STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	235164	A. Building B. Wing	04/16/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Corewell Health Rehabilitation & Nursing Center -	4368 Cleveland Ave Stevensville, MI 49127

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards. Based on observation, interview, and record review the facility failed to ensure the kitchen/kitchenettes' food contact and/or non-food contact surfaces were consistently maintained in a clean and sanitary manner and failed to consistently date, label, and discard food items appropriately with the potential to effect any resident out of the census of 98 who consumed food/beverages from the kitchen resulting in the potential for foodborne illness, physical food contamination, and/or pest issues.Findings include:Food Contact and/or Non-Food Contact Surfaces Not Maintained in a Clean and Sanitary Manner by Area:Ice Machines-During an observation and interview on 04/14/2026 at 9:29 AM, the ice machine in the kitchen had unknown black, orange, and pink material accumulated on the exterior of the white ice chute. Maintenance Staff F reported the ice machines of the kitchen were cleaned by a third-party vendor, he thought cleaning was done approximately bi-annually (twice a year), and ice machines were last cleaned approximately around the time of late January/early February (2026).During an observation on 04/15/2026 at 8:14 AM, the ice machine in the kitchen remained visibly soiled as was observed on 04/14/2026 at 9:29 AM.During an observation on 04/14/2026 at 10:57 AM, the ice machine across from the dining room and just outside of the kitchen had unknown orange and black material on the white ice chute that dispensed ice. The external clear plastic ice chute cover that protected, contained, and directed ice downward had an unknown red material on the inner and outer surface.During an observation on 04/15/2026 at 8:46 AM, the ice machine located just outside the kitchen remained visibly soiled as it was observed on 04/14/2026 at 10:57 AM.Review of the ice machines' Service Order Form, dated 2/6/26, stated, 02/06/2026 .Cleaned Ice Machine. Review of the 2022 Food and Drug Administration's Food Code, stated, Frequency . 4-602.11 Equipment Food-Contact Surfaces and Utensils .Surfaces of utensils and equipment contacting food that is not time/temperature control for safety food such as . ice makers, and ice bins must be cleaned on a routine basis to prevent the development of slime, mold, or soil residues that may contribute to an accumulation of microorganisms. Kitchenettes' Refrigerator/Freezers-During an observation on 04/14/2026 at 10:23 AM, the freezer/refrigerator located in the kitchenette of the back 200 unit was soiled with some dead bugs and brown debris in the freezer door and a large red colored spill on the bottom of the freezer's interior. During an observation and interview on 04/14/2026 at 10:30 AM, the freezer/refrigerator located in the kitchenette of the front 200 unit had a brown spill on the bottom of the freezers and refrigerators' interior. Kitchen Supervisor UU reported refrigerators should be cleaned daily.During an observation on 04/14/2026 at 10:36 AM, the freezer/refrigerator located in the kitchenette of the front 100 unit had a brown spill on the bottom interior of the refrigerator and freezer. There was also unknown debris on the bottom interior of the freezer and a spill in the middle drawer of the refrigerator.During an observation on 04/14/2026 at 10:41 AM, the freezer/refrigerator located in the kitchenette of the back 100 unit had a spill with some debris in the bottom drawer of the freezer. There was red frozen material that had spilled and froze to the three wire racks in the freezer. There was a brown spill on the bottom of the refrigerator's interior.Review of the 2022 Food and Drug Administration's Food Code, stated, 4-602.13 Nonfood-Contact Surfaces. The presence of food debris or dirt on nonfood (continued on next page)

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	contact surfaces may provide a suitable environment for the growth of microorganisms which employees may inadvertently transfer to food. If these areas are not kept clean, they may also provide harborage for insects, rodents, and other pests.Storage Drawer and Food Storage Pans-During an observation and interview on 04/14/2026 at 10:02 AM, a clear plastic food pan on the bottom shelf of the drying rack in the kitchen had various brown and white debris accumulated on the inside bottom surface. Kitchen Supervisor UU confirmed the plastic food pan was not clean.During an observation on 04/14/2026 at 12:08 PM, a large clear plastic food pan on the bottom shelf of the kitchen's food preparation table across from the griddle contained packages of open and unopened disposable cups/lids. This container had no lid and had collected various white and yellow debris across the bottom of the container which was directly touching clean disposable single use cups/lids.During an observation on 04/15/2026 at 8:56 AM, in the drawer of the kitchen's food preparation table that the coffee maker sat on had debris accumulated on the bottom of the drawer that was in direct contact with clean disposable single use cups/lids. One lid was resting directly on the bottom of the drawer which had brown staining on the bottom of the lid and an approximately 2.5-inch diameter circular stain present on the bottom of the drawer from where it had been resting. Review of the 2022 Food and Drug Administration's Food Code, stated, 4-601.11 Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils. The objective of cleaning focuses on the need to remove organic matter from food-contact surfaces so that sanitization can occur and to remove soil from nonfood contact surfaces so that pathogenic microorganisms will not be allowed to accumulate and insects and rodents will not be attracted.Food Processors-During an observation on 04/14/2026 at 10:04 AM, the kitchen's silver colored food processor located next to the toaster had standing water in the bottom of the food processor's bowl with the blade resting directly in the water.During an observation on 04/15/2026 at 8:49 AM, the kitchen's silver colored food processor had what appeared to be dried orange and white food debris on the bottom of the food processor's bowl.During an observation on 04/15/2026 at 8:51 AM, the kitchen's black colored food processor located next to the silver food processor had standing water at the bottom of the food processor's bowl.Review of the 2022 Food and Drug Administration's Food Code, stated, 4-901.11 Equipment and Utensils, Air-Drying Required. Items must be allowed to drain and to air-dry before being stacked or stored .Can Opener-During an observation and interview on 04/14/2026 at 12:03 PM, the can opener attached to the kitchen's central food preparation table had sticky black and brown debris accumulated on the can opener's piercing part. Kitchen Supervisor LL reported the can opener would have been used about an hour or hour and a half prior to open food cans to make ambrosia salad. Kitchen Supervisor LL reported the can opener should be cleaned after it was used and confirmed the colored debris on the can opener was not a color of any ingredients in ambrosia salad. Dating, Labeling, and Discarding of Food Items:During an observation and interview on 04/14/2026 at 9:37 AM, the small refrigerator located next to the tray line had a plastic cup with disposable lid filled with a brown thickened liquid. There was no label to indicate what the beverage was, when it was prepared, or the date it should be discarded. Kitchen Supervisor UU reported it was a nectar thick beverage supplement for a resident, confirmed there was no label (no item name or dates of preparation/use-by), and discarded the product.Review of the 2022 Food and Drug Administration's Food Code, stated, 3-501.17 Ready-to-Eat, Time/Temperature Control for Safety Food, Date Marking . refrigerated, READY-TO-EAT, TIME/TEMPERATURE CONTROL FOR SAFETY FOOD prepared and held in a FOOD ESTABLISHMENT for more than 24 hours shall be clearly marked to indicate the date or day by which the FOOD shall be consumed on the PREMISES. or discarded when held at a temperature of 5 C (41 F) or less for a maximum of 7 days. The day of preparation shall be counted as Day 1.During an observation and interview on 04/14/2026 at 9:45 AM, in the kitchen's refrigerator on the right side was a plastic food storage container the facility labeled cheese with a use by date of 4-13 (4/13/2026). Kitchen Supervisor UU confirmed the cheese was past its use by date and reported the expiration of the cheese noted on the label was the expiration date from the cheese's original (continued on next page)

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F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	packaging.Review of the 2022 Food and Drug Administration's Food Code, stated, 3-501.17 Ready-to-Eat, Time/Temperature Control for Safety Food, Date Marking. refrigerated, READY-TO-EAT TIME/TEMPERATURE CONTROL FOR SAFETY FOOD prepared and PACKAGED by a FOOD PROCESSING PLANT shall be clearly marked, at the time the original container is opened in a FOOD ESTABLISHMENT and if the FOOD is held for more than 24 hours, to indicate the date or day by which the FOOD shall be consumed on the PREMISES, . or discarded.During an observation and interview on 04/14/2026 at 10:00 AM, in the kitchen's walk-in refrigerator there was a clear food storage container of sliced beets with a label that indicated 4-13-26. Kitchen Supervisor UU confirmed 4/13/26 was the expiration date. During an observation and interview on 04/14/2026 at 12:10 PM, on the kitchen's central food preparation table under the hanging pot rack was an unlabeled and undated clear squeeze bottle (not the product's original container) that contained an unidentified yellow liquid. Kitchen Supervisor LL reported it should have been labeled and was vegetable oil (cooking oil).Review of the 2022 Food and Drug Administration's Food Code, stated, 3-302.12 Food Storage Containers, Identified with Common Name of Food. Except for containers holding FOOD that can be readily and unmistakably recognized such as dry pasta, working containers holding FOOD or FOOD ingredients that are removed from their original packages for use in the FOOD ESTABLISHMENT, such as cooking oils . shall be identified with the common name of the FOOD.

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F 0806 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure each resident receives and the facility provides food that accommodates resident allergies, intolerances, and preferences, as well as appealing options. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review the facility failed to honor food preferences for 1 (Resident #121) of 20 sampled residents reviewed for food preferences resulting in feelings of frustration and anger.Findings include:Resident #121Review of a Face Sheet revealed Resident #121 was a female who was admitted to the facility on [DATE] and had pertinent diagnoses which included: amyotrophic lateral sclerosis (ALS; a progressive neurodegenerative disease that affects nerve cells in the brain and spinal cord leading to a loss of muscle control, including muscle weakness, difficulty speaking, swallowing and eventually breathing), unspecified protein-calorie malnutrition, dysphagia (difficulty swallowing), and vegetarian (a person who does not eat meat).In an interview on 4/14/26 at 10:32 AM, Resident #121 reported she requested yogurt to be served at every meal, and she was not getting it. Resident #121 reported she and Family Member (FM) TT had both spoken to Registered Dietitian (RD) I regarding her preference for yogurt at every meal. Resident #121 stated she and FM TT were frustrated and angry with the lack of follow through to provide yogurt with each meal. Resident #121 stated I have no idea why this request is so hard. Review of Adult Diet Order for Resident #121 reviewed on 4/14/26 revealed .General, dysphagia; dysphagia solids: pureed (mash, crush, smash to a paste consistency); dysphagia liquids: moderately thick (liquid with a thick consistency to be consumed with a spoon). with an order date of 4/11/26 and nutrition supplements fortified frozen supplement; orange: lunch and dinner with a start date of 4/13/26 and nutrition supplements regular; chocolate; AM snack PM snack; with a start date of 4/15/26.In an observation and interview on 4/14/26 at 12:50 PM, a bowl of pink colored yogurt was present on Resident #121's meal tray in her room, no orange frozen supplement was observed on the tray. Resident #121 reported the yogurt was not on the tray when she was served her lunch. Certified Nurse Assistant (CNA) Q who was present in the room assisting Resident #121 to eat her lunch reported she had called down to the kitchen to request the yogurt, and it was delivered. CNA Q reported Resident #121 requested that each bite of her pureed food be dipped in yogurt as that made it easier for her to swallow.In an observation and interview on 4/15/26 at 9:05 AM, Resident #121 was in her room with her breakfast meal in front of her. Resident #121 reported she was not served yogurt at dinner the night before. Resident #121 also reported she had not been served ice cream of any kind or flavor since she had arrived at the facility. Noted on the tray was a bowl of pink yogurt, mostly consumed. Review of the tray ticket present did not list yogurt as a preference.Review of meal tray tickets on 4/15/26 for Resident #121 dated Thursday (4/16/26) for breakfast, lunch, and dinner, revealed no listed preference for yogurt at each meal nor orange frozen supplement at lunch and dinner.Review of Care Plan for Resident #121 revealed .Problem: has a potential for altered nutrition and hydration; potential for inadequate oral intake related to decreased ability to consume sufficient calories/protein as evidenced by. ALS, (food options are restricted secondary to dysphagia and may be contributing to inadequate protein/energy intake) malnutrition and overall decline. Goal: food and fluids as desired per goal of comfort care.Interventions: honor food preferences as able.provide additional calories/ protein; provide nutritional supplements as ordered continue to offer snacks between meals. all with a start date of 4/13/26.Review of clinical nutrition assessment for Resident #121 with a plan of care addendum dated 4/15/26 authored by RD I revealed .RD (RD I) met with pt (patient) at bedside to follow-up on intake and supplemental acceptance. Resident is currently on a pureed diet with mildly thick liquids and no straws.spoke with (redacted FM TT) over the phone several times r/t (related to) getting food preferences and putting (redacted Resident #121) on a vegetarian diet. However, resident [(sic) FM TT] had many complaints as to why (redacted Resident #121) was not getting yogurt. RD explained to (redacted FM TT) that our yogurt here has gelatin in it and causes yogurt to not be allowed on a vegetarian diet. (Redacted FM TT) reports that (redacted Resident #121) needs increased calories (continued on next page)

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F 0806 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	with ALS, and reported using protein supplements at home. In a telephone interview on 4/15/26 at 4:07 PM, FM TT reported she was aware Resident #121 was being served yogurt irregularly, and when it was served, it was not nearly enough. FM TT reported the facilities process to honor food preferences was really bad and it was ridiculous that Resident #121 was not being served enough calories. FM TT reported Resident #121 had always been vegetarian and had always consumed yogurt, milk and eggs. FM TT reported Resident #121 would consume over 32 ounces of yogurt a day when she was at home. FM TT reported Resident #121 dipped everything she ate in the yogurt to make it easier for her to swallow and increase her caloric intake. FM TT reported Resident #121 would eat a very large bowl of ice cream every night to ensure she had consumed enough calories for the day.In an interview on 4/15/26 at 4:23 PM, Manager of Support Services (MSS) JJ reported Resident #121's recorded preferences as she could see them included vegetarian diet, strawberry yogurt was ok, yogurt, pudding packs, and ice cream. When quarried, MMS JJ reported yogurt was not listed at all on any of Resident #121's meal tickets, and if it was not listed on the meal ticket the dietary staff would not know to serve it with a meal. In an interview on 4/15/26 at 4:33 PM, RD I reported Resident #121 could not have yogurt on a pureed diet nor on a vegetarian diet and the dietary department computer program restricted it. RD I reported she was waiting for FM TT to respond to her text message regarding the facilities yogurt not being allowed on a vegetarian diet. When quarried if she spoke to Resident #121, RD I reported she had but Resident #121 had difficulties communicating and FM TT was very involved in Resident #121's care. RD I reported Resident #121 had not been receiving yogurt or should not have been due to her pureed and vegetarian diet orders. When quarried, RD I reported for Resident #121 to be given yogurt, staff had to override the computer system with her initials, which had been done for lunch today, when Resident #121 was served yogurt. Review of Adult Diet Order for Resident #121 reviewed on 4/16/26 revealed .General, dysphagia; Restrictions vegetarian, No straws; dysphagia solids: pureed; dysphagia liquids: moderately thick. Please allow resident to have yogurt with all meals regardless of the vegetarian diet.with an order date of 4/16/26. Review of Resident #121's medical record revealed no noted documentation to address and/or override the restriction of yogurt on a pureed diet. In an interview on 4/16/26 at 9:30 AM, Resident #121 reported she still was not getting her preferences with her meals. Resident #121 reported she told RD I she ate eggs, milk and yogurt. Resident #121 stated I am a vegetarian, I do not eat meat, I eat milk, yogurt, and eggs, that is what a vegetarian is; I am not vegan (a person who does not eat any food derived from animals). Resident #121 reported she knew the difference between vegan and vegetarian, and she was frustrated and angry because it felt like the staff of the facility was not listening to her about what she wanted and needed. Resident #121 began crying while stating I was diagnosed with ALS in November (2025), and I cannot eat a lot of different foods. I have spent months figuring out how to keep my calorie intake up and that included consuming large amounts of yogurt, milk, and ice cream every day. I feel like I am declining while being here, because no one will listen to me about the foods I prefer to eat.