

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 01/23/2026
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)		
F 0806 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	<p>Ensure each resident receives and the facility provides food that accommodates resident allergies, intolerances, and preferences, as well as appealing options.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review the facility failed to honor resident food choice preferences in 1 resident (Resident #37) of 3 residents reviewed for food preferences and didn't have enough food supply according to 2 residents (Resident #16, Resident #19) resulting in the increased likelihood for decreased food acceptance and frustration in not getting what they wanted to eat. Findings include: Resident #37 (R37) Review of the admission Record and Minimum Data Set (MDS) dated [DATE] revealed R37 initially admitted to the facility on [DATE] and her Brief Interview for Mental Status (BIMS) reflected a score of 15 out of 15 which indicated R37 was cognitively intact. During an interview on 1/21/2026 at 11:14 AM, R37 stated that the food is horrible so she ordered the same thing for dinner every night-2 hamburger patties with no bun and dessert. R37 stated that she wanted English Muffins but had to buy her own because the kitchen wouldn't get it for her. R39 also said that she liked tomatoes on salad and more vegetables to be served. R37 stated that she talked to Dietary Supervisor (DS) Q about her preferences in the past but she was still unhappy. Resident #16 (R16) Review of the admission Record and Minimum Data Set (MDS) dated [DATE] revealed R16 admitted to the facility on [DATE] and his Brief Interview for Mental Status (BIMS) reflected a score of 15 out of 15 which indicated R16 was cognitively intact. During an interview on 1/21/2026 at 12:03 PM, R16 stated that the kitchen ran out of food a lot especially when the end of the month was near. R16 said that the kitchen ran out of brown sugar, butter, bananas and peach cups often. During another interview on 1/22/2026 at 9:56 AM, R16 stated that the kitchen had run out of hot dogs and hamburgers for a week before and it is supposed to be available since it's on the always available menu. R16 also said that the kitchen served food that no one liked and they didn't have condiments available. Resident #29 (R29) Review of the admission Record and Minimum Data Set (MDS) dated [DATE] revealed R29 admitted to the facility on [DATE] and his Brief Interview for Mental Status (BIMS) reflected a score of 15 out of 15 which indicated R29 was cognitively intact. During an interview on 1/22/2026 at 1:06 PM, R29 stated that the kitchen ran out of hotdogs and hamburgers a lot. He said they also ran out of pudding and bananas, especially from the middle to the end of every month. Review of the always available menu revealed cheeseburger, hot dog, salad, tomato or chicken noodle soup, grilled cheese, peanut butter and jelly. During an interview on 1/21/2026 at 10:02 AM, Dietary Supervisor (DS) Q stated that he talked to the residents to get their food preferences. DS Q said they have the main meal and an always available menu for the residents that didn't like the main meal served. During an interview on 1/22/2026 at 12:07 PM, DS Q and RD CC stated that food orders came from 2 different food sources and they came on Thursdays and Fridays which was how it had always been and corporate wouldn't allow only 1 food company to deliver food. DS Q reported that he ordered the food for the week and then it went to the corporate level and they adjusted items from there to make sure they stayed in budget. When asked what DS Q does when they didn't have food in the kitchen, he stated</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 0806</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>that he went to the store and picked up any items he needed. DS Q stated that he didn't hear the residents talking about the kitchen running out of food and if they did it usually took 1-2 days to get the food in. RD CC stated that they have run out of brown sugar and haven't had it available since corporate took it off to stay in budget. During another interview on 1/22/2026 at 2:30, DS Q reported that they have run out of bananas before but they always had fruit cup, applesauce, and blueberries for an option. DS Q also said that he obtained food preferences from residents and he would talk to R37 again about her food preferences. During an interview on 1/22/2026 at 4:42 PM, Nursing Home Administrator (NHA) A stated that food orders were done by DS Q and then it went to a third party and they made changes as needed. NHA A stated she wasn't aware that residents said that food was running out by the middle to end of each month. Review of the Food Preference Policy with an adoption date of 7/11/2018 revealed .8. If the resident refuses or is unhappy with his or her diet, the staff will create a care plan that the resident is satisfied with.10. The Food Services Department will offer a variety of foods at each scheduled meal, as well as access to nourishing snacks throughout the day and night.</p>