

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055984	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/23/2025
NAME OF PROVIDER OR SUPPLIER Anaheim Healthcare Center, LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 501 South Beach Blvd. Anaheim, CA 92804	

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 0803</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Some</p>	<p>Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.</p> <p>Based on observation, interview, facility document review, and facility P&P review, the facility failed to ensure the menus were followed for one of four sampled residents (Resident 4) who received food prepared in the kitchen. * Resident 4 was not served the choice of breakfast meat or seasonal fruit cup as per the menu. This failure had the potential for the resident to not receive adequate nutrition and appropriate servings to meet the resident's individual needs. Findings: Review of the facility's Diet Count By Diet dated 7/21/25, showed 206 of 226 residents residing in the facility received food prepared in the kitchen. Review of the facility's P&P titled Menu Planning Criteria revised 5/2020 showed the food and nutritional needs of residents shall be planned to meet the United States Dietary Guidelines and Dietary References Intakes, in order to provide menus that include safe and adequate intake of essential nutrients. Review of the facility's document titled Daily Spreadsheet dated 7/22/25, showed the following menu items were to be served for breakfast for the regular no salt added portioned diet:- Belgian waffle, one each;- breakfast meat of choice, one ounce/one each;- seasonal fruit cup, #8 scoop or 1/2 cup; and- hot or cold cereal, four ounces (hot) or one cup (cold). On 7/22/25 at 0825 hours, a concurrent observation and interview was conducted with Resident 4 about her breakfast tray. Resident 4's meal ticket showed she was to receive a no salt added regular portion diet. Resident 4's meal ticket showed she disliked sausage and milk (not all dairy products). Resident 4's breakfast tray was observed with two waffles and oatmeal. Resident 4 was not served a breakfast meat of choice or the seasonal fruit cup per the menu. Resident 4 stated she only got the waffles, no eggs, and they ran out of the seasonal fruit cup. On 7/22/25 at 0936 hours, an interview was conducted with the DM. The DM was asked about the seasonal fruit cup for Resident 4. The DM stated their deliveries came late and the fruit was still being delivered. The DM stated for their regular texture diet, the fruit cup was missing on their end and did not know they ran out of the fruit until they ran out during trayline. The DM stated they did not inform the residents until they received their trays. On 7/22/25 at 0938 hours, an interview was conducted with the CDM and DM. The CDM and DM were informed of the findings. The CDM and DM acknowledged the above findings. On 7/22/25 at 0957 hours, a follow up interview was conducted with Resident 4. Resident 4 stated it was just that day they did not have any eggs or fruit and she would have eaten the eggs.</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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(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>(continued on next page)</p>

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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>Based on observation, interview, facility document review, and facility P&P review, the facility failed to ensure the food was served palatable and at an appetizing temperature for four of four sampled residents (Residents 1, 2, 3, and 4). This failure resulted in the residents not enjoying their food which potentially will impact the residents' nutritional status. Findings: Review of the facility's P&P titled Food Temperatures revised 3/2020 showed the foods should be served at proper temperature to ensure food safety and palatability. Palatability of foods determines appropriate temperature at bedside or tableside food. Generally hot food is palatable between 110 degrees F and 120 degrees F or greater and cold food is palatable between 50 degrees F and 45 degrees F degrees or less. Residents' surveys will determine their acceptability. Review of the facility's Diet Count By Diet dated 7/21/25, showed 206 of 226 residents residing in the facility received food prepared in the kitchen. Review of the facility document titled Week at a Glance - Long Term Care Regular Diet dated 7/22/25, showed the following menu items to be served for breakfast: - Belgian waffle;- breakfast meat of choice;- seasonal fruit cup; and- hot or cold cereal. On 7/22/25 at 0623 hours, a trayline observation was conducted in the facility's kitchen. The plate warmer was observed with stacks of plates filling the inside of the plate warmer, however, the plate warmer was not turned on or plugged in. The plates were not hot or warm to touch. On 7/22/25 at 0627 hours, the [NAME] was interviewed regarding the plate warmer. The [NAME] stated the plate warmer was broken and had not been working for two weeks. The [NAME] stated they were waiting for the parts to fix the plate warmer. On 7/22/25 at 0633 hours, during an observation, the trayline process began. There were several stacks of plates moved from the plate warmer to the storage area in the steam table. The same plates were used during the trayline. The [NAME] prepared several plates of different assorted diets and placed them on top of the steam table. The DM placed the prepared plates on a resident's food tray once the order was called out. Observation of several prepared plates showed it took about one to two minutes for the prepared plate to be placed on a residents' food tray and covered with a plate dome. At 0702 hours, the meal cart was followed from the kitchen to Nursing Station A. The meal cart was delivered at 0703 hours, the cart checked by a licensed nurse at 0704 hours, then trays were passed immediately following being checked. On 7/22/25 at 0716 hours, a concurrent observation and interview was conducted with Resident 1 about her breakfast tray. Resident 1 stated the food was at room temperature. Resident 1 stated the waffle was cold, not toasted, and it was not supposed to be like that. Resident 1 stated she felt awful about the food and did not like the food cold. On 7/22/25 at 0719 hours, a concurrent observation and interview was conducted with Resident 2 and CNA 1. Resident 2's plate and plate dome was not on her breakfast tray. Resident 2 stated CNA 1 took her plate away to heat up the food. At 0720 hours, CNA 1 brought Resident 2's plate and plate dome back and placed it on Resident 2's breakfast tray. CNA 1 stated she heated up the food because Resident 2 stated it was cold. Resident 2 stated the sausage and waffle was cold and it made her feel like it had been sitting for a long time. Resident 2 stated the waffle was never toasted and was always soggy. On 7/22/25 at 0722 hours, a concurrent observation and interview was conducted with Resident 3 about his breakfast tray. Resident 3's plate containing the sausage and waffle were untouched. Resident 3 stated the sausage was cold and the waffle was cold and raw. Resident 3 stated the waffle was not crunchy and he felt like they threw it in the box and let it sit there without cooking it. Resident 3 stated he felt horrible regarding the food, and would not feed that to my dog. On 7/22/25 at 0815 hours, a regular meal test tray observation and concurrent interview was conducted with the CDM, DM, RN 1 and RN 2. The DM took the temperatures of the following items on the test tray:- Belgian waffle at 85 degrees F; and- Sausage at 90 degrees F. The CDM and DM verified the waffle and sausage were cold. RN 1 stated the temperature of the waffle and sausage was not hot, but not cold. The CDM and DM verified the waffle was soft. The DM stated the waffle did not have a hard crunch. On 7/22/25 at 0924 hours, an interview was conducted with the CDM. The CDM stated if the plate warmer was not working, the staff would usually put the plates in the oven to warm them up for a few minutes. The CDM was informed the plates were not placed in the oven prior to trayline. The CDM acknowledged the findings and stated it was because they were rushed or late. The CDM stated the Maintenance Director was working on the broken plate warmer. On 7/22/25 at 0936 hours, an interview was conducted with the Maintenance Director. The Maintenance Director stated the plate warmer's heating element was not working and verified he was informed of this two weeks ago. The Maintenance Director was unable to provide documented evidence of a work order for the plate warmer, orders, or inquiries. On 7/22/25</p>		