

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  235177	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  01/29/2026
NAME OF PROVIDER OR SUPPLIER  Hartford Nursing & Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE  6700 W Outer Dr Detroit, MI 48235	

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)
<p>F 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide enough food/fluids to maintain a resident's health.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> This citation pertains to intake 2720882. Based on observation, interview, and record review the facility failed to pass water in a timely manner to ensure adequate hydration for five residents (R94, R76, R18, R156, and R33) of seven residents reviewed for hydration, resulting in the potential for increased risk for dehydration. Findings include: During the initial screening process on 1/27/2026 between 10:00 a.m. and 2:00 p.m. multiple residents were observed with no water in their rooms or at bedside. These residents are as follows: R94. R94 was observed to be alert and was able to be interviewed. During an interview, R94 said there was no fresh water passed by the staff since about nine P.M. on the midnight shift. R94 pointed to a small, iced tea bottle and stated, I am glad I kept this tea bottle so I can get me some water out of the sink. I don't understand why they have not passed fresh water yet. According to the electronic medical record (EMR), R94 was admitted on [DATE] with diagnoses that included hemiplegia and hemiparesis following cerebral infarction affecting the right dominant side and hypertension. According to the quarterly Minimum Data Set (MDS) assessment dated [DATE], indicated R94 was cognitive intact with a BIMS (brief interview for mental status) score of 14/15. Review of R94 Nutritional/Hydration care plan revised on 1/28/2026 had the following: (R94) has alteration in nutritional and/or hydration status related to dementia and hypertension. R76. R76 was observed alert, lying in bed with an empty white Styrofoam cup on the bedside table not in reach. During an interview, R76 said there was no cold water passed since midnight shift and would like to have a drink of cold water. According to the electronic medical record (EMR), R76 was admitted on [DATE] with diagnoses that included cerebral infarction, hypertension, and venous insufficiency. According to the quarterly Minimum Data Set (MDS) assessment dated [DATE], indicated R76 was cognitive intact with a BIMS (brief interview for mental status) score of 15/15. Review of R76 Nutritional/Hydration care plan revised on 1/18/2024 had the following: R76 has alteration in nutritional and/or hydration related to diagnoses CVA (Cerebral vascular accident), history of falls, pain, CAD (Carotid artery disease). R18. R18 was observed in room alert and was able to be interviewed. During an interview R18 stated, No one brought in any fresh water at all today (1/27/2026) and I would like to have some cold water. According to the electronic medical record (EMR), R18 was admitted on [DATE] with diagnoses that included hypertension, severe protein-calorie malnutrition, dementia, anemia, type two diabetes mellitus, and cerebral infarction. According to the significant change Minimum Data Set (MDS) assessment dated [DATE] indicated R18 was severely cognitively impaired with a BIMS (brief interview for mental status) score of 03/15. Review of R18 Nutritional/Hydration care plan revised on 12/10/2025 had the following: (R18) has alteration in nutritional and/or hydration related to diagnoses UTI (urinary tract infection), dementia, and prostate cancer. R156. R156 was observed resident lying in bed alert and oriented. During an interview, R156 stated, They (the staff) came in and picked up my water cup I believe at breakfast time and just have not brought anymore fresh water back yet. According to the electronic medical record (EMR), R156 was admitted on [DATE]</p> <p>(continued on next page)</p>

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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<p>F 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>with diagnoses that included congestive heart failure, chronic respiratory failure, diabetes mellitus type two, and chronic obstructive pulmonary disease. According to the quarterly Minimum Data Set (MDS) assessment dated [DATE] indicated R156 was cognitively intact with a BIMS (brief interview for mental status) score of 15/15. Review of R156 Nutritional/Hydration care plan revised on 11/29/2025 had the following: (R156) has alteration in nutritional and/or hydration status related to diagnoses H, pylori (a stomach bacteria), hypertension, and morbid obesity. R62 On 1/27/2026 at 1:30 p.m. R62 was observed with no water cup in the room or at bedside. R62 did not want to be interviewed. According to the electronic medical record (EMR), R62 was admitted on [DATE] with diagnoses that included ETOH, Left femur fracture, hypertension, history of falls, Carotid artery disease, and chronic obstructive pulmonary disease. According to the quarterly Minimum Data Set (MDS) assessment dated [DATE] indicated R62 was cognitively intact with a BIMS (brief interview for mental status) score of 15/15. Review of R62 Nutritional/Hydration care plan revised on 1/22/2026 had the following: (R62) has alteration in nutritional and/or hydration status related to diagnoses of adjustment disorder, BPH and schizophrenia. On 1/27/2026 at approx. 2:00 p.m. the unit's daily assignment was requested and provided. Review of the daily assignment revealed Certified Nursing assistant (CNA) T was R62's R76's, and R18's assigned CNA for the dayshift (7:00 a.m. thru 3:00 p.m.). On 1/27/2026 at 3:00 p.m. CNA T was interviewed regarding providing water to the residents. CNA T acknowledged that water had not been passed but was going to pass water later. CNA T stated, the residents should have had water at the start of the shift at 7:00 a.m. On 1/27/2026 at 4:16 p.m. CNA U was the assigned CNA (was working an additional four hours) for residents R156, and R94. CNA U was asked was water passed for the shift. CNA U stated, I was really busy, but I am passing the resident's water now. The residents should have received fresh water before now. On 1/29/2026 at 2:23 p.m. the Director of Nursing (DON) was interviewed regarding the appropriate time staff should pass water to residents. The DON was asked should the staff pass water before 3:00 p.m. and 4:00 p.m. for the shift. The DON stated, Absolutely. The twelve-hours shift CNAs should pass water multiple times and the eight hours shift should pass fresh water before 3:00 p.m. and 5:00 p.m. usually by 10:00 a.m. fresh water should be pass because midnight usually pass the resident fresh water before leaving their shift, but regardless fresh water should be pass before 3:00 p.m. According to the facility's 1/29/2026 Oral Hydration policy: It is the policy of this facility to assist residents to maintain adequate hydration whenever possible. Procedure: 5. Each resident will be provided bedside water.</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>This citation pertains to intakes 2656662 and 2661216Based on observation, interview, and record review, the facility failed to ensure meals were served at palatable temperatures in two of two records reviewed, resulting in decreased food consumption and potential nutritional decline. Findings Include: It was reported to the State Agency that food served to the residents was not at palatable temperatures. On 1/27/2025 at 11:57 AM, an interview with Dietary Manager F found that the facility has heated bases, but they are not in use for today's meal. Further observation found plates between 75F-85F with no visible plate warmer being utilized. When asked what she expects for hot food on the steam table, DM F stated that it should be at least 150F so that residents can get their food at 135F or higher. On 1/27/2025 at 12:09 PM, a regular test tray was plated and placed as one of the first meals on the C unit cart. On 1/27/2025 at 12:20 PM, the meal cart arrived on C unit with roughly 25 meal trays present. On 1/27/2025 at 12:37 PM, all trays were delivered, and the test tray was back in the conference room. The following temperatures were found using a rapid read thermometer: Pot pie 127.6F and mixed vegetables 104F.</p>