STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	235498	A. Building B. Wing	11/21/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Boulevard Temple Care Center, LLC	2567 West Grand Boulevard Detroit, MI 48208

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 0689 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** This citation pertains to intake 2635308.Based on observation, interview, and record review, the facility failed to properly secure a television for one resident (R101) out of four residents reviewed for accidents resulting in R101 receiving a head injury.Findings include:On 10/8/2025 at 10:15 AM R101 was observed seated in a wheelchair in the common area with a bump on her forehead. When R101 was asked about the bump she was unable to explain how she received it.Record review of R101's Electronic Health Record (EHR) revealed she was admitted to the facility on [DATE] with diagnoses which included Parkinson's disease and Dementia.Review of a Minimum Data Set (MDS) assessment dated [DATE] revealed R101 had severe cognitive impairment with a Brief interview for Mental Status (BIMS) score of one out of 15 and was dependent for mobility except for eating where she required set up.On 10/8/2025 at 11:10 AM, Certified Nursing Assistant (CNA) B was interviewed and said she was assigned to work with R101 when the incident occurred on 9/30/25. When asked about the incident CNA B said she heard R101 yelling for help and when CNA B went to check on R101, R101 was found in bed with a television laying on top of her. CNA B said she picked the television off R101 and got the nurse. CNA B stated, The television was stored on R101's overbed table. Earlier in the day I noticed the television was leaning. CNA B further said R101 was able to reach and grasp for objects. Review of the Progress Note dated 9/30/25 revealed, Writer alerted to room where resident in bed with large tv in bed with her and large hematoma, no bleeding noted on left side of forehead. Call made to Dr (doctor) and received order to transfer resident out for evaluation. (Transportation service) stated it will be 1-2 hours before transportation. 911 phoned. Resident stated that she was ok and wants to get in wc (wheelchair). 144/89 89 97.7 18 98% ra (room air). Ice applied to hematoma by writer and cna. Cna stayed in room until emts arrived. Call made to guardian and informed of transfer to hosp.Review of R101's care plan revealed, Focus R101 has a history of falls and remains at risk for fall/injury related to generalized weakness, poor balance, low endurance, incontinence diagnosis: Dementia, Parkinsons. Date initiated 4/18/25. Goal. Will have risk minimized in an effort to reduce likelihood of falls/fall related injuries through the review date. Interventions Keep the residents environment as safe as possible with: even floors free from spills and/or clutter, adequate lighting, call light within reach, avoid repositioning furniture and keep the bed in the appropriate position.On 10/8/2025 at 1:30 PM, the Director of Maintenance (DM) C was interviewed and said staff stored R101's 32-inch television on the overbed table. DM C further said it was not ideal to store that large of a television on the overbed table because the table was not sturdy enough. On 10/8/2025 at 1:40 PM the Nursing Home Administrator was interviewed and said residents' televisions should not be stored on overbed tables since the tables are not sturdy enough to safely hold a television. Review of the facility policy titled Federal & State - Resident Rights & Facility Responsibilities last revised 5/14/2024 revealed in part.Safe environment. The resident has a right to a safe, clean, comfortable, and homelike environment, including but not limited to receiving treatment and supports for daily living safely.

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