STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	235664	A. Building B. Wing	06/03/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Harmony Village of Beverly Hills	18200 W 13 Mile Road Beverly Hills, MI 48025

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 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards. Based on observation, interview and record review, the facility failed to store, prepare, and serve food in accordance with professional standards for food service safety. This deficient practice has the potential to result in foodborne illness and cross-contamination for all residents that consume food from the kitchen. Findings include:On 6/1/26 at 8:42 AM, during an initial tour of the kitchen with the Certified Dietary Manager (CDM ?G?), the following concerns were observed:There was a table just outside the dish room that had several plates, bowls and silverware stored right side up and were observed soiled with various food debris. When asked about the storage of the items, CDM ?G' reported those items should've been stored face down and proceeded to turn the soiled items face down on the shelving unit. When asked if those items were going to remain in use, CDM ?G' offered no response and began to remove the items.According to the 2022 FDA (Food and Drug Administration) Food Code section 4-903.11 Equipment, Utensils, Linens, and Single-Service and Single-Use Articles. (A) .cleaned EQUIPMENT and UTENSILS, laundered LINENS, and SINGLE-SERVICE and SINGLEUSE ARTICLES shall be stored: (1) In a clean, dry location; (2) Where they are not exposed to splash, dust, or other contamination; and (3) At least 15 cm (6 inches) above the floor. (B) Clean EQUIPMENT and UTENSILS shall be stored as specified under (A) of this section and shall be stored: (1) In a self-draining position that allows air drying; and (2) Covered or inverted.There was a bottle of heavy-duty degreaser that was observed stored directly between the juice and coffee machine. When asked about the storage of the chemicals, CDM ?G' reported the chemical bottle should not have been stored there.According to the 2022 FDA Food Code section 7-201.11 Separation Poisonous or toxic materials shall be stored so they cannot contaminate food, equipment, utensils, linens, and single-service and single-use articles by: (A) Separating the POISONOUS OR TOXIC MATERIALS by spacing or partitioning; and (B) Locating the POISONOUS OR TOXIC MATERIALS in an area that is not above FOOD, EQUIPMENT, UTENSILS, LINENS, and SINGLE-SERVICE or SINGLE-USE ARTICLES.The reach in cooler behind the meal prep area was observed to have a container of food with a blue lid and small piece of pie in a clear plastic container stored next to other food items in the cooler that had no label to indicate what the food item was, or any dates of when prepared or to be used by. When asked about the containers, CDM ?G' reported that was an employee's food. When asked if employees should be storing their food in with facility food/drink items, they reported they shouldn't and there was a cooler in the employee breakroom but that was not working. There was an opened gallon container of whole milk that was about half full with a best by date of 5/31/26. There was a large white <name brand foam> cup that contained an unidentifiable dark jelly-like substance. There was no label or date to identify what the substance was, when it was prepared, or when to discard. When CDM ?G' was asked about the cup, they reported that was <name brand gelatin> and should've been labelled appropriately.The walk-in cooler was observed to have two large bags of fresh parsley. Some of the parsley was observed brown in color and there were visible droplets that clung to the inside clear packaging. One bag had a label that indicated it had been delivered on 5/14/26 and was Best By 5/18/26. Another bag indicated it had been delivered on 5/4/26 with a Best By 5/12/26. There was a large clear container with clear plastic wrap that had illegible dates that contained a large amount of (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 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	fresh parsley that was submerged in water. When CDM ?G' was asked to identify the date on the plastic wrap, they reported 5/20 to 5/30/26. There was an unopened gallon of whole milk that had a label with a best by date of 5/31/26.When asked why these food items were still in circulation and intended for use, CDM ?G' reported they had not worked this past weekend and usually would've caught that in the morning.According to the 2022 FDA Food Code section 3-302.12 Food Storage Containers, Identified with Common Name of Food, Except for containers holding FOOD that can be readily and unmistakably recognized such as dry pasta, working containers holding FOOD or FOOD ingredients that are removed from their original packages for use in the FOOD ESTABLISHMENT, such as cooking oils, flour, herbs, potato flakes, salt, spices, and sugar shall be identified with the common name of the FOOD.According to the 2022 FDA Food Code section 3-501.17: .(B) Except as specified in (E) - (G) of this section, refrigerated, READY-TO-EAT TIME/TEMPERATURE CONTROL FOR SAFETY FOOD prepared and PACKAGED by a FOOD PROCESSING PLANT shall be clearly marked, at the time the original container is opened in a FOOD ESTABLISHMENT and if the FOOD is held for more than 24 hours, to indicate the date or day by which the FOOD shall be consumed on the PREMISES, sold, or discarded, based on the temperature and time combinations specified in (A) of this section, and: 1. The day the original container is opened in the FOOD ESTABLISHMENT shall be counted as Day 1; and 2. The day or date marked by the FOOD ESTABLISHMENT may not exceed a manufacturer's use-by date if the manufacturer determined the use-by date based on FOOD safety .On 6/1/26 at 11:25 AM, an observation of the lunch meal prep was conducted with CDM ?G' and [NAME] ?E'. While [NAME] 'E' obtained the food temperatures they were observed placing the thermometer into the food in which the top portion of the thermometer (base which was held with bare hand) also went into the food. Although the probe part of the thermometer was cleaned before and after each food item checked, the upper portion of the thermometer was not.According to the 2022 FDA Food Code section 3-101.11 Safe, Unadulterated, and Honestly Presented. FOOD shall be safe, unADULTERATED, and, as specified under S 3-601.12, honestly presented.According to the facility's policy titled, Food Safety Requirements dated 8/2025: .Storage of food in a manner that helps prevent deterioration or contamination of the food, including from growth of microorganisms.Preparation of food.Equipment used in the handling of food, including dishes, utensils.that comes in contact with food.Employee hygienic practices.Facility staff shall inspect food, food products.and ensure timely and proper storage.Labeling, dating, and monitoring refrigerated food, including, but not limited to leftovers, so it is used by its use-by-date.All equipment used in the handling of food shall be cleaned and sanitized and handled in a manner to prevent contamination.Staff shall adhere to safe hygienic practices to prevent contamination of foods from hands or physical objects.

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F 0814 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Dispose of garbage and refuse properly. Based on observation and interview, the facility failed to maintain the exterior dumpster area in a clean manner. This deficient practice had the potential to affect all residents, staff and visitors. Findings include:On 6/1/26 at 9:05 AM, an observation of the dumpster area was conducted with Certified Dietary Manager (CDM ?G'). At that time, both dumpsters were observed to have the doors on the sides opened, and one of the dumpsters had a top lid that was opened. There were birds observed actively going in and out of the opened lid and doors. The area just outside of the dumpsters was observed to have multiple hospital beds, chairs, debris and containers labelled for shredding materials stored directly on the ground. There was an additional large open topped dumpster that was stored on the parking lot near to the designated dumpster area. When asked about who was responsible to maintain the garbage/refuse area, CDM ?G' reported they were responsible for the smaller dumpsters and the maintenance department handled the area that had the resident equipment and the other large dumpster. When asked how the garbage/refuse containers should be maintained, CDM ?G' reported the doors should be closed and proceeded to close the side doors but reported they were unable to reach opened lid on the top.On 6/1/26 at 3:15 PM, an observation of the dumpster area was conducted with Maintenance & Environmental Services Director (Staff ?A'). The same furniture/equipment that was observed earlier remained stored on the ground to the right of the dumpsters. Additionally, upon further observation of the bins labelled for shredding materials, several were observed to have been there for some time as their wheels were buried/covered in dirt and contained various branches and debris. The ground area just in front of these bins and the equipment stored on the ground also revealed there was a large hole/burrow that appeared to be an animal/rodent nest. When asked about how long these items had been stored in this manner, Staff ?A' reported they didn't know about the bins but reported the furniture/equipment had been put there this past Friday and there was a guy that comes out to pick up those items. They further reported the large dumpster was due to be picked up tonight or tomorrow and they didn't put those items (bins/furniture/equipment) in the large dumpster because someone was coming to get them.When asked who was responsible to maintain the dumpster area, and how it should be maintained, they reported normally their staff made sure the doors were closed on the regular dumpsters and when informed of the observation from earlier with CDM ?G', Staff ?A' reported dietary staff should've maintained that as well.On 6/2/26 at 1:32 PM, the facility was requested to provide a facility policy regarding maintenance of the garbage/refuse, however there was no documentation provided by the end of the survey.

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F 0582 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered. Based on interview and record review the facility failed to ensure that the Skilled Nursing Facility Advance Beneficiary Notice of Non-Coverage (SNFABN) was provided and completed for two (R1 and R19) of three residents reviewed for beneficiary notification, resulting in the residents and/or their representatives not being informed timely of private pay charges for continued services while they remained in the facility. Findings include:On 6/2/26 at 2:02 PM, the facility was requested to provide documentation of the required documents which included the SNFABN notice. (The SNFABN notice is a document that identifies the potential detailed charges of continued services if the resident or their representative choose to continue with those skilled services they received while covered under their Medicare A benefits.) R1:Review of the documentation provided for R1 revealed the resident started Medicare Part A benefits on 3/2/26 and their last covered day was 4/30/26. R1 remained in the facility, and their legal guardian was not provided with a SNFABN notice. R19:Review of the documentation provided for R19 revealed the resident started Medicare Part A benefits on 1/14/26 and their last covered day was 3/29/26. R19 remained in the facility, and their financial representative was not provided with a SNFABN notice.On 6/3/26 at 9:15 AM, an interview was conducted with the Business Office Manager (Staff 'I') who reported they had been in this role for about a month. When asked about the documentation provided for beneficiary notifications, Staff 'I' confirmed the residents did not have a SNFABN completed and further reported they should have. When asked what their process was currently to provide the required notices, Staff 'I' reported they met as an interdisciplinary team every Thursday to determine eligibility for those residents on skilled services and they would issue the documentation which included the SNFABN at least two days prior to their last covered Medicare A day.On 6/3/26 at 9:27 AM, the facility was requested to provide a facility policy for SNFABN notices and at 10:21 AM, the Administrator reported they didn't have a policy and were supposed to follow the guidelines from CMS (Centers for Medicare & Medicaid Services).