

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 235653	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/09/2025
NAME OF PROVIDER OR SUPPLIER Medilodge of Capital Area		STREET ADDRESS, CITY, STATE, ZIP CODE 2100 E Provincial House Dr Lansing, MI 48910	

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 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>45038</p> <p>This citation pertains to intake MI00151282</p> <p>Based on observation, interview, and record review the facility failed to serve food at the preferred temperature for two resident (#2, #4) of three resident reviewed for food palpability resulting in dissatisfaction during meals.</p> <p>Findings Included:</p> <p>Resident #2 (R2):</p> <p>Review of the medical record revealed R2 was admitted to the facility 12/13/2024 with diagnoses that included kidney failure, acute cystitis (inflammation of the bladder), dissection of thoracic aorta, chronic ischemic heart disease, hyperkalemia (high potassium level), muscle weakness, anemia (low red blood count), post-traumatic stress disorder (PTSD), mood disorder, depression, and myalgia (muscle pain). The most recent Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 03/21/2025, revealed R2 had a Brief Interview of Mental Status (BIMS) of 15 (cognitively intact) out of 15.</p> <p>During observation and interview on 04/08/2025 at 08:20 a.m. R2 was observed walking from his bathroom back to his bed. R2 explained that he has not had a hot meal since he was admitted to the facility. R2 explained that at best, the meals are warm. R2 also explained that he rarely had received hot tea, and the iced tea is rarely cold. R2 explained that the meat are over cooked and sometimes under cooked.</p> <p>Resident #4 (R4)</p> <p>Review of the medical record revealed R4 was admitted to the facility 04/14/2021 with diagnoses that included cerebral infarction (stroke), type 2 diabetes mellitus, hyperlipidemia (high fat content in blood), hypertension, cervical disc degeneration (cushioning disc in neck breaks down over time), memory deficit, difficulty walker, dysphagia (difficulty swallowing), insomnia, cognitive communication deficit, dementia, and depression. The most recent Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 01/10/2025, revealed R4 had a Brief Interview of Mental Status (BIMS) of 9 (severely impaired cognition) out of 15.</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 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During observation and interview on 04/08/2025 at 11:27 a.m. R4 was observed lying down in bed. R4 explained that he frequently received his meals in his room. R4 explained that the food he received was never really warm.</p> <p>During observation on 04/08/2025 at 12:07 p.m. the food cart for the 300 hall was observed to arrive on the unit. On 04/08/2025 at 12:11 p.m. it was observed that 4's food tray was delivered to his room. R4 explained that he did not want his food tray because he was going to an appointment and would like something to eat when he returned. R4's lunch tray was removed and the Dietary Manager in training G was asked to obtain temperatures of R4's food tray. Dietary Manger in training G demonstrated the following temperatures: Quiche temperature was 108.3 F(Fahrenheit), peas temperature 120.4F, coffee temperature was 128.0F, and ice cream was 42.0F. The Dietary Manager in training G explained that R4's food tray should have had ice cream that was below 40.0F, the quiche temperature, the pea temperature, and the coffee temperature should have been closer to 165.0F.</p> <p>During observation on 04/09/2025 at 08:36 a.m. the food cart for the 300 hall was observed to arrive on the unit. On 04/09/2025 at 08:38 a.m. R4's food tray was taken into his room. R4 was observed lying in bed. Dietary Account Manager I was asked to obtain temperatures of R4's food. Dietary Account Manager I demonstrated the following temperatures: oatmeal 154.0F (Fahrenheit), hash browns 99.0F, biscuit 87.0F, coffee 87.0F, juice 51.0F, and milk 46.0F. R4 was observed to taste his hash browns and stated he explained that his has browns were not warm enough. Dietary Account Manager I was not observed to offer R4 warmer hash browns and then was observed to leave R4's room.</p>		

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<p>F 0806</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives and the facility provides food that accommodates resident allergies, intolerances, and preferences, as well as appealing options.</p> <p>45038</p> <p>This citation pertains to intake MI00151282</p> <p>Based on observation, interview, and record review the facility failed to provide food preferences for one Residents (#2) of three sampled Residents resulting in frustration and an unpleasant dining experience.</p> <p>Findings Included:</p> <p>Resident #2 (R2):</p> <p>Review of the medical record revealed R2 was admitted to the facility 12/13/2024 with diagnoses that included kidney failure, acute cystitis (inflammation of the bladder), dissection of thoracic aorta, chronic ischemic heart disease, hyperkalemia (high potassium level), muscle weakness, anemia (low red blood count), post-traumatic stress disorder (PTSD), mood disorder, depression, and myalgia (muscle pain). The most recent Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 03/21/2025, revealed R2 had a Brief Interview of Mental Status (BIMS) of 15 (cognitively intact) out of 15.</p> <p>During observation and interview on 04/08/2025 at 08:20 a.m. R2 was observed walking from his bathroom back to his bed. R2 explained that he had issues with getting the food items that were listed on his food tag. R2 also explained that he either received the food that he did not like or did not receive the food items he had requested. R2 provided the following meal tickets that demonstrated that the facility had not honored his preferences:</p> <ol style="list-style-type: none"> 1. 03/24/2025: Lunch- had not received tossed salad w/dressing and did not receive hot tea but coffee (item listed on his dislike list). 2. 4/01/2025 - Breakfast- had not received assorted yogurt cup, cold cereal of choice, and 2 %milk. 3. 4/02/2025- Dinner-had not received potato chips. 4. 4/03/2025-Dinner- had not received ketchup. 5. 4/05/2025 -Lunch-had not received homestyle turkey and gravy. Instead, he had received pot roast beef stew (food ticket demonstrated No Beef Products. 6. 4/6/2025- Lunch- had not received hot tea but had received coffee (item listed on his dislike list). <p>(continued on next page)</p>		

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<p>F 0806</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>R2 also explained that he had completed several Quality Assistance Forms that explained the issues regarding his food preference and food ticket concerns. R2 explained that he had been meeting with the dietary manager but that the issues were still occurring as demonstrated by the food tickets he had provided.</p> <p>Review of R2 medical record demonstrated that he had a physician diet order that stated, Regular diet, regular texture, regular fluid, thin consistency, which was written 12/13/2024.</p> <p>Review of Quality Assistance Form's that had been completed by R2 demonstrated the following:</p> <ol style="list-style-type: none"> 02/03/2025- Resident stated, his tickets are not matching his meals and receiving his dislikes 03/06/2025- says ever meal tray is missing something (today breakfast missing yogurt and cereal) says taco only had meat no cheese, etc. 03/19/2025 - Resident stated that he has saved his meal tickets and that 19 out of 20 meals have been wrong or inedible <p>In an interview on 04/08/2025 at 08:38 a.m. Nursing Home Administrator (NHA) A explained that the facility had identified that residents were not receiving the appropriate food items and had started a performance improvement plan. NHA A explained that an assigned dietary staff was check each resident tray during all meals.</p> <p>In an interview on 04/09/2025 at 09:10 a.m. Dietary Account Manager I explained that dietary manager or staff would review the meal trays and compare them to the meal ticket prior to the food being taken to the resident. Dietary Account Manager I was asked to review the meal tickets of R2 that he had provided above. Dietary Account Manager could not explain why R2 had continued to receive coffee in place of hot tea. Dietary Account Manager could not explain why items were not provided as listed on the meal tickets.</p> <p>In an interview on 04/09/2025 at 09:23 a.m. Nursing Home Administrator (NHA) A explained, after reviewing R2's meal tickets, the facility was not compliant with meeting R2's food preferences. NHA A explained that she was not aware of R2's food issues as demonstrated on the meal tickets listed above. NHA A explained that she felt that the facility performance improvement plan needed further adjustment to meet the food preferences of the residents.</p>		