STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	235600	A. Building B. Wing	05/27/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Medilodge of Montrose Inc	9317 West Vienna Road Montrose, MI 48457

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 0688 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** This citation pertains to intake Numbers 3009454 and 3009709. Based on observation, interview and record review, the facility failed to ensure that Restorative Therapy for range of motion ROM) and splint application were provided, as ordered, for one resident (Resident #105), of three residents reviewed for positioning. Findings include:Resident #105 (R105):On 5/26/26 at 11:00 AM, an observation was made of R105 lying in bed with a gown on. The Resident was lying on his back at this time. The Resident was clean, had no odors. The Resident did not respond to questions but made eye contact, followed with his gaze, and responded by smiling. The Residents arms and hands were placed on top of the blankets and hands were closed in a fist. The head of the bed was elevated and enteral nutrition was infusing. An observation was made of a hand splint on the top of a set of drawers, positioned under the television. On 5/27/26 at 11:05 AM, an observation was made of R105 dressed and in a reclining wheelchair in the common area where the Resident could visualize the TV. The Resident was observed without the splint on his hand. An observation was made in the Resident's room of the hand splint on the top of the chest of drawers under the TV. A review of Resident 105's medical record revealed an admission into the facility on [DATE] and readmission on [DATE] with diagnoses that included traumatic hemorrhage of right cerebrum, disorder of the autonomic nervous system, neurocognitive disorder and aphasia. A review of the Minimum Data Set assessment revealed the Resident had severely impaired cognitive skills for daily decision making and was dependent on a helper for activities of daily living, mobility, and transfers. Review of the Resident's orders revealed an order for Restorative Nursing: On 5/27/26 at 9:03 AM, an interview was conducted with Confidential Person (CP) E regarding Resident 105's care at the facility. The CP reported that they have come to visit for long hours during the day and staff have not come in to reposition the Resident while they were there and stated, We are never going to stop them from doing their job, he was to be repositioned every two hours. No one came in there while we were there, reported being there for a large portion of the day. When asked about physical therapy, the CP reported the Resident was no longer getting physical therapy and they were to be doing exercises with him. The CP reported when they questioned why he was not getting his exercises done, the staff would tell them they were short staffed and pulling staff to work the floor, Were short staffed, they would say that all the time. On 5/27/26 at 9:43 AM, an interview was conducted with Confidential Person (CP) J regarding Resident 105'2 care received at the facility. The CP reported that they are telling us they are understaffed, but they are neglecting the Resident. When asked about what they are not doing, the CP reported that among other concerns, they were not doing his therapy, ROM exercises. They don't try or if he was not trying, they don't come back. The CP stated, ROM, he is supposed to have it every day. They never do it. He is going to lose his ability if it's not done. We can't be there all the time to do it for him. He can't do it on his own. The CP reported the Resident has a hand splint but it is never on him. The CP reported that when they were there to visit, being there for a good part of the day, no none (staff) comes in to work with him (ROM exercises), the don't reposition him, they don't check him every two hours (for incontinence). The CP reported that the resident relies on the staff to keep him moving, he (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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F 0688 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	can't do it himself. A review of R105's order for Restorative Nursing and task for ROM included: Restorative Nursing: Range of Motion (active) To maintain functional strength, resident may complete AROM/PROM to bilateral upper and lower extremities x 10-15 reps to include all planes 5-7 days per week. A look back from 4/28/26 to 5/26/26 revealed 7 days as Tolerated well and two days the Resident ill. A review of R105's order for Restorative Nursing and task for the splint included: Restorative Nursing: Splint/Brace Assistance (12h (hour))Splint to RUE (right upper extremity) (resting hand) 2 hours on 2 hours off to resident's tolerance; ensure skin integrity and positioning 5-7 x per week, with a look back from 4/28/26 to 5/26/26 revealed 7 documented applications of the splint. A review of the Amount of minutes spent providing splint or brace assistance, with documented minutes of 10, 5, 90, 15, 15, and 15. A review of R105's Restorative Program Monthly Documentation, revealed the following:-Dated 3/29/26 to 4/26/26, Restorative note for: Range of Motion; Participation: How many times did the resident participate in the program? 3; How many times was the resident unavailable to participate in the program? 0; How many times did the resident refuse to participate in the program? 0; Goal: The resident is currently: Not meeting the goal; Explain how the resident is exceeding, maintaining or not meeting the goal: No occurring as orderedRestorative Note 2: Restorative Note For: Splint/Brace; Participation: How many times did the resident participate in the program? 3; How many times was the resident unavailable to participate in the program? 0; How many times did the resident refuse to participate in the program? 0; Goal: The resident is currently: Not meeting the goal; Explain how the resident is exceeding, maintaining or not meeting the goal: No occurring as ordered -Dated observation 2/27/26 to 3/26/26, Restorative note for: Range of Motion; Participation: How many times did the resident participate in the program? 8; How many times was the resident unavailable to participate in the program? 0; How many times did the resident refuse to participate in the program? 0.Restorative Note 2: Restorative Note For: Splint/Brace; Participation: How many times did the resident participate in the program? 10; How many times was the resident unavailable to participate in the program? 0; How many times did the resident refuse to participate in the program? 0. -Dated observation 2/10/26 to 2/26/26, Restorative note for: Range of Motion; Participation: How many times did the resident participate in the program? 6; How many times was the resident unavailable to participate in the program? 0; How many times did the resident refuse to participate in the program? 0.Restorative Note 2: Restorative Note For: Splint/Brace; Participation: How many times did the resident participate in the program? 9; How many times was the resident unavailable to participate in the program? 0; How many times did the resident refuse to participate in the program? 0. On 5/27/26 at 11:09 AM, an interview was conducted with CNA H who has had assigned care of Resident 105. When asked about Restorative Therapy program for R105, the CNA reported that the facility had a restorative program but the CNA would get pulled to the floor to take over assigned care of residents and indicated that when the CNA gets pulled to the floor, they are unable to do the therapy that needs to be done. The CNA reported that the Restorative CNA was assigned to the floor on this day. On 52726 at 12:09 AM, an interview was conducted with the MDS Nurse L who reported she was oversight for the Restorative Therapy department. The MDS Nurse reported that the Therapy department would set up a plan, she would put it in the task list for the Restorative aide or the CNAs to follow. An order would go in for the Restorative plan. The plan would populate daily for the CNA who is assigned care to be completed daily. The MDS Nurse reported she would review once a month. When asked how many Residents were on Restorative Therapy and Restorative staff to work with the Residents, the MDS Nurse reported 41 residents currently and one full time CNA and one that also did transportation with Residents to appointments with plans that included ambulation, transfers, ROM, grooming, and included splint application. When asked about the CNAs getting pulled to the floor, the MDS Nurse stated, Yes, that does occur, but was unsure how often they get pulled. The MDS Nurse reported that if the Restorative Therapy CNA can not do the plan, then it was the responsibility of the CNA assigned care to complete. When asked about the Resident's 5 to 7 days a week for ROM, the MDS Nurse indicated that yes, Resident 105 would need (continued on next page)

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F 0688 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	ROM more often if unable to do the ROM himself, with 7 days over just the 5 days. When asked why the ROM and splint application was not being completed with Resident 105, the MDS Nurse reported she was unsure why it was not getting completed. When asked if the Resident was not tolerating the splint, the MDS Nurse reviewed progress notes and was unable to find documentation of not tolerating the splint. On 5/27/26 at 12:42 PM, CNA M reported she was the Restorative CNA but had been pulled to take an assignment on the floor. When asked how often it happens, the CNA reported that it depends on the week, the CNA reported if here for 3 days in the week, she could be pulled and has been pulled to floor care two out of the three days. The CNA stated, I work today and tomorrow, so tomorrow I don't know where I will be, I could wake up tomorrow and it will say CNA if short staffed, and reported 1 to 2 days a week she would work as a CNA and the rest as a Restorative Aide, sometimes Restorative Aide all week, but that does not happen very often. When asked if able to complete Restorative Therapy for Residents, the CNA reported maybe for the ones in the hall she was working in, but there were Residents on the other side also, and you can't always get to the Restorative Plan if busy. The CNA reported that there was a Resident who was supposed to ride a bike in therapy and needed someone to be with him so that would be able to happen. The CNA stated, if have time then can do the ROM. On 5/27/26 at 12:58 PM, an interview was conducted with the Therapy Director O regarding R105's Restorative Therapy plan. The Therapy Director (TD) reported that the therapy department gives recommendations for Restorative Therapy once therapy was completed. The ROM and the Splint application for R105 was reviewed regarding the lack of follow-through with the exercises and splint application. When asked what the benefits for R105 are to participate in the ROM, the TD stated, That is to maintain ROM and positioning and to keep ROM to all extremities. When asked the consequences if the plan was not followed as ordered, the TD stated, He could have a loss of range of motion, lose degrees of motion. On 5/27/26 at 1:49 PM, an interview was conducted with the Administrator (NHA) and Corporate Nurse K regarding the lack of Restorative Therapy plan follow through with ordered ROM exercises and splint application. It was reviewed that in the last 30 days look back that the ROM exercises ordered for 5 to 7 times a week were completed 7 days and splint application for 2 hours off and 2 hours on for 5 to 7 days was completed 7 days with application for 15 to 90 minutes a day as documented. A review of facility policy titled, Activities of Daily Living (ADLs) revealed, Policy: The facility takes measures to minimize the loss of residents' functional abilities, including activities of daily living. 2. The facility provides maintenance and restorative program to assist residents in achieving and maintaining the highest practicable outcome based on their comprehensive assessment.