

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  235361	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  12/10/2025
NAME OF PROVIDER OR SUPPLIER  Niles Care Center, LLC		STREET ADDRESS, CITY, STATE, ZIP CODE  911 S 3rd St Niles, MI 49120	

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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure services provided by the nursing facility meet professional standards of quality.</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 0658</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 Intake #2682078. Based on observation, interview, and record review, the facility failed to follow professional standards of practice by following up on physician ordered medication that wasn't available in 1 resident (Resident #3) of 3 residents reviewed for medication management, resulting in physician ordered pain medication not being administered and resident having uncontrolled pain and unmet needs. Findings include: Resident # 3 (R3) Review of the admission Record and Minimum Data Set (MDS) dated [DATE] revealed R3 admitted to the facility on [DATE] with pertinent diagnoses including chronic pain, obesity, depression and osteoarthritis left hip (degenerative joint disease where joint cartilage breaks down causing bones to rub, leading to pain in the groin, buttocks and outer thigh; stiffness, swelling and reduced movement). Brief Interview for Mental Status (BIMS) reflected a score of 15 out of 15 which indicated R3 was cognitively intact (13 to 15 cognitively intact). Review of the Fundamentals of Nursing revealed, The health care provider (physician or advanced practice nurse) is responsible for directing medical treatment. Nurses follow health care providers' orders unless they believe that the orders are in error, violate agency policy, or are harmful to the patient. [NAME], [NAME] A.; [NAME], [NAME] Griffin; Stockert, [NAME]; Hall, [NAME]. Fundamentals of Nursing - E-Book (Kindle Locations 20717-20719). Elsevier Health Sciences. Kindle Edition. During an observation and interview on 12/8/2025 at 10:33 AM, R3 was sitting in his wheelchair in his room and reported he was feeling better today. R3 stated that he went at least 9 days without his Norco pain medication that the physician ordered. R3 said the nurses were aware of his Norco not coming in and they kept telling him that the pharmacy had not shipped it yet. R3 reported that he received Ibuprofen and Tylenol but he was still in lots of pain, so the physician ordered Norco. R3 said that his previous physician said that the pain R3 described was worse than a lady in labor and R3 rated his pain during the time without Norco as a 10/10. R3 said that he was finally able to get his Norco on 12/4/2025 after the Ombudsman came to the facility and talked to Nursing Home Administrator (NHA) A and Director of Nursing (DON) B. Review of R3's physician orders revealed Hydrocodone-Acetaminophen Tablet (Norco) 5-325 MG (milligrams), Give 1 tablet enterally (orally) two times a day for pain management. Start date 12/4/2025. This dose was different than the recommended Norco from the progress note completed by MD S on 12/4/2025 which indicated Norco 7.5/325 (mg) Bid (2 times a day) #60 (60 pills). Prior to the above order, R3's physician order was Hydrocodone-Acetaminophen Tablet 5-325 MG, Give 1 tablet enterally one time a day for pain management. Start date 11/22/2025, discontinued 12/4/2025. Review of R3's progress note completed by Medical Director (MD) S on 12/4/2025 revealed . Medical Decision Summary: The patient was evaluated today for phalangeal (finger) joint pain without additional acute (condition starts suddenly) findings. He remains on prescribed medications and reports no systemic symptoms. His history includes osteoarthritis. chronic pain. joint discomfort appears musculoskeletal (muscles, bones, tendons, ligaments, joints and cartilage) and may represent progression of osteoarthritis or overuse. Supportive care with pain control and monitoring was advised. Plan: Norco 7.5/325 (mg) Bid (2 times a day) #60 (60 pills). Review of R3's progress note completed by the Nurse Practitioner (NP) on 11/21/2025 revealed . Assessment: The patient is evaluated for severe hip pain, with no acute findings on exam. Pain appears consistent with known unilateral (1 side) hip osteoarthritis, compounded by morbid obesity, chronic weakness, and limited mobility (movement). maintaining adequate pain control is essential to preserve function and prevent further decline. Continued monitoring is recommended due to his complex medical history, including mobility impairment and multiple chronic conditions. Plan: Norco 5/325 mg daily. Ensure proper administration of prescribed medication. Review of R3's progress note dated 11/23/2025 revealed Hydrocodone-Acetaminophen Tablet 5-325 MG. Give 1 tablet enterally one time a day for pain management. Awaiting supply. Review of R3's progress note dated 11/24/2025 revealed Hydrocodone-Acetaminophen Tablet 5-325 MG. Give 1 tablet enterally one time a day for pain management. Awaiting order on supply. Review of R3's progress note dated 11/30/2025 revealed Hydrocodone-Acetaminophen Tablet 5-325 MG. Give 1 tablet enterally one time a day for pain management. Pharmacy states there is no script; Awaiting response. Review of R3's progress note dated 12/1/2025 revealed Hydrocodone-Acetaminophen Tablet 5-325 MG. Give 1 tablet enterally one time a day for pain management. On order awaiting supply. Review of R3's progress note dated 12/2/2025 revealed Hydrocodone-Acetaminophen Tablet 5-325 MG. Give 1 tablet enterally one time a day for pain management. Await (awaiting) pharmacy. This medication was not given. Review of R3's November and December</p>		

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F 0697  Level of Harm - Actual harm  Residents Affected - Few	Provide safe, appropriate pain management for a resident who requires such services.  (continued on next page)

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F 0697  Level of Harm - Actual harm  Residents Affected - Few	<p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> This citation pertains to Intake #2682078. Based on observation, interview, and record review, the facility failed to ensure that 1 resident (Resident #3) received physician ordered pain medication for effective pain management in 1 of 3 residents reviewed for medication management resulting in uncontrolled pain for 11 days and unmet needs. Findings include: Resident # 3 (R3) Review of the admission Record and Minimum Data Set (MDS) dated [DATE] revealed R3 admitted to the facility on [DATE] with pertinent diagnoses including chronic pain, obesity, depression and osteoarthritis left hip (degenerative joint disease where joint cartilage breaks down causing bones to rub, leading to pain in the groin, buttocks and outer thigh, stiffness, swelling and reduced movement). Brief Interview for Mental Status (BIMS) reflected a score of 15 out of 15 which indicated R3 was cognitively intact (13 to 15 cognitively intact). During an observation and interview on 12/8/2025 at 10:33 AM, R3 was sitting in his wheelchair in his room and was very pleasant saying he was feeling better today. R3 stated that he went at least 9 days without his Norco pain medication that the physician ordered. R3 said the nurses were aware of his Norco not coming in and they kept telling him that the pharmacy had not shipped it yet. R3 stated that he received Ibuprofen and Tylenol, but he was still in a lot of pain, so the physician ordered Norco. R3 reported that his previous physician said that the pain R3 described was worse than a lady in labor and R3 rated his pain during the time without Norco as a 10/10. R3 said that he was finally able to get his Norco on 12/4/2025 after the Ombudsman came to the facility and talked to Nursing Home Administrator (NHA) A and Director of Nursing (DON) B. Review of R3's physician orders revealed Hydrocodone-Acetaminophen Tablet (Norco) 5-325 MG (milligrams), Give 1 tablet enterally (orally) two times a day for pain management. Start date 12/4/2025. This dose was different than the recommended Norco from the progress note completed by MD S on 12/4/2025 which indicated Norco 7.5/325 (mg) Bid (2 times a day) #60 (60 pills). Prior to the above order, R3's physician order was Hydrocodone-Acetaminophen Tablet 5-325 MG, Give 1 tablet enterally one time a day for pain management. Start date 11/22/2025, discontinued 12/4/2025. Review of R3's physician orders also revealed he received Tylenol Extra Strength Oral Tablet 500 MG (Acetaminophen) every 8 hours as needed for pain and Ibuprofen Oral Tablet 600 MG (Ibuprofen), Give 1 tablet by mouth every 12 hours as needed for pain. Review of R3's hospital notes prior to admission on [DATE] revealed He (R3) has severe left hip osteoarthritis, diagnosed in April. He reports significant pain, stating 'I could barely move or walk due to pain.'. Review of R3's care plan revealed Resident has acute/chronic pain r/t (related to) hip needing to be replaced. date initiated 10/17/2025. Interventions: Administer analgesia per physician orders. Refer to physician orders and medication administration records for current meds. Date initiated 10/17/2025. Evaluate the effectiveness of pain interventions. Review for compliance, alleviating symptoms, dosing schedules and resident satisfaction with results, impact on functional ability and impact on cognition. If issues report to MD. Date initiated 10/17/2025. Notify physician if interventions are unsuccessful or if current complaint is a significant change from resident's past experience of pain. Date initiated 10/17/2025. Review of R3's progress note completed by Medical Director (MD) S on 12/4/2025 revealed . Medical Decision Summary: The patient was evaluated today for phalangeal (finger) joint pain without additional acute (condition starts suddenly) findings. He remains on prescribed medications and reports no systemic symptoms. His history includes osteoarthritis. chronic pain. joint discomfort appears musculoskeletal (muscles, bones, tendons, ligaments, joints and cartilage) and may represent progression of osteoarthritis or overuse. Supportive care with pain control and monitoring was advised. Plan: Norco 7.5/325 (mg) Bid (2 times a day) #60 (60 pills). Review of R3's progress note completed by the Nurse Practitioner (NP) on 11/21/2025 revealed . 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