

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  235351	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/30/2025
NAME OF PROVIDER OR SUPPLIER  Skld Plymouth		STREET ADDRESS, CITY, STATE, ZIP CODE  105 Haggerty Rd Plymouth, MI 48170	

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 0600  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Few	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.  (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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<p>F 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> This citation pertains to 1228847. Based on observation, interview and record review, the facility failed to prevent verbal abuse from staff for one resident (R39) of two residents reviewed for abuse resulting in the resident feeling upset and rights being violated. Findings include: On 07/29/2025 at 9:00 AM, R39 was observed sitting on the bed. R39 was interviewed and asked about their interaction with Certified Nursing Assistant (CNA C) on 5/19/25. R39 stated that CNA C told (R39) to shut up and called (R39) a (profanity word). R39 didn't want to take a shower and said that CNA C was in her business. A review of R39's electronic medical record revealed a re-admission to the facility on [DATE] with a diagnosis of Type 2 Diabetes, Hypertension, Major Depressive Disorder, Hyperlipidemia, Asthma, Neuromuscular Dysfunction of Bladder. R39 had a Brief Interview for Mental Status (BIMS) dated 4/25/25, which revealed a score of 15/15 (intact cognitive function). On 07/30/2025 at 11:25 AM, the Director of Nursing (DON) was interviewed and queried about the incident with R39 and CNA C. The DON stated that after the investigation, CNA C was terminated for Disorderly Conduct. A review of the facility's Investigation Report revealed the incident with R39 was witnessed by three facility staff. On 07/30/2025 at 1:15 PM, the Nursing Home Administrator (NHA) was interviewed and asked about the incident with R39 and CNA C. The NHA said CNA C had an inappropriate response towards a resident which led to a termination. The NHA stated, (CNA C) crossed the line and (their) behavior was against their abuse policy. On 07/30/2025 at 1:30 PM, the Minimum Data Set (MDS) Coordinator A said that on 5/19/25, loud raised voices were heard in the hallway. MDS Coordinator A reported that R39 refused a shower and both R39 and CNA C began yelling at one another. R39 told CNA C to Shut Up and CNA C responded in a loud voice saying No, You Shut Up! R39 then called CNA C a dumb bitch! and CNA C responded by telling R39 No, You are one! MDS Coordinator A stated, It's inappropriate to go back and forth with a resident like that. My mother use to be in a facility, I wouldn't want anyone talking to her like that! On 07/30/2025 at 1:45 PM, Dietician B was interviewed and said on 5/19/25, she overheard CNA C getting loud with a resident. Dietician B stated that she was sitting in her office and heard voices escalating near the elevator which is adjacent to her office. She went to assess the commotion and witnessed CNA C instructing R39 to go to the shower room. R39 responded by telling CNA C not to worry her, leave her alone and to shut up! In response, CNA C told resident to Shut Up! R39 called CNA C a Bitch to which, CNA C replied, No, you are one! She stated that CNA C responded negatively and was yelling. Dietician B stated, I was concerned because that's not how you handle residents. On 07/30/2025 at 2:09 PM, a voicemail message was left for CNA C and for CNA D. CNA C and CNA D did not return the phone call prior to survey exit. On 07/30/2025 at 3:29 PM, the DON was interviewed regarding the alleged incident. The DON stated, Staff should not speak to residents like that. DON also stated, That was not professional behavior of an employee. As per the DON and the NHA, CNA C was immediately placed on suspension pending an investigation and the allegation was reported to the State Agency. CNA C was terminated following the investigation. Review of the Abuse Policy, updated on 3/24/2023, documented, It is the policy of this facility to provide professional care and services in an environment that is free from any type of abuse . Verbal abuse includes but not limited to humiliation, harassment, threat of bodily harm, punishment, isolation or deprivation to provoke fear or shame.</p>		