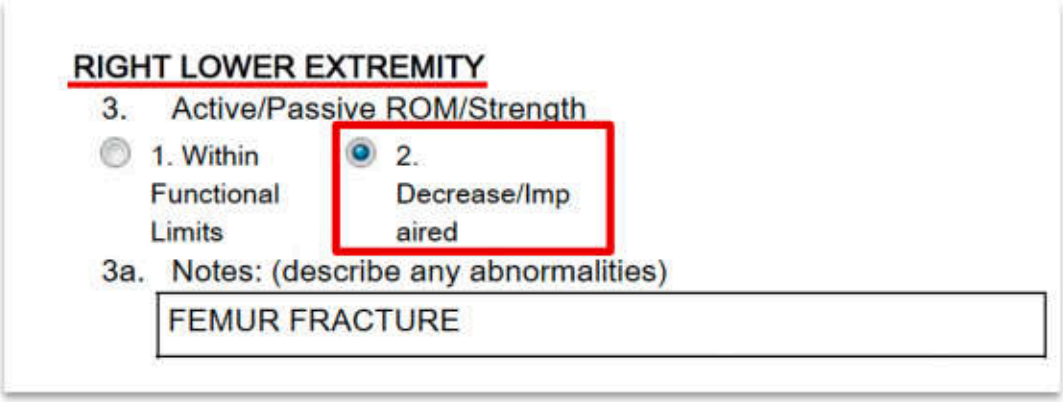
- 0. No
- 1. Yes
- (•) 9. Unable to determine
- -. Not assessed

5c. Did the resident have any fracture related to a fall in the 6 months prior to admission/entry or reentry?

- 0. No
- (•) 1. Yes
- 9. Unable to determine
- -. Not assessed

Stonespring of Vandalia was aware of Bonnie McGuffey's mobility issues and recent fall history when she was admitted.

4. As expected, Bonnie's recovery from the surgery on her right femur impaired her ability to use her right leg for any functional purposes.


RIGHT LOWER EXTREMITY

3. Active/Passive ROM/Strength

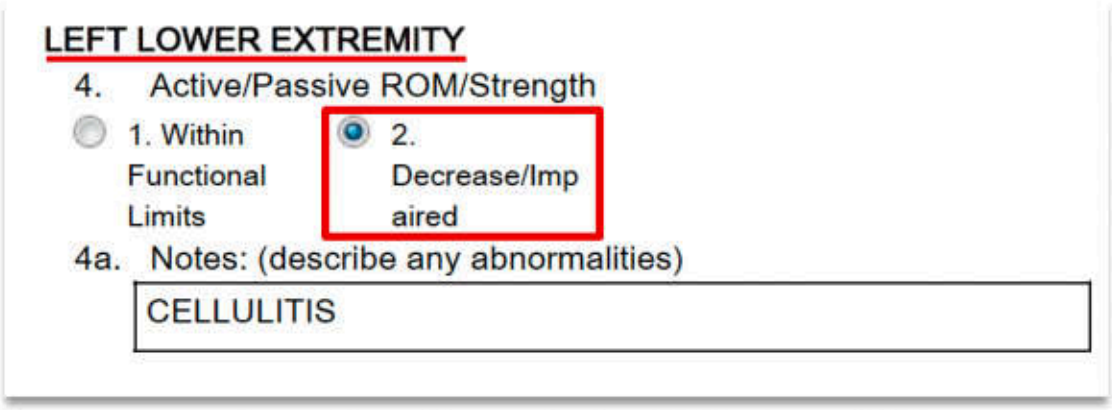
- 1. Within Functional Limits
- (•) 2. Decrease/Impaired

3a. Notes: (describe any abnormalities)

FEMUR FRACTURE

Bonnie was unable to use her lower right leg due to her femur fracture.

5. In addition to her right femur fracture, Bonnie also had cellulitis on her lower left leg, making her entirely reliant on staff for mobility.


LEFT LOWER EXTREMITY

4. Active/Passive ROM/Strength

1. Within Functional Limits

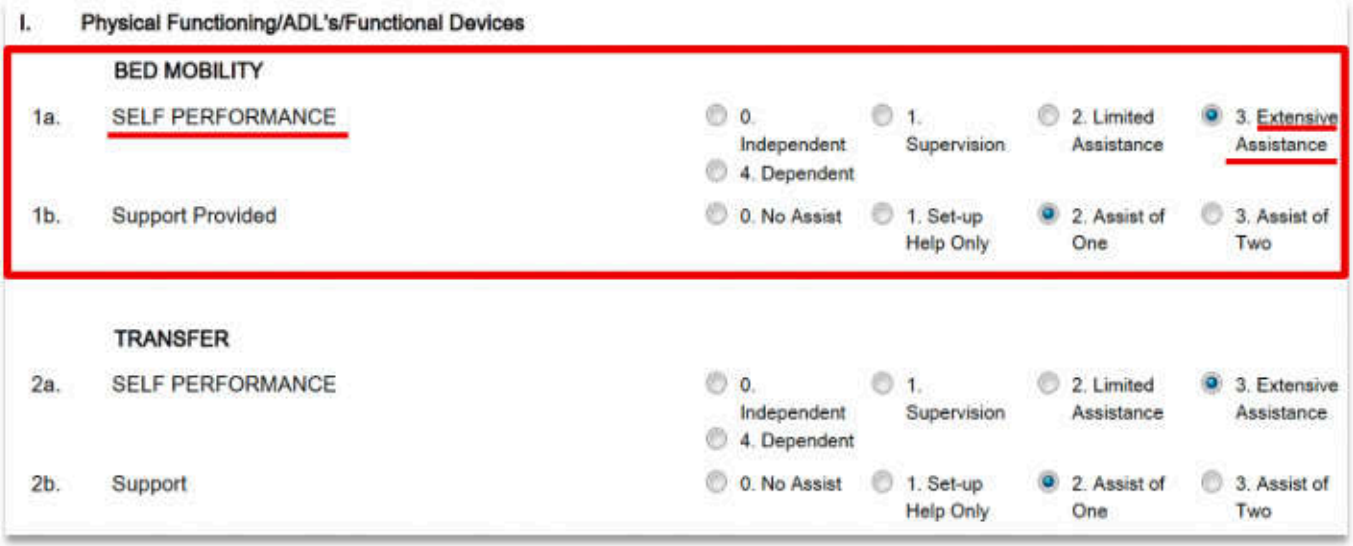
2. Decrease/Impaired

4a. Notes: (describe any abnormalities)

CELLULITIS

Bonnie was also unable to use her lower left leg due to cellulitis.

6. Bonnie underwent admission assessments wherein Stonespring of Vandalia acknowledged Bonnie's limitations and that she was a fully dependent patient who relied entirely on staff for care.


I. Physical Functioning/ADL's/Functional Devices

BED MOBILITY

1a. SELF PERFORMANCE — 0. Independent; 1. Supervision; 2. Limited Assistance; 3. Extensive Assistance; 4. Dependent

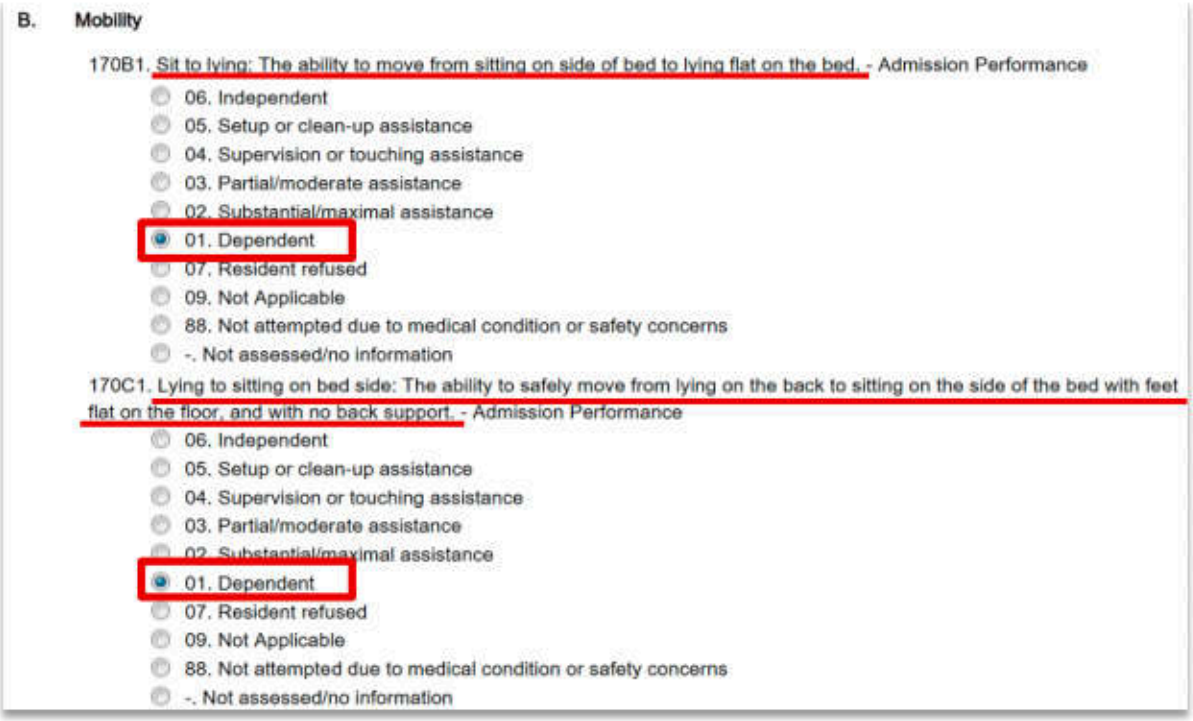
1b. Support Provided — 0. No Assist; 1. Set-up Help Only; 2. Assist of One; 3. Assist of Two

TRANSFER

2a. SELF PERFORMANCE — 0. Independent; 1. Supervision; 2. Limited Assistance; 3. Extensive Assistance; 4. Dependent

2b. Support — 0. No Assist; 1. Set-up Help Only; 2. Assist of One; 3. Assist of Two

Stonespring of Vandalia acknowledged that Bonnie was a fully dependent patient who relied entirely on staff for care.



B. Mobility

170B1. Sit to lying: The ability to move from sitting on side of bed to lying flat on the bed. - Admission Performance

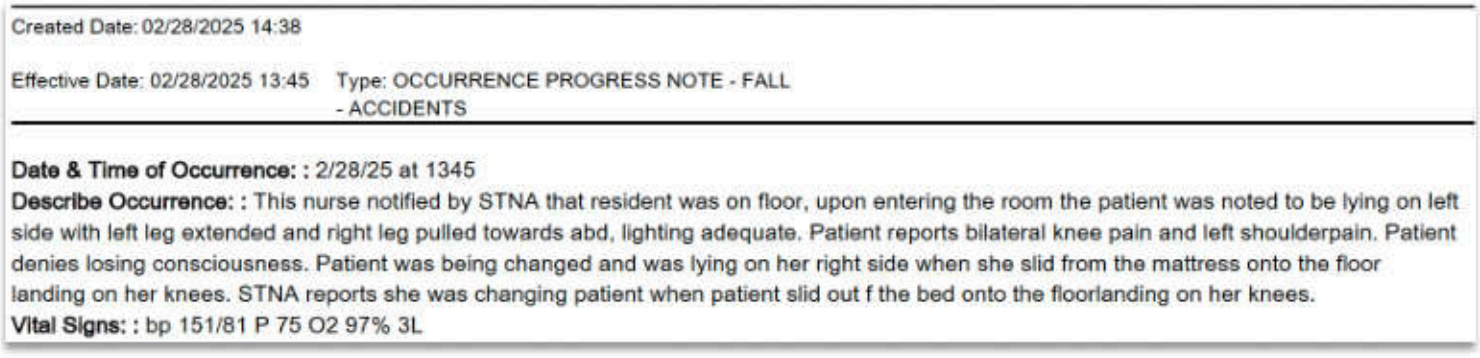
- 06. Independent
- 05. Setup or clean-up assistance
- 04. Supervision or touching assistance
- 03. Partial/moderate assistance
- 02. Substantial/maximal assistance
- (●) 01. Dependent
- 07. Resident refused
- 09. Not Applicable
- 88. Not attempted due to medical condition or safety concerns
- -. Not assessed/no information

170C1. Lying to sitting on bed side: The ability to safely move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support. - Admission Performance

- 06. Independent
- 05. Setup or clean-up assistance
- 04. Supervision or touching assistance
- 03. Partial/moderate assistance
- 02. Substantial/maximal assistance
- (●) 01. Dependent
- 07. Resident refused
- 09. Not Applicable
- 88. Not attempted due to medical condition or safety concerns
- -. Not assessed/no information

Stonespring of Vandalia acknowledged that Bonnie was a fully dependent patient who relied entirely on staff for care.

7. On February 28, 2025, an aide improperly repositioned Bonnie during a routine sheet change, causing Bonnie to fall two feet from her bed to the ground. The reporting nurse found Bonnie on the floor on her left side with her right leg hanging from her bed.



Created Date: 02/28/2025 14:38

Effective Date: 02/28/2025 13:45 Type: OCCURRENCE PROGRESS NOTE - FALL - ACCIDENTS

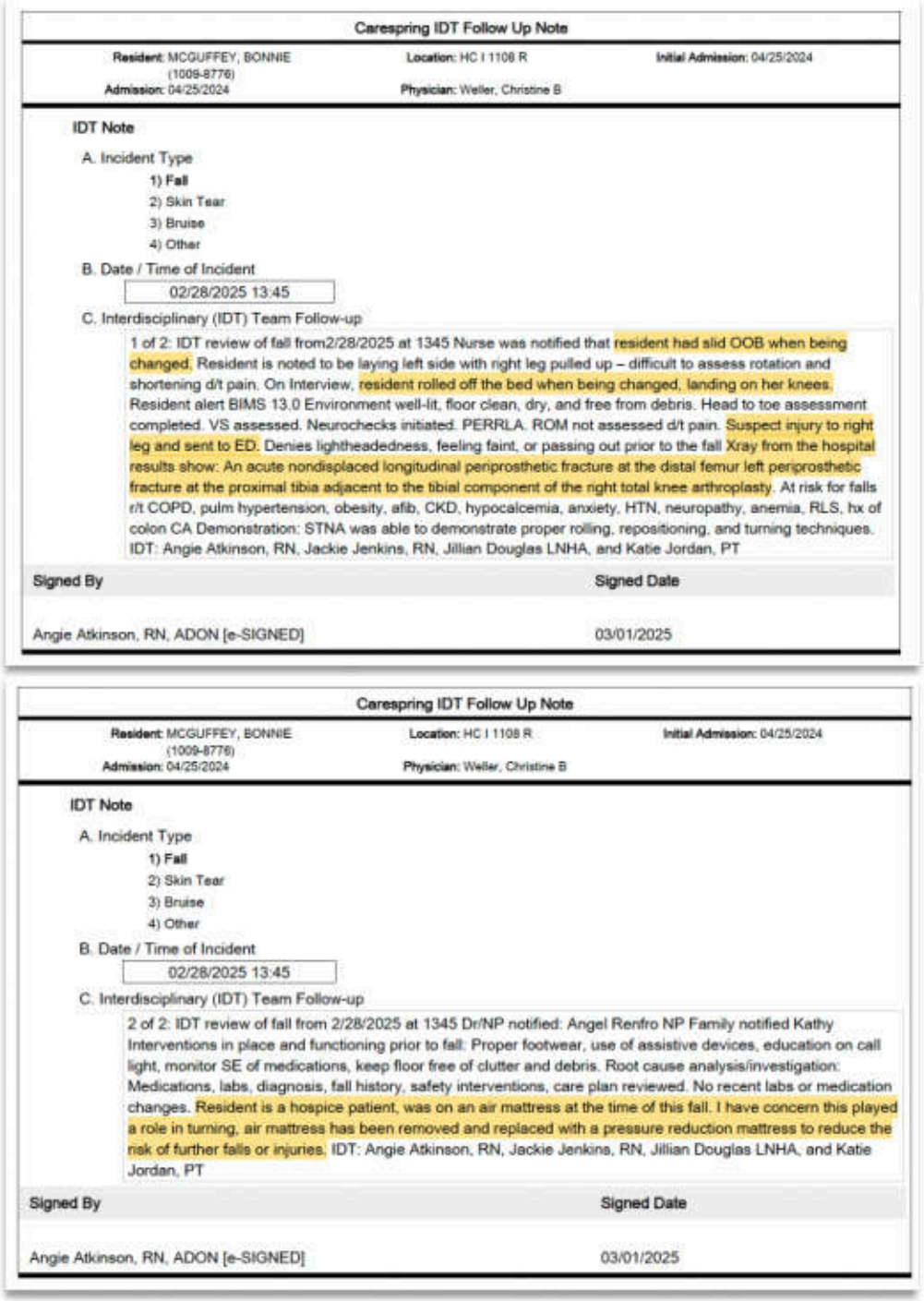
Date & Time of Occurrence: : 2/28/25 at 1345

Describe Occurrence: : This nurse notified by STNA that resident was on floor, upon entering the room the patient was noted to be lying on left side with left leg extended and right leg pulled towards abd, lighting adequate. Patient reports bilateral knee pain and left shoulderpain. Patient denies losing consciousness. Patient was being changed and was lying on her right side when she slid from the mattress onto the floor landing on her knees. STNA reports she was changing patient when patient slid out f the bed onto the floorlanding on her knees.

Vital Signs: : bp 151/81 P 75 O2 97% 3L

During a routine sheet change, an aide improperly repositioned Bonnie and caused her to fall two feet from her bed to the ground.

8. Rather than acknowledging the aide's improper method of repositioning Bonnie, the nurse documented that this fall was caused by Bonnie's "air mattress."



Carespring IDT Follow Up Note

Resident: MCGUFFEY, BONNIE (1009-8776) | Location: HC I 1108 R | Initial Admission: 04/25/2024
Admission: 04/25/2024 | Physician: Weller, Christine B

IDT Note

A. Incident Type
1) Fall
2) Skin Tear
3) Bruise
4) Other

B. Date / Time of Incident
02/28/2025 13:45

C. Interdisciplinary (IDT) Team Follow-up

1 of 2: IDT review of fall from2/28/2025 at 1345 Nurse was notified that resident had slid OOB when being changed. Resident is noted to be laying left side with right leg pulled up – difficult to assess rotation and shortening d/t pain. On Interview, resident rolled off the bed when being changed, landing on her knees. Resident alert BIMS 13.0 Environment well-lit, floor clean, dry, and free from debris. Head to toe assessment completed. VS assessed. Neurochecks initiated. PERRLA. ROM not assessed d/t pain. Suspect injury to right leg and sent to ED. Denies lightheadedness, feeling faint, or passing out prior to the fall Xray from the hospital results show: An acute nondisplaced longitudinal periprosthetic fracture at the distal femur left periprosthetic fracture at the proximal tibia adjacent to the tibial component of the right total knee arthroplasty. At risk for falls r/t COPD, pulm hypertension, obesity, afib, CKD, hypocalcemia, anxiety, HTN, neuropathy, anemia, RLS, hx of colon CA Demonstration: STNA was able to demonstrate proper rolling, repositioning, and turning techniques. IDT: Angie Atkinson, RN, Jackie Jenkins, RN, Jillian Douglas LNHA, and Katie Jordan, PT

Signed By	Signed Date
Angie Atkinson, RN, ADON [e-SIGNED]	03/01/2025

Carespring IDT Follow Up Note

Resident: MCGUFFEY, BONNIE (1009-8776) | Location: HC I 1108 R | Initial Admission: 04/25/2024
Admission: 04/25/2024 | Physician: Weller, Christine B

IDT Note

A. Incident Type
1) Fall
2) Skin Tear
3) Bruise
4) Other

B. Date / Time of Incident
02/28/2025 13:45

C. Interdisciplinary (IDT) Team Follow-up

2 of 2: IDT review of fall from 2/28/2025 at 1345 Dr/NP notified: Angel Renfro NP Family notified Kathy Interventions in place and functioning prior to fall: Proper footwear, use of assistive devices, education on call light, monitor SE of medications, keep floor free of clutter and debris. Root cause analysis/investigation: Medications, labs, diagnosis, fall history, safety interventions, care plan reviewed. No recent labs or medication changes. Resident is a hospice patient, was on an air mattress at the time of this fall. I have concern this played a role in turning, air mattress has been removed and replaced with a pressure reduction mattress to reduce the risk of further falls or injuries. IDT: Angie Atkinson, RN, Jackie Jenkins, RN, Jillian Douglas LNHA, and Katie Jordan, PT

Signed By	Signed Date
Angie Atkinson, RN, ADON [e-SIGNED]	03/01/2025

The nurse documented that this fall was caused by Bonnie's "air mattress," not by the aide's improper method of repositioning Bonnie.

9. Bonnie was transported to Kettering Health Dayton Hospital via emergency medical services. Upon admission to the emergency department, Bonnie complained of bilateral leg swelling, bilateral knee pain, neck pain and shoulder pain.

02/28/2025 - ED to Hosp-Admission (Discharged) in Kettering Health Dayton Acute Care Trauma 5 West (continued)

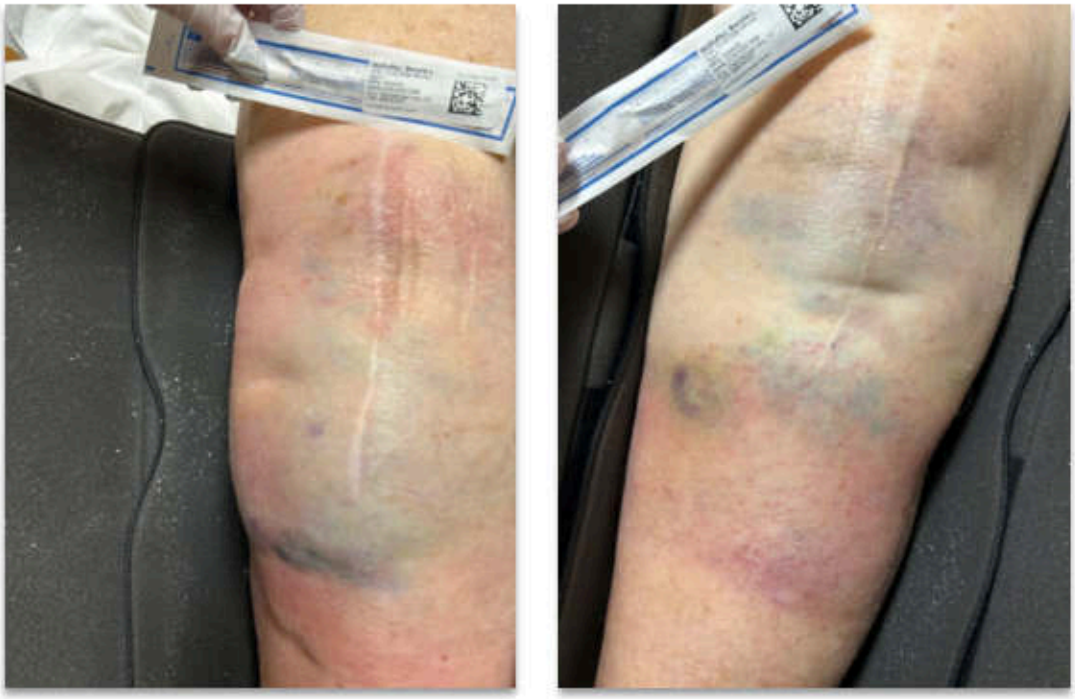
ED Provider Note (continued)

Chief Complaint
Patient presents with
- Fall

TRIAGE NOTE:
Patient brought in from stonespring of Vandalia, post fall, witnessed,with the chief complaint of right knee and left shoulder pain. No LOC

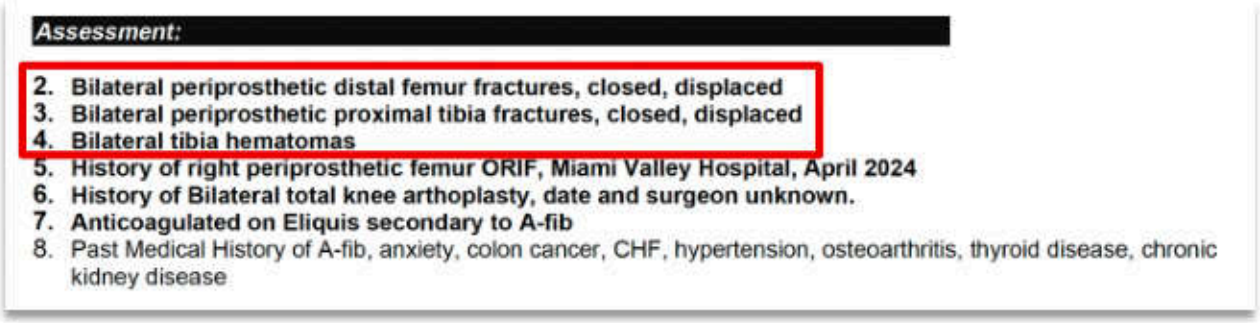
HPI/ PERTINENT REVIEW OF SYSTEMS
Bonnie L McGuffey is a 88 y.o. female in bed GVEDD33/D33 who presents to the ED with chief complaint of bilateral knee pain, left shoulder pain and neck pain after 2 foot fall out of bed. Patient was being rolled in her bed to have her she changes but lives relatively far and fell to the ground. Patient denies hitting her head or loss of consciousness, however she is complaining of neck pain at this time. Patient states she is ambulatory at the nursing home with a walker but has not attempted to walk after her fall. Patient has history of hypertension, chronic disease and heart failure. Patient states her she has bilateral knee replacement, chart review reveals her last orthopedic surgery was done on April 2024. Patient endorses bilateral leg swelling, bilateral knee pain, neck pain and left shoulder pain. She denies shortness of breath, chest pain, abdominal pain, nausea, change in urination or bowel movements.

After the fall, Bonnie was suffering from bilateral leg swelling, bilateral knee pain, neck pain and shoulder pain.



Bonnie's knees were swollen upon arrival to Kettering Health Dayton Hospital.

10. X-rays were taken of Bonnie's lower extremities and showed signs of potential knee fractures. CT scans revealed that Bonnie's fall caused bilateral periprosthetic distal femur fractures, displaced bilateral periprosthetic proximal tibia fractures, and displaced bilateral tibia hematomas.

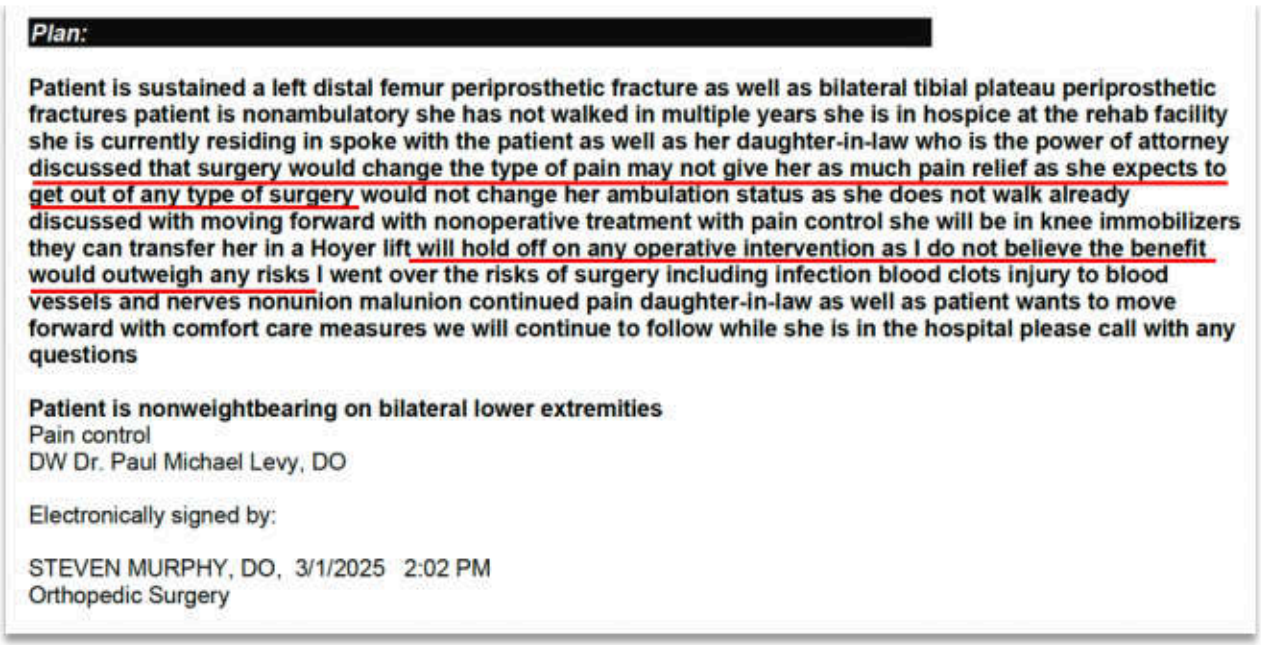


Assessment:

2. **Bilateral periprosthetic distal femur fractures, closed, displaced**
3. **Bilateral periprosthetic proximal tibia fractures, closed, displaced**
4. **Bilateral tibia hematomas**
5. **History of right periprosthetic femur ORIF, Miami Valley Hospital, April 2024**
6. **History of Bilateral total knee arthoplasty, date and surgeon unknown.**
7. **Anticoagulated on Eliquis secondary to A-fib**
8. Past Medical History of A-fib, anxiety, colon cancer, CHF, hypertension, osteoarthritis, thyroid disease, chronic kidney disease

The fall caused bilateral periprosthetic distal femur fractures, displaced bilateral periprosthetic proximal tibia fractures, and displaced bilateral tibia hematomas.

11. On March 1, 2025, Bonnie was seen for an orthopedic surgery consultation. The consulting surgeon informed Bonnie's family that surgery would not necessarily give Bonnie the pain relief she was seeking, and the risks outweighed the benefits.



Plan:

Patient is sustained a left distal femur periprosthetic fracture as well as bilateral tibial plateau periprosthetic fractures patient is nonambulatory she has not walked in multiple years she is in hospice at the rehab facility she is currently residing in spoke with the patient as well as her daughter-in-law who is the power of attorney discussed that surgery would change the type of pain may not give her as much pain relief as she expects to get out of any type of surgery would not change her ambulation status as she does not walk already discussed with moving forward with nonoperative treatment with pain control she will be in knee immobilizers they can transfer her in a Hoyer lift will hold off on any operative intervention as I do not believe the benefit would outweigh any risks I went over the risks of surgery including infection blood clots injury to blood vessels and nerves nonunion malunion continued pain daughter-in-law as well as patient wants to move forward with comfort care measures we will continue to follow while she is in the hospital please call with any questions

Patient is nonweightbearing on bilateral lower extremities
Pain control
DW Dr. Paul Michael Levy, DO

Electronically signed by:

STEVEN MURPHY, DO, 3/1/2025 2:02 PM
Orthopedic Surgery

During an orthopedic surgery consultation, Bonnie's family was informed that the risks of Bonnie undergoing surgery outweighed the benefits.

12. On March 2, 2026, Bonnie discharged from Kettering Health Dayton. At the time of her discharge from the hospital, Bonnie's pain had been at a score of 10 out of 10 for forty-eight hours. In order to treat this pain, she was prescribed 325 mg of oxycodone-acetaminophen every six hours, as needed. She was also ordered to wear immobilizing braces for comfort.

ASSESSMENT AND RECOMMENDATIONS	
Psychosocial Information: DNR-CC	**Pain Management**: **Range of Pain in last 48 hrs**.: 10 **Location(s)**: Bil lower extremities **Duration**: Intermittent **Characteristic**: Throbbing **Effective Pain Relief Efforts**: pain medicine
Community Referrals: Hospice	**Nutritional Status**: **Appetite**: fair **Percentage**: 75 **Respiratory Status**: 2L/NC

Bonnie's pain had been at a score of 10 out of 10 for forty-eight hours when she was discharged from the hospital.

13. This same day, Bonnie was returned to Stonespring of Vandalia via emergency medical services for hospice treatment.

14. On March 3, 2025, Bonnie was noted to be "crying, having uncontrolled pain" due to pain in her lower extremities.

History Of Present Illness:
88-year-old female seen at this time for follow-up visit. Patient returns has bilateral lower extremity fractures, did not have surgery on extremities, patient is hospice. Patient noted to be crying, having uncontrolled pain at this time. Will make adjustments to oxycodone, will add Robaxin. Patient states lower extremities are hurting. Did note vitals are elevated with elevated heart rate. Will also make adjustments to senna to prevent constipation from narcotics. Patient does have break through morphine sulfate as needed. Patient denies body aches/chills, chest pain, shortness of breath, abdominal pain, nausea, vomiting, diarrhea, constipation, or acute urinary symptoms. Afebrile.

Bonnie was "crying, having uncontrolled pain" due to pain in her lower extremities.

15. Over the next few weeks, Bonnie suffered extreme pain. Bonnie was crying, stating she was "ready to die." Additionally, both her right and left lower extremity

wounds began to emit foul smells. Bonnie's left lower extremity also began to produce heavy drainage.

Created Date: 03/11/2025 11:17

Effective Date: 03/11/2025 11:16 Type: CS SOCIAL SERVICE NOTE

Note Text : resident answered yes to last question of phq assessment. resident was tearful and stated that she is ready to die. resident does not want to harm herself- no suicidal ideations at this time. SW offered love & support. SW will continue to stay available as needed

Author:Madyson Barner Social Services - Social Worker Signature: _____

Created Date: 03/19/2025 18:49

Effective Date: 03/19/2025 18:48 Type: CS-NURSING NOTE

Note Text : RLE wound has a foul smell, no purulent drainage. Wound nurse and provider Angel R FNP given communication.

Created Date: 03/21/2025 11:59

Effective Date: 03/21/2025 01:00 Type: Encounter

Date of Service : 03/21/2025
Transition of Care : No transition occurred.
Details : This is a copy of a signed encounter note documented in GEHRIMED.

Progress Note

History

Code Status:
Do Not Attempt Resuscitation (DNR/no CPR). Tremors, elevated TSH

Room:
1208

Floor:
HC I

Chief Complaint / Nature of Presenting Problem:
Left lower extremity wound-odorous with heavy drainage

Bonnie's pain only continued to worsen. Both her lower leg wounds began to emit foul smells, and her left leg wound began to produce heavy drainage.

16. On April 3, 2025, Bonnie McGuffey passed away at Stonespring of Vandalia.

Created Date: 04/03/2025 08:06

Effective Date: 04/03/2025 08:03 Type: CS-NURSING NOTE

Note Text : This nurse notified by STNA that resident wasn't responding, upon entering room patient noted to be lying supine, absent pulse and respirations confirmed by 2 nurses at 0754. Doctor, NP, and hospice notified

Author:Brad Savin Nursing - RN Signature: _____

Bonnie passed away on April 3, 2025.

17. Given the nature of Bonnie's death, the Montgomery County Medical Examiner's Office took jurisdiction over her body. After examination, the Medical Examiner's Office determined that Bonnie died from "multiple fractures" that occurred weeks before her death. The injury was described to have occurred as a "ground level fall." The manner of death was ruled accidental, meaning it was not the result of any natural disease process.

CAUSE OF DEATH

28. Part I. Enter the disease, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. Type or print in permanent blue or black ink. — Approximate Interval: Onset and Death

Immediate Cause (Final disease or condition resulting in death): a. MULTIPLE FRACTURES — WEEK[S]

Sequentially list conditions, if any, leading to immediate cause. Enter Underlying Cause (Disease or injury that initiated events resulting in a death):
b. Due to (or as Consequence of):
c. Due to (or as Consequence of):
d. Due to (or as Consequence of):

Part II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.
ARTERIOSCLEROTIC AND HYPERTENSIVE CARDIOVASCULAR DISEASE, CHRONIC OBSTRUCTIVE PULMONARY DISEASE, OBESITY

29a. Was An Autopsy Performed? NO

29b. Were Autopsy Findings Available Prior To Completion Of Cause of Death? NOT APPLICABLE

30. Did Tobacco Use Contribute to Death? UNKNOWN

31. If Female, Pregnancy Status: NOT APPLICABLE.

32. Manner of Death: ACCIDENT

33a. Date of Injury (Mo/Day/Year): 02/28/2025

33b. Time of Injury: 13:30

33c. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area): AT HOME

33d. Injury at Work? NO

33e. Location of Injury (Street and Number or Rural Route Number; City or Town, State): 4000 SINGING HILLS BLVD. ROOM 1108 , BUTLER TOWNSHIP, OHIO

33f. Describe How Injury Occurred: GROUND LEVEL FALL

33g. If Transportation Injury, Specify:

HEA 2724 Rev. 08/18

Bonnie's death certificate indicates she died from "multiple fractures" that occurred weeks before her death. The injury was described to have occurred as a "ground level fall."

18. Plaintiff requests a trial by jury.

19. A Motion to Extend the time to file an affidavit of merit is filed contemporaneously with this Complaint.

20. Plaintiff brings this action for compensation for the harms and losses sustained as the result of the negligence, recklessness, conscious disregard, reckless disregard, conduct by which—through heedless indifference to the consequences—the Defendants or their staff disregarded a substantial and unjustifiable risk that the health care provider's conduct is likely to cause, at the time those services or that treatment or care were rendered, an unreasonable risk of injury, death, or loss to person or property, or intentional misconduct or willful or wanton misconduct, and other wrongful conduct described herein or discovered during litigation.

DEFENDANTS

21. Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC is an Ohio corporation that holds itself out to the public as a provider of medical and nursing care, including but not limited to, rehabilitation and skilled nursing care, through its agents, operatives and / or employees and does business as Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC.

22. Carespring Health Care Management, LLC is an Ohio corporation that holds itself out to the public as a provider of medical and nursing care, including but not limited to, rehabilitation and skilled nursing care, through its agents, operatives and / or employees and does business as Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC.

23. Stonespring Transitional Care Center Realty, LTD is an Ohio corporation that holds itself out to the public as a provider of medical and nursing care, including but

not limited to, rehabilitation and skilled nursing care, through its agents, operatives and / or employees and does business as Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC is an Ohio.

24. The Defendants employ, manage, and direct the care and service providers who were responsible for Bonnie L. McGuffey's care, treatment, and safety at Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC is an Ohio while she was a resident there, and / or are responsible for creating unsafe conditions at the Facility through their control of the Facility management that directly led to Bonnie L. McGuffey's injuries and untimely and wrongful death on April 03, 2025.

25. The Defendants direct and control operations at the Facility and are therefore directly liable for mismanagement of the Facility without regard to piercing the corporate veil.

26. The Defendant organization controls the other corporations in a way that is so complete that the corporations have no separate mind, will, or existence of their own, is exercised in such a manner as to commit fraud or an illegal act against the person seeking to disregard the corporate entity; and injury or unjust loss resulted to the plaintiff from such control and wrong, meaning the Defendants should be held directly liable for such harms and losses.

27. The Defendants collectively own, manage, control, and/or are responsible for the care delivered to residents of Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC is an Ohio directly or through their domination and control of any putative entity license holder.

VICARIOUS LIABILITY

28. The Defendants employ the care providers who were responsible for ensuring Bonnie L. McGuffey's care and safety.

29. The Defendants manage, control, and/or employ the nursing staff at the Facility.

30. James McGuffey and his family looked to the Defendants for care based upon their representations.

31. The Defendants are vicariously liable for the negligent actions of their employees and agents (respondeat superior and agency liability) and/or independent contractors (Clark v. Southview agency by estoppel), including visiting physicians and nurse practitioners contracted with any of the Defendants and / or provided to residents as default or house care providers.

JURISDICTION AND VENUE

32. This Court has Jurisdiction over Defendant(s) because, among other things, all Defendant(s) do, and all times relevant did, purposefully avail themselves of the laws of the State of Ohio, and/or committed tortious acts within the State of Ohio.

33. Venue is proper in Montgomery County, Ohio under Civil Rule 3(B) because, among other reasons: (a) one or more Defendants reside, domicile, or carry on their principal place of business in that county; and (b) part of the claim for relief arose in that county.

COMMON FACTS

34. Defendants hold themselves out to the public as providers of long-term nursing home, skilled nursing, and memory care services.

35. Defendants' for-profit model means their primary goal is to maximize profit, measured by revenues minus expenses.

36. For nursing homes generally, the largest individual revenue source is residents (filling beds), and the largest individual expense is the cost of employing nursing staff to provide care to those residents. This creates a financial incentive to take on more residents with greater care needs than the nursing staff can properly care for, a violation of federal nursing home regulations regarding staffing levels.

37. The Defendants manage, control, and / or employ the nursing staff at Facility.

38. The Defendants exercise actual control over the Facility's management and operations to maximize profits, including control over facility-level:

a. policies and procedures, including regarding resident care;

b. finances, including obtaining credit and loans, guaranteeing loans (both at the corporate and individual facility level), maintaining funds and banking, obtaining, owning, and leasing facility land and buildings, and capital expenditures;

c. budgeting, including controlling the amount of funds available for staffing facilities;

d. personnel management, including hiring and firing, or having authority to hire and fire, the supervisory and management personnel in each facility;

e. supervision of management, care providers, and staff in each facility, including compliance with federal and state regulations;

f. employment, such as setting pay scales, shifts, and time and vacation policies;

g. systems for training, monitoring, and supervising staff;

h. medical record systems and management;

i. financial control systems, including budgeting and payment processing;

j. marketing, including setting the image and expectations residents and their family should expect at the facility, and even the name of the facility; and

k. reporting procedures, including reporting to Medicare as to individual resident care and facility-wide issues.

39. As the result of this control, the Defendants make decisions that affect the day-to-day care of residents of the Facility, such as the resources available for providing nursing staff and care to residents like Bonnie McGuffey, meaning they are responsible for the foreseeable harm that results from careless decisions while voluntarily exercising that control.

40. Defendants failed to ensure, through their operational, budgetary, consultation and managerial decisions and actions, that the facilities were sufficiently staffed to meet the individual needs of its residents, including Bonnie McGuffey.

41. The Defendants also exercise operational and managerial control, and apply this profits-over-safety model, at the following facilities in the State of Ohio:

a. The Atlantes
776 Old State Route 74 B, Cincinnati, OH 45245

b. Birchwood Care Center
4070 Hamilton Mason Road, Hamilton, OH 45011

c. Chesterwood Village
8073 Tylersville Road, West Chester, OH 45069

d. Dayspring Of Miami Valley Health Care Center & Rehab
8001 Dayton Springfield Road, Fairborn, OH 45324

e. Doverwood Village
4195 Hamilton Mason Road, Hamilton, OH 45011

f. Eastgate Health Care Center
4400 Glen Este Withamsville Road, Cincinnati, OH 45245

g. Heritagespring Healthcare Center Of West Chester
7235 Heritagespring Drive, West Chester, OH 45069

h. Hillspring Health Care & Rehab
325 East Central Avenue, Springboro, OH 45066

i. Indianspring Of Oakley
4900 Babson Place, Cincinnati, OH 45227

j. Shawneespring Health Care Center
10111 Simonson Road, Harrison, OH 45030

k. Sycamorespring Of Miamisburg
2164 E Central Ave, Miamisburg, OH 45342

Reporting Data – Nursing Home

42. The Defendants are required to report significant amounts of data to the federal agency that oversees operations of nursing homes receiving federal or state funding, the Centers for Medicare and Medicaid Services, or "Medicare."

43. The data the Defendants submit to Medicare regarding its facility includes data on its residents (numbers, care needs, and bed days), its finances, and its nurse and nursing aide staffing levels as compared to resident care needs.

44. This data is certified correct by the Defendants and / or submitted under penalty of perjury and / or civil or criminal penalties.

45. Medicare uses some of this data submitted by Defendants to produce its nursing home 5-star rating system, also known as "Nursing Home Compare."

Nursing Home Resident Care Needs and Staffing Levels (MDS and PDPM Scores)

46. Every nursing home receiving Medicare or Medicaid funding—the clear majority of nursing homes, including Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC and others operated and / or controlled by Defendants—is required to provide detailed information regarding the health status, care and treatment, and services provided to each resident in the facility using a questionnaire called the

Minimum Data Set, or MDS. This evaluation is done for all nursing home residents regardless of whether their care is being paid for by Medicare.

47. Nursing homes like Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC are required to evaluate every resident using the Minimum Data Set questionnaire shortly after the time of admission, every 90 days thereafter, when a resident has a significant improvement or decline in health (physical, mental, or psychosocial), and upon discharge.

48. Based on this Minimum Data Set, each resident's individual care needs (called "acuity level") are assigned into a group signifying how much nursing or staff care the resident requires, called a Patient-Driven Payment Model score, or PDPM score. The PDPM score is calculated for physical therapy, occupational therapy, speech-language pathology, non-therapy ancillary services, and nursing services.

49. Each resident's PDPM score for nursing services is contained in the patient's Minimum Data Set evaluations, meaning the total nursing care needs of the residents in any facility at a specific time is available by totaling the residents' PDPM scores from various sections of the Minimum Data Set evaluations corresponding to increased needs for nursing care.

50. When these PDPM scores are combined for all residents in a nursing home facility, the nursing home knows exactly how many minutes of nursing and nursing aide care should be provided, on average, to meet the expected care needs of their residents.

Misleading Advertising

51. In an effort to persuade the families of patients to become customers, Defendants make promises to the families of such potential residents that they will provide a level of care that they know they are incapable of providing.



Stonespring of Vandalia's public website promises to provide attentive care and high-quality nursing to their residents.

This image was accessed through https://www.carespring.com/stonespring-of-vandalia/ on February 23, 2026.

52. The intent and outcome of this misleading practice is to cause residents, their families, and external care providers to believe the nursing facility is much better staffed to provide the promised care than what is actually the practice of the Defendants with regard to staffing the Facility.

53. The intent and outcome of this misleading practice is to drastically limit the budget and overhead needed to run a safe facility in order to maximize profits and syphon resources at the expense of patient safety.

Systemic Understaffing and Bonnie McGuffey's Care

54. Defendants failed to ensure, through their operational, budgetary, consultation and managerial decisions and actions, that Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC was sufficiently staffed, and the staff appropriately trained and informed, to meet the individual needs of Bonnie McGuffey during the period she was a resident at the facility.

55. Defendants engaged in a systemic practice to understaff Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC to maximize profits at the expense of its residents' care.

56. This lack of sufficient staff directly resulted in Bonnie McGuffey not receiving basic and necessary services, assessments, and interventions to prevent, among other things, neglect leading to their injuries at Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC during the period they were a resident at the Facility.

Defendants' Negligence and Recklessness with Bonnie McGuffey

57. Defendants accepted Bonnie McGuffey as a nursing home resident for post-acute care after being having an operation to correct a periprosthetic fracture of her right femur.

58. Defendants agreed to accept Bonnie McGuffey into their facility and provide care to them in exchange for monetary payment.

59. The Facility knew Bonnie McGuffey had very limited mobility when it accepted her into their care.

60. On February 28, 2025, an aide improperly repositioned Bonnie during a routine sheet change, causing Bonnie to fall two feet from her bed to the ground. The reporting nurse found Bonnie on the floor on her left side with her right leg hanging from her bed.

61. Bonnie was diagnosed with bilateral periprosthetic distal femur fractures, displaced bilateral periprosthetic proximal tibia fractures, and displaced bilateral tibia hematomas as a result of this fall,

62. Bonnie suffered a swift decline and significant amounts of pain following the fall.

63. Bonnie McGuffey died on April 3, 2025. Her cause of death on her death certificate is listed as "multiple fractures." The injury was described to have occurred as a "ground level fall." The manner of death was ruled accidental, meaning it was not the result of any natural disease process.

64. Bonnie McGuffey endured mental and physical pain suffering and death as a direct and proximate result of Defendants' failure to provide adequate care due to understaffing the facility.

FIRST CAUSE OF ACTION
(MEDICAL NEGLIGENCE / RECKLESSNESS)

65. Plaintiff(s) incorporate all other paragraphs of this Complaint as if fully rewritten herein.

66. Bonnie McGuffey depended on the Defendants, and their respective nursing and medical staff, for medical and nursing care, treatment, evaluation, and assistance.

67. The Defendants had a duty to provide proper care and treatment to Bonnie McGuffey and to avoid causing injury to Bonnie McGuffey.

68. The Defendants, including their medical and nursing staff, failed to provide proper care and treatment to Bonnie McGuffey, which they knew or should have known they required, and their negligence was the direct and proximate cause of the injuries that Bonnie McGuffey suffered.

69. The Defendants' failure to provide proper care and treatment included, but is not limited to:

a. choosing to put inadequate prevention and response interventions in place to prevent injuries;

b. choosing to provide inadequate resident observation, supervision, and monitoring;

c. choosing to provide improper training to staff members regarding resident monitoring, assessment, response, and treatment;

d. choosing to provide too few, and / or underqualified nursing staff members for resident needs at each facility to protect and provide adequate care to residents like Bonnie McGuffey;

e. choosing to not provide accurate, adequate, or timely information to Bonnie McGuffey's family;

f. choosing to provide inadequate supervision to prevent accidents and falls;

g. choosing to violate orders relating to care of Bonnie McGuffey;

h. choosing to violate state and federal regulations governing care and staffing levels in nursing home facilities by which residents like Bonnie McGuffey are a member of the class of persons intended to be protected from injuries like those they suffered;

i. failing to ensure the rights and safety of its residents, including Bonnie McGuffey, as required by Ohio and federal regulations;

j. choosing not to provide appropriate care to Bonnie McGuffey while they were a resident of the Facility; and

k. such other acts or omissions described in this Complaint or discovered in litigation.

70. These actions constituted a conscious disregard for Bonnie McGuffey's rights and safety with a great probability of causing substantial harm from this misconduct, by which—through heedless indifference to the consequences—the Defendants or their staff disregarded a substantial and unjustifiable risk that the health care provider's conduct was likely to cause, at the time those services or that treatment or care were rendered, constituting an unreasonable risk of injury, death, or loss to person or property, or intentional misconduct or willful or wanton misconduct. The Defendants were aware of the great probability of the harm that could result from their willful, wanton, and/or reckless misconduct.

71. The Defendants' disregard for the rights and safety of residents like Bonnie McGuffey created circumstances under which it became substantially certain that serious injuries would result, entitling Plaintiff to awards for compensatory and punitive damages.

72. The Defendants are directly liable for their own willful, wanton, and/or reckless misconduct.

73. The Defendants are also vicariously liable for their employees' and agents' willful, wanton, and/or reckless misconduct.

74. The Defendants and their medical and nursing staff provided care to Bonnie McGuffey that fell below the standard of care expected of medical care and nursing home organizations, under the same or similar circumstances.

75. The departures from the standard of care are evidenced by violations of sections of Federal Regulations, 42 C.F.R. § 483 et seq., and Ohio Administrative Code sections, OAC 3701-17 et seq., and the Ohio Resident's Rights Law, R.C. section 3721.13.

76. As a direct and proximate result of the negligent and/or willful, wanton and/or reckless actions of the Defendants described above, Bonnie McGuffey sustained permanent injury and loss including, but not limited to, conscious pain and suffering, disability, and death.

77. WHEREFORE, Plaintiff demands judgment against the Defendants, jointly, in an amount more than Twenty-Five Thousand Dollars ($25,000.00), for conscious pain and suffering, loss of enjoyment, together with costs of suit, attorney's fees and expenses, punitive and exemplary damages, and any other relief to which the Plaintiff may be entitled to and/or that the court finds is appropriate and/or equitable.

SECOND CAUSE OF ACTION
(WRONGFUL DEATH)

78. Plaintiff(s) incorporate all other paragraphs of this Complaint as if fully rewritten herein.

79. Bonnie McGuffey depended on the Defendants, and their respective nursing and medical staff, for medical and nursing care, treatment, evaluation, and assistance.

80. The Defendants had a duty to provide proper care and treatment to Bonnie McGuffey and to avoid causing injury to Bonnie McGuffey.

81. The Defendants, including their medical and nursing staff, failed to provide proper care and treatment to Bonnie McGuffey, which they knew or should have known they required, and their negligence was the direct and proximate cause of the injuries that Bonnie McGuffey suffered.

82. The Defendants' failure to provide proper care and treatment included, but is not limited to:

a. choosing to put inadequate prevention and response interventions in place to prevent injuries;

b. choosing to provide inadequate resident observation, supervision, and monitoring;

c. choosing to provide improper training to staff members regarding resident monitoring, assessment, response, and treatment;

d. choosing to provide too few, and / or underqualified nursing staff members for resident needs at each facility to protect and provide adequate care to residents like Bonnie McGuffey;

e. choosing to not provide accurate, adequate, or timely information to Bonnie McGuffey's family;

f. choosing to provide inadequate supervision to prevent accidents and falls;

g. choosing to violate orders relating to care of Bonnie McGuffey;

h. choosing to violate state and federal regulations governing care and staffing levels in nursing home facilities by which residents like Bonnie McGuffey are a member of the class of persons intended to be protected from injuries like those she suffered;

i. failing to ensure the rights and safety of its residents, including Bonnie McGuffey, as required by Ohio and federal regulations;

j. choosing not to provide appropriate care to Bonnie McGuffey while she was a resident of the Facility; and

k. such other acts or omissions described in this Complaint or discovered in litigation.

83. Defendants, directly or through their employees or agents, violated Bonnie McGuffey's rights as a resident of the Defendants' facilities, as enumerated in Ohio Revised Code section 3721.13, including, but not limited to:

a. the right to a safe and clean living environment;

b. the right to be free from physical, verbal, mental, and emotional abuse and to be treated at all times with courtesy, respect, and full recognition of dignity and individuality;

c. the right to adequate and appropriate medical treatment and nursing care and to other ancillary services that comprise necessary and appropriate care;

d. the right to have clothes and bed sheets changed as the need arises, to ensure the resident's comfort or sanitation;

e. the right to participate in decisions that affect the resident's life; and

f. the right to have any significant change in the resident's health status reported to the resident's sponsor.

84. These violations are evidence of negligence and conscious disregard of Bonnie McGuffey's rights and safety, and give rise to a statutory cause of action.

85. Bonnie McGuffey endured conscious pain, suffering, and disability, and other harms and losses as the direct and proximate result of Defendants' violations of R.C. 3721.13.

86. These actions constituted a conscious disregard for Bonnie McGuffey's rights and safety with a great probability of causing substantial harm from this misconduct, by which—through heedless indifference to the consequences—the Defendants or their staff disregarded a substantial and unjustifiable risk that the health care provider's conduct was likely to cause, at the time those services or that treatment or care were rendered, constituting an unreasonable risk of injury, death, or loss to person or property, or intentional misconduct or willful or wanton misconduct.

87. The Defendants were aware of the great probability of the harm that could result from their willful, wanton, and/or reckless misconduct.

88. The Defendants' disregard for the rights and safety of residents like Bonnie McGuffey created circumstances under which it became substantially certain that serious injuries would result.

89. The Defendants are directly liable for their own willful, wanton, and/or reckless misconduct.

90. The Defendants are also vicariously liable for their employees' and agents' willful, wanton, and/or reckless misconduct.

91. The Defendants and their medical and nursing staff provided care to Bonnie McGuffey that fell below the standard of care expected of medical care and nursing home organizations, under the same or similar circumstances.

92. The departures from the standard of care are evidenced by violations of sections of Federal Regulations, 42 C.F.R. § 483 et seq., and Ohio Administrative Code sections, OAC 3701-17 et seq., and the Ohio Resident's Rights Law, R.C. section 3721.13.

93. As a direct and proximate result of the negligence / recklessness described above, Bonnie McGuffey sustained injuries that caused her untimely and wrongful death.

94. Bonnie McGuffey's next-of-kin suffered damages as set forth in the Ohio Wrongful Death statute, R.C. 2125.01 et seq., including mental anguish and grief and loss of Decedent's society and companionship.

95. WHEREFORE, Plaintiff demands judgment against Defendants, in an amount more than $25,000.00 to compensate the decedent's next of kin and heirs at law, together with costs of suit, attorneys' fees and expenses, and any other relief the court finds is appropriate and / or equitable.

THIRD CAUSE OF ACTION
(NURSING HOME RESIDENT RIGHTS VIOLATION R.C. 3721.13)

96. Plaintiff(s) incorporate all other paragraphs of this Complaint as if fully rewritten herein.

97. Defendants, directly or through their employees or agents, violated Bonnie McGuffey's rights as a resident of the Defendants' facilities, as enumerated in Ohio Revised Code section 3721.13, including, but not limited to:

a. the right to a safe and clean living environment;

b. the right to be free from physical, verbal, mental, and emotional abuse and to be treated at all times with courtesy, respect, and full recognition of dignity and individuality;

c. the right to adequate and appropriate medical treatment and nursing care and to other ancillary services that comprise necessary and appropriate care;

d. the right to have clothes and bed sheets changed as the need arises, to ensure the resident's comfort or sanitation;

e. the right to participate in decisions that affect the resident's life; and

f. the right to have any significant change in the resident's health status reported to the resident's sponsor.

98. These violations are evidence of negligence and conscious disregard of Bonnie McGuffey's rights and safety, and give rise to a statutory cause of action.

99. As a direct and proximate result of Defendants' violations of R.C. 3721.13, Bonnie McGuffey conscious pain, suffering, and disability, and other harms and losses, including death.

100. WHEREFORE, Plaintiffs demand judgment against the Defendants, jointly, in an amount in excess of $25,000.00, together with costs of suit, attorney's fees and expenses, punitive and exemplary damages, and any other relief to which the court finds is appropriate and / or equitable.

FOURTH CAUSE OF ACTION
(CIVIL CONSPIRACY)

101. Plaintiff(s) incorporate all other paragraphs of this Complaint as if fully rewritten herein.

102. Defendants had an express agreement, mutual understanding, or tacit agreement to, and/or their agents maliciously combined efforts to:

a. defraud residents and their families by delivering wholly inadequate care, contrary to their promises;

b. systemically understaff their facilities in violation of federal regulations, and for the purposes of their own profit, at the expense of resident health and safety;

c. under-capitalize the facilities and syphon money to themselves and related entities for the purposes of their own profit at the expense of resident health and safety;

d. inflate resident PDPM levels to obtain excessive and unjustified payments from Medicare and Medicaid while not providing the care paid for with these taxpayer dollars;

e. not provide the level of care, by understaffing the facility, paid for by taxpayer dollars;

f. misrepresenting to Medicare the staffing level of the facility to increase their rating; and

g. as otherwise may be described in the Complaint or learned through discovery.

103. This understanding constitutes a malicious combination to injure residents of the Facility, including Bonnie McGuffey.

104. In pursuance of this common plan or design to commit tortious acts, the Defendants actively took part in it, or furthered it by cooperation or request, or lent aid or encouragement to the wrongdoers, or ratified and adopted the wrongdoers' acts done for their benefit.

105. The conspiracy caused injury to Bonnie McGuffey.

106. WHEREFORE, Plaintiffs demand judgment against the Defendants, jointly, in an amount in excess of $25,000.00, together with costs of suit, attorney's fees and expenses, punitive and exemplary damages, and any other relief to which the court finds is appropriate and / or equitable.

FIFTH CAUSE OF ACTION
(FRAUD)

107. Plaintiff(s) incorporate all other paragraphs of this Complaint as if fully rewritten herein.

108. Defendants concealed facts concerning their staffing levels, pay, and the amount of care they were actually capable of providing at Stonespring at Vandalia aka Stonespring Transitional Care Center, LLC.

109. Not only did Defendants conceal this information, they publicly and privately represented that they provide exceptional services in an effort to induce the family of Bonnie McGuffey and other potential customers to place their loved ones in their care and custody.

110. These inducements were made falsely, with knowledge of their falsity, or with such utter disregard and recklessness as to whether they were true or false that knowledge may be inferred with the intent of misleading Bonnie McGuffey's family and other potential customers into placing their loved ones in the care and custody of Defendants.

111. Bonnie McGuffey's family and the family members of other potential customers reasonably relied on Defendants' representations and concealments regarding the degree of care they provide.

112. The result of these inducements and concealments was that Bonnie McGuffey's family, and the family of numerous other residents, allowed their loved one to be placed in Defendants' facility.

113. As a direct and proximate result of Defendants' actions, representations, and concealments, Bonnie McGuffey suffered conscious pain and suffering and death.

114. As a direct and proximate result of Defendants' action, representations, and concealments, Bonnie McGuffey's next-of-kin have experienced harms and losses as a result of their death, including those damages set forth in Ohio's wrongful death statute, Ohio Revised Code section 2125.02 *et seq*.

115. WHEREFORE, Plaintiff demands judgment against the Defendants, jointly, in an amount in excess of Twenty-Five Thousand Dollars ($25,000.00), together with costs of suit, attorney's fees and expenses, punitive and exemplary damages, and any other relief to which the court finds is appropriate and/or equitable.

A TRIAL BY JURY IS HEREBY DEMANDED

Respectfully Submitted,

/s/ C. Joseph McCoy

MICHAEL A. HILL (0088130)
C. JOSEPH MCCOY (0092669)
LINA GIRGIS (0106469)
MICHAEL HILL TRIAL LAW
815 Superior Ave., Suite 623
Cleveland, Ohio 44114
(800) 659-2712 (o) | (216) 304-6630 (f)
michael.hill@protectseniors.com
joseph.mccoy@protectseniors.com
lina.girgis@protectseniors.com
www.protectseniors.com
Counsel for Plaintiff