STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145752	A. Building B. Wing	06/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark of Itasca Rehabilitation and Nursing Cent	535 South Elm Itasca, IL 60143

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 0679 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Provide activities to meet all resident's needs. Based on observation, interview and record review, the facility failed to provide activities as scheduled on the posted activities calendar. This applies to 4 of 4 residents (R1, R2, R3, R48) reviewed for activities in a sample of 48.The findings include: Resident Activity Assessments show R1 (4/12/26), R2 (2/10/26), R3(4/29/25), and R48 (4/12/26) all enjoyed participation in various activities including religious services.R1, R2, R3 and R48's activities care plans show the residents both had strong activity participation including engaging in a variety of small and large group activities. R1, R2 and R48's interventions include developing an activity plan centering around the residents' interests and reminding the residents of program schedules. R3's interventions show interventions include reminding R3 about program schedules. Activities calendar, dated May 2026, shows on 5/18/26 Musical Exercise was to begin at 10:00 AM, Chronicles at 10:30 AM, Meditation at 11:00 AM, and at 11:30 AM Fresh Air. The Activity calendar, dated 5/18/26, shows at 2:00 PM Frisbee Tic-Tac-Oh No! and at 3:00 PM Playing Outdoor Games were scheduled as afternoon activities. The calendar also shows Religious Services were to be held every Sunday of the month at 10:30 AM and Catholic mas was to be held at 10:30 AM every Friday of the month. The calendar also shows the facility was to have Game Night activities every 6:00 PM every Tuesday. On 5/18/26 at 10:30 AM, no activity was being conducted in the first floor dining room and Musical Exercise was being organized to begin. R1, R2, R3, and R48 were in attendance. At 11:36 AM, the music exercise activity concluded and V11 (Activities Aide) stated they would not do the meditation or fresh air as scheduled on the activities calendar and the residents were to next go to lunch. V11 stated she passed out paper Chronical pamphlets to residents with their menus while residents in the dining room were attending the Musical Exercise activity. V11 stated she did not review Chronicles with the residents in the first floor dining room. V11 stated she was the only activities aid working in the facility at that time. R1 stated the residents were not given the option to do meditation or go outside that morning. V11 stated R1 and R2 did not like meditation and R1 responded that some residents did enjoy meditation R1 stated the facility no longer provided religious services that were scheduled weekly on the activities calendar. V11 stated a resident performs a bible study on the second floor at 10:30 AM on Fridays and a priest comes to the facility to give communion on the first Friday of each month. R1 stated a resident led a religious ceremony weekly, but there were no religious services conducted by the facility. R2 stated the religious services were still listed on the calendar but they had not been performed in a long time. R3 stated she liked to attend religious services when they were held. R48 stated someone performed a religious services approximately five weeks ago and he attended but they were not offered since not since. No meditation or fresh air activities were performed on the morning of 5/18/26 as per the planned activity calendar. On 5/18/26 at 11:55 AM, R3 stated she is unable to attend religious services unless her son picked her up and drove her to mass at a church. R3 stated she would prefer to do religious services at the facility as per the calendar, but they have not been offered. R3 stated the facility previously had religious services weekly but stopped. On 5/18/26 at 2:22 PM, R1 was sitting alone in the first floor dining room and stated she was told residents were going to go outside to play beanbag toss. At 2:27 PM, R48 and R2 were sitting outside on the back patio, and no activity was in progress. At 2:40 PM no activity was being conducted at the facility. On (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145752	A. Building B. Wing	06/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark of Itasca Rehabilitation and Nursing Cent	535 South Elm Itasca, IL 60143

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 0679 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	5/18/26 at 12:55 PM, a sign posted in the facility elevator announced a bible study was available every Sunday at 10:00 AM in the second floor dining room and non-denominational religious services were available Sundays at 10:30 AM on the first floor. On 5/18/26, V1 (Administrator) stated a man performed a religious study on the second floor that morning but was not sure of the content of the activity. On 5/18/26 at 11:03 Am, V7 (Family) stated the activity calendar shows on Tuesday and Thursday nights there were activities scheduled, and the facility did not provide the activities. V7 stated they have religious ceremonies on the activities calendars, but no services were provided other than a resident playing a bible study on their phone. V7 stated recently one individual comes once a month to provide residents communion. V7 stated the activities aides sometimes are tasked with taking smokers out on smoking activities and there is only one activity aide at the facility to do both activities and smoking. On 5/28/26 at 6:45 Pm, V25 (Activities Aide) stated the residents have been disappointed for a couple of months since religious services were canceled on Sundays. V25 stated R1, R2, and R48 all regularly attended religious services. On 5/19/26 at 10:32 /PM, V27 (Activities Director) stated she needed to adjust the calendar because they no longer offer religious services every Friday and now offer them only one Friday a month. V27 stated she was not aware of Sunday services not happening and needed to investigate. V27 stated she was also unaware the time was changed for Music Exercise at 10:00 AM. V27 stated she was aware R1, R2, R3, and R48 regularly attended the Sunday religious services. V27 stated the activities staff and administration have to coordinate running activities and taking smokers out for cigarettes every day at 9:00 AM, 1:00 PM and 3:00 PM. V27 stated she just returned part time to work at the facility, and she had one full time staff who works on the dementia unit, V11 who is full time, and two part time staff.Review of the 5/2026 worked Activity Schedule shows on 5/8/26, 5/12/26, 5/22/26 there was only one activity aide scheduled at the facility who worked from 9:00 AM to 5:00 PM. Review of the worked schedules showed only one Tuesday (5/12/26) in May was an activities staff scheduled beyond 5:00 PM to conduct the scheduled 6:00 PM Game Night every Tuesday.Resident grievance, dated 2/20/26, shows R1 expressed concern there were no activities and were waiting for someone to perform activities of Catholic Church that had not occurred in months.Resident council meeting minutes, dated 4/15/26, show the residents expressed concerns regarding not having consistency in evening activities. Activity Department Program Policy, undated, shows, It is our policy to provide a competent variety of therapeutic recreation opportunities designed to meet, in accordance with the comprehensive assessment, the interests and physical, mental and psycho-social well-being needs of each individual resident. There shall be sufficient number of staff members to ensure the implementation of a consistent, diversified and beneficial program. A full weekly program shall be carried out by the staff.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145752	A. Building B. Wing	06/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark of Itasca Rehabilitation and Nursing Cent	535 South Elm Itasca, IL 60143

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 0800 Level of Harm - Immediate jeopardy to resident health or safety Residents Affected - Many	Provide each resident with a nourishing, palatable, well-balanced diet that meets his or her daily nutritional and special dietary needs. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to have a system in place to provide sufficient food to meet the daily nutritional requirements of residents and serve the facility planned/approved menu.This failure resulted in Immediate Jeopardy. The Immediate Jeopardy began on 5/18/26 at 11:58 AM when the facility failed to maintain two days' worth of food supplies on hand, failed to purchase food in quantities/quality to be able to serve all residents the planned, palatable menu, and failed to have sufficient food to serve double portions and dietary supplements to residents with recent significant weight loss.This applies to 14 of 14 residents (R11, R15, R16, R21, R22, R23, R24, R25, R27, R28, R30, R31, R32, and R33) reviewed for residents with significant weight loss and has the potential to apply to all 125 residents on oral diets at the facility.V1 (Administrator), V2 (Director of Nursing), and V10 (Regional Director of Operations) were notified of the Immediate Jeopardy on 5/22/26 at 2:57 PM. The surveyor confirmed by observation, interview and record review that the Immediate Jeopardy was removed on 5/27/26 at 9:03 PM, but noncompliance remains at Level Two because additional time is needed to evaluate the implementation and effectiveness of the in-service training and plan implementation.The findings include: 1. Facility Daily Census, dated 5/18/26, shows the facility resident census was 127. Facility document provided on 5/28/26 shows two residents had physician orders for NPO (no food by mouth). On 5/18/26 at 2:40 PM, V10 (Regional Director of Operations) stated the facility was budgeted to spend $6.40 per person per day for food/beverage/nutritional supplements. At a census of 127 residents, the facility was providing approximately $5690 per week for food/beverage/nutritional supplement purchases to be provided by the kitchen. On 5/18/2026, at 9:53 AM V3 (Food Service Manager) stated he was allotted $5500 for his weekly food purchases. V3 said he was unable to purchase all the weekly menu items required to serve the facility approved weekly menus. V3 stated he received a delivery every Wednesday and by the next delivery was usually running low on food. V3 stated he felt he usually had menu entrees but not specific fruits so he would change the fruits served to fruits he had on hand at the end of the week. V3 stated the facility was serving chicken tenders at lunch that day instead of the planned corned beef because the corned beef was too expensive for his weekly food budget. V3 also said because he doesn't have enough funds, he can only purchase one case of hamburgers instead of two. Hamburgers are listed on the Always Available Menu as a substitution offered to residents. V3 stated one case of hamburgers is insufficient to provide the weekly meal substitutions when the planned meal was not palatable for residents to eat.Food delivery order, delivered 5/13/26, showed V3 spent $5616.87 on food purchases from the food vendor for the week. On 5/19/26 at 10:43 AM with V15 (Corporate Food Service), an inventory of the kitchen refrigerator and freezers showed minimal amounts of protein foods available in stock in the kitchen for residents. V15 stated there was no more than 2 days of protein tops - that's pushing it.On 5/21/26, V16 (Dietitian) stated during her scheduled visits to the facility she reported to V3 (Food Service Manager), V1 (Administrator), and V17 (Regional Director of Food Service) that residents were consistently not receiving food/double portions/nutritional supplements/nutritional interventions as ordered by the physician and V16 was told the food purchases were limited by budgetary constraints. V16 stated the kitchen regularly maintained very little food on hand and should always maintain no less than three days of emergency food - including for those residents with nutrition interventions such as double portions. V16 stated she recommended nutrition interventions for residents such as nutrition supplements, added food items (ice cream/yogurt/pudding) and double portions of meals for residents who experienced significant/insidious weight loss, protein malnutrition, or were at risk of experiencing either. V16 stated the following residents were receiving nutrition supplements and/or double portions due to a history of significant weight loss, protein malnutrition or to aid in meeting their nutritional (continued on next page)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145752	A. Building B. Wing	06/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark of Itasca Rehabilitation and Nursing Cent	535 South Elm Itasca, IL 60143

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 0800 Level of Harm - Immediate jeopardy to resident health or safety Residents Affected - Many	requirements at meals: R11, R15, R16, R17, R18, R19, R21, R22, R23, R22, R24, R25, R26, R27, R28, R29, and R36. V16 stated she witnessed the kitchen not serving all the nutrition interventions listed on resident meal tickets as required. V16 stated the facility kitchen was consistently running out of nutrition supplements, cottage cheese, yogurt, ice cream, pudding, always available menu alternative foods, and between meal snacks for dementia residents. 2. Facility Weight Change Report, dated November 2025 to May 2026, shows R15, R16, R21-R24, R27, R28, R30-R33 all experienced significant weight loss. Review of the residents' May 2026 POS (Physician Order Sheet) showed all the residents had physician orders for double portions of foods at one or more meals as nutrition interventions to prevent further weight loss. On 5/19/2026, at 11:35 AM, during lunch meal service, V6 (Dietary Aide) served a single 8-ounce portion of chili to R35. V20 (Dietary Aide- Tray line Checker) asked V6 if the serving provided was a double portion and V6 motioned to put the serving on R35's tray. V20 questioned V6 again asked if the serving was a double portion, and V6 again stated yes and indicated V20 should put the chili on R35's tray. After prompting a third time, V6 acknowledged the serving was not a double portion and provided R35 with a second 8-ounce portion of chili. At 11:50 AM, V6 was observed to be serving less than a full ladle of chili to some residents. After prompting, V6 resumed serving full 8-ounce portions of chili to residents. At 11:53 AM, R37 was served a chef salad with small amounts of cheese, diced meat, and diced egg. The meat/cheese/egg was removed and weighed separately and weighed less than 2 ounces total which was verified by V4 (Traveling Cook). At 12:35 PM, the tray line ran out of cornbread and the remaining residents were provided dinner rolls. At 12:48 PM, the tray line ran out of chili with seven residents not served their meals- three of whom (R6, R11 and R36) all required double portions. The kitchen staff began grilling chicken breasts and looking for other food items to serve to the remaining seven residents. The remaining seven residents were all served foods other than the planned menu for lunch. R6 was initially served a single portion of food and after prompting was served two entrees. During observations of the lunch tray line, R6, R11, R15, R17, R18, R35 and R37 were not served double portions of their meal items per their tray ticket instructions. On 5/27/26 at 3:27 PM, V23 (Corporate Menu Registered Dietitian) and V24 (Corporate Menu Registered Dietitian) stated they plan the menus for the facility using Dietary Guidelines for Americans and each entree at lunch and dinner provided three ounces of protein per serving- including the chili served at lunch on 5/19/26. V24 stated double portions of entrees would require six ounces of protein per serving. V23 stated if the menu is changed at the facility after she approves the facility menu, the menu is no longer approved by her and the dietitian at the facility would be responsible for approving the changes. On 5/21/26 at 2:27 PM, V16 (Dietitian) stated R11, R15, R16, R21, R22, R23, R24, R25, R27, R28, R30, R31, R32, and R33 were all supposed to receive nutrition interventions of double portions or nutritional supplements to encourage nutritional intake at meals and improve nutritional status. V16 stated R11 received double portions because he had a significant weight loss previously and R15 recently required increased protein intake due to her compromised nutritional status. V16 stated R16 experienced recent significant weight loss and because R16 did not like nutritional supplements, R16 was to have received double portions for breakfast, extra sandwiches at lunch and dinner, and yogurt with all meals to prevent further significant weight loss. V16 stated R21 was to have received double portions and house supplements to prevent further significant weight loss. R22 has dementia and walks constantly so he was to receive double portions. R24 had a physician order for double portions because he experienced significant weight loss. R23 experienced significant weight loss in March 2026, and double portions at breakfast were implemented to help meet his total caloric needs. R25 received nutritional supplements because she did not regularly eat food. R27 experienced significant weight loss and only liked chocolate nutritional supplements. R28 required health shakes to maintain weight after losing weight at the hospital and needing to gain back the weight. R30 was a large person wishing to lose weight but required more food than a regular diet to prevent significant weight loss due to his size and being a picky eater. V16 stated R31 required double egg/meat because she experienced protein (continued on next page)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145752	A. Building B. Wing	06/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark of Itasca Rehabilitation and Nursing Cent	535 South Elm Itasca, IL 60143

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 0800 Level of Harm - Immediate jeopardy to resident health or safety Residents Affected - Many	malnutrition. R32 experienced significant weight loss in April 2025 and was receiving multiple supplements and double meat/egg to stabilize her weight. V16 stated R33 had dementia, had a history of weight loss, and wasted much of his food when he ate so he required double portions and supplements to ensure he ate enough each day to prevent weight loss.R27's Weights and Vitals Summary, printed 5/21/26, shows on 5/19/26, R27 experienced a significant 10% weight loss (20.6 pounds) in six months and 7.5% weight loss (12 pounds) in three months. The POS, printed 5/21/26, shows R27 had physician a physician order dated 5/11/2026, for chocolate health shakes with all meals and double meat/egg at breakfast, and an order dated 5/15/2026, for Glucerna shakes three times a day.Nutrition note, dated 5/25/26, shows R27 experienced significant 7.5% weight loss (12 pounds) in 3 months and 10% weight loss (20.6 pounds) in 6 months. The note shows R27 was recently hospitalized and experienced weight loss related to chronic inadequate oral intake. The note shows R27 received chocolate health shakes with all meals and double meat/egg at breakfast to discourage further weight loss.Weights and Vitals Summary, printed 5/26/26, shows on 12/5/25, R11 experienced a significant weight loss of 10% (26.8 pounds). Review of R11's nutrition notes dated 7/10/2025 to 12/5/2025, and R11's physician order dated 3/24/25, shows R11 was to be provided with multiple nutritional supplements, double portions at breakfast and lunch, and meat sandwiches at bedtime, to prevent significant weight loss and stabilize R11's weights.On 5/19/26 at 12:59 PM, R15 was observed at lunch with only one serving of chili on her tray. V19 (Family) stated R15 never received double portions at lunch as ordered and he said he visited R15 every day at lunch. R15's POS, printed on 5/20/26, shows R15 had physician orders (dated 5/1/26) for double egg/meat/protein servings at breakfast and lunch. Weights and Vitals Summary, printed on 5/20/26, shows R15 experienced significant weight loss of 13 pounds between 1/2026 and 3/2026. On 5/19/26 at 12:58 PM, R16 was sitting in the dining room for lunch. There was no yogurt or sandwich provided on R16's lunch tray. Nutrition note, dated 5/18/26, shows that R16 experienced significant weight loss of 7.5% in 3 months (15.6 pounds) and 10% in 6 months (20.6 pounds). The note shows R16 refused oral nutrition supplements and R16 was to receive double portions at breakfast, an extra sandwich at lunch and dinner, and yogurt at all meals to increase calories offered to R16. The POS, printed on 5/20/26, shows R16 had a physician order (dated 5/1/26) for double portions at breakfast, extra sandwich at lunch and dinner, and yogurt at all meals. Review of R16's weights showed R16 experienced significant weight loss of 10% in April 2026. R21's POS, printed on 5/20/26, shows R21 had a physician order (dated 4/9/26) for health shakes at all meals and double portions at breakfast. Weights and Vitals Summary, printed 5/20/26, shows R21 experienced significant weight loss of 10% on 12/10/25 after losing 15 lbs. in six months. Nutrition note, dated 4/24/26, shows R21 experienced another significant unintended weight loss of 5% in one month (a loss of 8.8 pounds) and nutrition supplements were added. Nutrition note, dated 5/8/26, shows R21 experienced further weight loss of 5% in one month (a loss of 7.8 pounds) and R21 was placed on double portions at breakfast to prevent further weight loss. Weights and Vitals Summary, printed on 5/20/26, shows R22 experienced a 5% significant weight loss (6.2 pounds) in one month. The documented weights show R22 lost 10 pounds in 6 months. Nutrition note, dated 5/8/26, shows R22 had a good appetite and was asking for extra meal portions. The nutrition note shows R22 was also to receive nutritional supplements in addition to double portions at all meals to prevent further weight loss. R22's body mass index was 16.4 indicating he was under-weight.On 5/19/26 at 9:54 AM, R23 stated he did not receive double portions at breakfasts. R23 stated he experienced weight loss and was not sure what caused the weight loss. R23 stated he would eat double portions at meals if they were served to him. Review of R23's weights show R23 lost an additional 5.4 pounds since 2/7/26 and lost a total of 18 pounds in one year. Nutrition note, dated 2/13/26, shows R23 was placed on double portions at breakfast by the dietitian due to a significant weight loss of 5% in one month despite a good appetite. The note shows R23's estimated calorie needs were 2715 calories a day. On 5/19/26 at 10:16 AM, R24 stated he never felt like he received enough food at any meal, and he never received double portions at breakfast. R24 (continued on next page)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145752	A. Building B. Wing	06/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark of Itasca Rehabilitation and Nursing Cent	535 South Elm Itasca, IL 60143

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 0800 Level of Harm - Immediate jeopardy to resident health or safety Residents Affected - Many	stated about 50% of the time he did not receive what was on the facility's planned menu for that day. Nutrition note, dated 4/20/26, shows R24 experienced 10% weight loss in 6 months. The note shows R24 required 2690 kcals and 70 g of protein a day to meet his estimated nutritional needs. R24 was to receive double portions at breakfast and nutrition supplements to prevent further weight loss. Weights and Vitals Summary, printed on 5/20/2026, shows R24 experienced a significant weight loss 11.2 % (37.8 pounds) from 11/5/2025 to 5/6/2026. R25's nutrition note, dated 5/8/26, shows R25 experienced a significant 5% weight loss of 12.2 pounds in one month and R25 was to receive health shakes and yogurt at breakfast. Nutrition note, dated 3/11/26, shows R25 experienced significant weight losses of 5% in one month (12.8 pounds), 7.5% in three months (17 pounds) and 10% in six months (17 pounds). Weights and Vitals Summary, printed on 5/21/26, shows on 5/19/26, R25 experienced 10% significant weight loss in six months (a loss of 17 pounds) and 7.5% significant weight loss in 3 months (a loss of 12.8 pounds). R25's weights show she lost a total of 25 pounds in 12 months. R25's POS, printed on 5/21/26, shows R25 had physician order dated 1/6/25 for yogurt at breakfast and health shakes with all meals, an order dated 1/23/2025 for Ensure three times a day, and an order dated 5/21/2026 for MedPass 2.0 supplement three times a day. R28's Weights and Vitals Summary, printed 5/21/26, shows on 11/27/25, R28 experienced a 10% weight loss (16.6 pounds) and on 4/7/26 she experienced a significant weight loss of 7% (11 pounds) in one month. Nutrition note, dated 3/20/26, shows R28 was to receive double portions at breakfast and nutrition supplements to stabilize recent significant weight loss due to hospitalizations and more nutritional supplements were added through nursing at that time to prevent further significant weight loss. The POS, printed 5/21/26, shows R28 had a physician order (3/17/26) for health shakes, and fortified cereal, and double portions at breakfast.R30's Weights and Vitals Summary, printed 5/26/26, shows R30 experienced significant weight loss on 12/9/25 of 7.5% (25 pounds) in three months and on 5/6/26 experienced another significant weight loss of 10% (29 pounds) in six months. Nutrition note, dated 5/18/26, shows R30 experienced significant weight loss due to a desire to lose weight and episodes of meal refusals. Review of nutrition notes show V16 provided education on safe / healthy weight loss and offered R30 double portions at meals to encourage intake of foods to prevent further significant weight loss. R31's Nutrition note, dated 3/27/26, shows R31 experienced significant 5% weight loss (11 pounds) in one month and 7.5% weight loss (15 pounds) in three months related to inadequate oral intake and refusals of various nutritional supplements. The note shows R31 was offered double portions at breakfast to encourage oral intake and R31 was previously on total parental nutrition during hospitalization. R32's Nutrition note, dated 4/26/26, shows R32 experienced a significant weight loss of 10% (20.6 pounds) in 6 months and R32 was to receive double portions and nutritional supplements due to a history of significant weight loss, weight fluctuations, varied oral intake and the goal of maintaining R32's weight. Weights and Vitals Summary, dated 5/26/26, shows R32 lost 20 pounds from 11/5/25 to 4/4/26. The POS, dated 5/26/26, shows a physician order (dated 3/27/25) for double meat/egg at breakfast and multiple nutritional supplements ordered by the physician. R33's Weights and Vitals Summary, dated 5/26/26, shows on 12/10/25 R33 experienced a significant 10% weight loss (22 pounds) over 6 months and another significant 10% weight loss (22.8 pounds) on 2/9/26 over six months. Nutrition notes, dated 2/23/36, show R33 was to receive nutritional supplements and double portions at meals to prevent further weight loss and R33 required 2414 calories a day to stabilize his weight. The POS, printed on 5/26/26, shows R33 had physician orders for double portions and nutritional supplements. 3. Review of R17's, R21's, R25's, R26's, R27's, R28's, and R29's May 2026 POS (Physician Order Sheets) showed the residents all had orders for nutritional supplements for either breakfast, lunch, or both meals served by the kitchen. Review of Facility 6-month Weight Change Report dated November 2026 to May 2026 showed the following residents who experienced significant weight loss: R21, R25, R27, and R28. On 5/20/26 at 10:21 AM, V6 (Dietary Aide) stated the kitchen ran out of nutritional supplements for residents who were to receive them at breakfast that morning and would not receive them at lunch because the food delivery (continued on next page)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145752	A. Building B. Wing	06/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark of Itasca Rehabilitation and Nursing Cent	535 South Elm Itasca, IL 60143

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 0800 Level of Harm - Immediate jeopardy to resident health or safety Residents Affected - Many	was not expected to arrive until 3:00 PM that afternoon. V6 stated the facility purchased more yogurt for only R1 but there was no yogurt for any other residents who required yogurt during their meals until the next delivery. V6 stated there were residents who required yogurt at breakfast that did not receive yogurt that morning. V6 stated there was no cottage cheese and no lactose free milk available in the kitchen. V6 stated R8 had not received lactose free milk in two weeks because it was not available in the kitchen. On 5/19/26 at 10:36 AM, V3 (Food Service Director) stated they were going to serve sherbert instead of nutritional supplements at lunch for those residents who required health supplements because they were out of stock. V3 stated the kitchen was also out of stock of yogurt and cottage cheese. Review of manufacturer product information for the nutritional supplements and the sherbet served as a substitute shows the sherbet contained less protein than the nutritional supplements the residents were supposed to receive.On 5/19/26, R21 stated he sometimes received nutrition supplements but not at every meal. The POS, printed 5/20/26, shows R21 had a physician order for nutritional supplements, all meals, double portions at breakfast, and pudding at lunch and dinner. 4. On 5/18/26 at 10:19 AM, R1 stated the residents have no idea what they had for dinner the night prior. R2 stated they had some type of ground meat and not fajita meat. R1 showed a picture of the dinner served the night prior which looked like ground beef crumbles mixed with cooked, chopped green pepper and a side of refried beans. There was no rice evident on her plate. R1 and R38 stated they did not receive the rice for dinner. R38 stated, I wouldn't know if I got fajitas! I got something I chewed on and I got very little I know that! R1 and R39 stated often what is shown on the menu was not served to the residents. R1 and R2 stated the day prior the facility ran out of hamburgers as meal substitutions. R1 stated she had not received her yogurts recently during her meals and was told the facility ran out of yogurt. On 5/18/26 at 10:48 AM, V6 (Dietary Aide) stated the kitchen often ran out of hamburgers for resident requested substitutions. V6 stated the hamburgers were offered on the always available menu provided to residents if they would like substitutions during meals. On 5/18/26 at 11:00 AM, V4 (Contract Cook) stated the facility did not have burgers to serve residents if requested from the Always Available Menu. On 5/18/26 at 10:47 AM, V3 (Food Service Manager) was removing the posted Always Available Menu at the entrance of the first-floor dining room. The Always Available Menu included cheeseburgers and hamburgers. At 10:58 AM, V3 stated there were 2 servings of cottage cheese remaining in the refrigerator. V3 stated cottage cheese and fruit plate is typically requested/served to residents as a substitute at meals despite not being listed on the Always Available menu. On 5/18/26 at 10:46 AM, V5 (Food Service Director) stated the kitchen ran out of hamburgers for substitutes on Friday, 10/15/26. V5 stated the kitchen used Philly beef strips to make fajitas for dinner the previous night.On 5/18/26 at 11:03 AM, V7 (Family) stated R1 did not receive her daily yogurt that morning and was told the facility ran out of yogurt. V7 stated the facility also often ran out of items offered on the Always Available Menu list. On 5/18/26 at 12:28 PM, V9 (Registered Nurse) stated R1 was not served yogurt on her breakfast or lunch trays per her tray ticket instructions. V9 stated she went to the administrative office and took yogurt from the refrigerator which was left over from a staff party the week prior. V9 stated R1 had not received yogurt per her tray ticket instructions for two days or more. On 5/18/26 at 11:58 AM, the kitchen had no yogurt in the refrigerator and V3 stated the facility ran out of yogurt. 5. On 5/18/26 at 11:55 AM, R3 stated she required plant-based milk and her son regularly purchased and provides it to the kitchen for R3. R3 stated her son brought a large container to the facility on 5/14/26 which should have lasted two weeks but was already used up. R3 stated the facility frequently served R3's private milk to residents requiring lactose-free milk because the facility often ran out of lactose free milk. R3 stated the facility ran out of lactose -free milk since 5/16/26 and the facility also often ran out of hamburgers, salads, and juices.On 5/19/26 during lunch, R3 did not receive milk at lunch. V22 (CNA) stated R3 was supposed to have her plant-based milk every lunch but the kitchen ran out of lactose free milk days ago and they gave R3's milk to R8 because R8 should receive lactose free milk. Review of the dining room milk supplies showed only regular milks and no lactose free or plan-based milk. At 12:21 PM, R8 (continued on next page)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145752	A. Building B. Wing	06/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark of Itasca Rehabilitation and Nursing Cent	535 South Elm Itasca, IL 60143

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 0800 Level of Harm - Immediate jeopardy to resident health or safety Residents Affected - Many	stated she was supposed to receive lactose free milk, but the facility often runs out. R8 stated the kitchen was out of lactose free milk for days and the staff gave R3's milk to R8 which upset R8 because R3's family purchased her milk. On 5/18/26 at 12:25 PM, V12 (CNA) stated the facility usually ran out of R3's plant-based milk, hamburgers, cottage cheese, sugar substitutes, and salad dressings. On 5/19/26 at 12:23 PM, V3 stated the facility had no lactose free milk and had no plant-based milk that was supplied by R3's family. V3 stated he was aware R3's milk was utilized to serve to other residents.6. On 5/18/26 at 10:46 AM, V5 (Cook) stated there was no corned beef for lunch's planned menu. V5 stated there was no cottage cheese because V3 only orders one tub of cottage cheese for the week and the residents require two tubs per week. V3 stated when they serve meals, the staff often run out of meat and other foods during service. On 5/18/26 at 12:00 PM, during lunch in the kitchen, chicken tenders were served instead of corned beef per the planned menus. The chicken tenders were piled high above the top of a 8-inch steamtable pan and covered with clear plastic film. The breading on the chicken tenders was soggy and wet. The chicken tenders tasted wet. R7 stated the kitchen served some of the menu items but they run out of food at meals such as pasta shells. R7 stated, That makes me feel hungry! R7 stated they gave her bread when she was not served pasta shells. On 5/18/26 during lunch, R4 and R5 stated they would have rather had corned beef. R5 stated the kitchen served chicken very often. R6 stated the quality of the food has diminished and the kitchen often ran out of sugar substitutes. On 5/18/26 at 12:33 PM during lunch on the second floor, R9 stated the prior week the residents were served a chicken patty so hard they could not cut it. R10 stated she never was chicken like the chicken patty served the week prior. R9 and R10 stated they were not aware they were supposed to have been served corned beef for lunch because the kitchen only posted daily menus the morning of, or the night prior, the meals were served and not a week prior. R10 stated the last time they were served corned beef was on St. Patrick's Day and it was chewy and inedible. R10 stated all the residents were served chicken and the facility often ran out of hamburgers, yogurt, and cottage cheese. R10 stated the foods served have become inedible and substandard. R9 stated the meat felt like you were chewing on rubber. R11 stated the chicken patty served last week was like a hockey puck- when I used a knife, it sounded like a saw was going threw it - it made buzzing noises as I cut back and forth! V13 (Restorative CNA) stated the residents complain that the meat is overcooked, hard, dry, and do not eat it. V13 stated the residents complain the kitchen runs out of food, especially yogurt. On 5/19/26 at 10:08 AM, R42 stated he was served chicken patties on a bun that were so hard he could not chew them. R42 stated the facility did not serve what was planned on the menu. R42 stated he did not know if the facility was running out of food or if the staff did not know how to cook. R42 stated he was given ground beef for fajitas, no tortillas and instead a piece of bread. R42 stated he was served no rice and no beans during the fajita meal. R42 stated when he received rice, the rice was undercooked and hard. On 5/22/26 at 9:19 AM, R47 stated, We were supposed to have chicken and beef fajitas the other night - I got a tortilla with hamburger and chopped green pepper. I am the last person who gets a tray - room [ROOM NUMBER]. Sometimes I don't even get a tray. Or a tray comes with something that was not on the menu. They are out of foods like hamburgers and hot dogs on the substitute menu. We can be out of sugar and creamer for a week! Several times a week we don't see the menu item on our trays in that hall because they run out of food. On 5/22/26 at 2:20 PM, R44 (Resident Council President) stated, We save food for last at resident council because there are so many complaints. The change to this food company was a mistake and I am afraid they are running out of food. They only get a delivery one time a week and run out of food. They tell people they don't have food when the people ask for food. They say they are out of it, or they don't have it. It happened to me when I asked for a lunch meat sandwich and oranges and bananas. The chili was like water. The beef and chicken fajitas was not whole meat pieces - it was ground beef - some residents got bread, and some got tortillas. It makes us think we were running out of food - we run out of cheeseburgers and other foods. They tell us they ran out. It's concerning that people aren't getting the nutrients they need. Sometimes we feel like we won't be fed (continued on next page)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145752	A. Building B. Wing	06/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark of Itasca Rehabilitation and Nursing Cent	535 South Elm Itasca, IL 60143

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 0800 Level of Harm - Immediate jeopardy to resident health or safety Residents Affected - Many	- It's scary. It's gotten way worse and now we run out of food more! .It makes me feel not heard and has been happening for the last 6 months. They don't order enough food, and it scares me. We should have more than enough money. We had chicken patties that were hockey pucks. Most people did not eat that meal. I brought it to the kitchen and said it was inedible. It's depressing! It makes us feel like we are an inconvenience to have here. It's exhausting, aggravating, and depressing. We talked about it in resident council, and nothing is done about it. People ask why we even meet because it only got worse! Family members come and ask the facility why their residents are ordering food from outside! On 5/19/26 at 1:12 PM, R11 was observed during lunch with one serving of chicken breast and a dinner roll. R11 stated he was supposed to receive double portions of chili and cornbread. R11 stated, Does that look good!? R11 stated the food was not good at the facility and R11 did not receive what was on the menu. R11 stated he asked for a ham sandwich instead of what he was served.On 5/19/26 at 1:15 PM, R6 was observed eating his lunch which consisted of a hot dog, a scoop of egg salad, and mashed potatoes. R6 stated, I like egg salad but not seven days a week. I don't know why I get it seven days a week. Egg salad 7 days a week is too often! R6's tray ticket showed R6 liked egg salad and disliked grilled chicken breast. On 5/22/26 at 2:10 PM, R8 stated, The food is nasty! I can't eat it! I throw up! I don't know how some can eat it. It's nasty. And it's been going on forever. I'm losing weight because I can't eat it. I am very disgusted. Disgusted with it! It makes me angry since I've been here! I got in their face and said you have to give us choices! R8 stated she was not allowed to ask for a grilled cheese sandwich substitute when she did not like her meals and was told she had to ask for a substitute by 4:00 PM but saw two other residents receiving substitutes. R8 stated the hamburgers were hard and dry like they were cooked and left over for two days, and the grilled cheese sandwiches were hard and dry like they were left over. R8 stated the residents talked about how bad food service was consistently but no improvements were made. On 5/22/26 at 3:48 PM, R45 stated at lunch she did not receive the same fish everyone else received. R45 stated other residents got 4 fish sticks and R45 got something with a very hard crust and thin gray fish she could not cut with a knife. R45 stated she picked off a piece of it and it tasted terrible, so she did not eat it. R45 stated two other residents received the same entree as R45 and those residents did not eat the entrees. R45 stated, It makes me feel like I am worthless. At least 1/3 of the time it is not edible. They get the cheapest of everything. The hard boiled eggs taste fake! .They have given peanut butter sandwiches that were less than you would put butter on a bread. They do run out of a lot of food. Yogurt, cottage cheese, orange juice, hamburgers for substitutions, salad dressing - sometimes they give plain lettuce with no dressing and say they run out of it. They run out of scrambled eggs. We will get a sausage patty and a piece of toast. That's it. I ask for yogurt daily and they took it off my meal ticket and never give me yogurt. They give me fruit loops instead of cooked cereal which I ask for. The CNAs know I want the cooked cereal so they may get it off another resident's tray. They refuse to put any preferences on my menu. They took tea off that was on there. Last week they had tacos beef which I wanted - with fried rice and corn but they gave me grilled cheese and something else and I didn't ask for a substitute. I eat in my room. They serve us second to the last in halls. I think they run out of food, and they give me something different. They did today! I couldn't eat it. They gave it to a few other people.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145752	A. Building B. Wing	06/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark of Itasca Rehabilitation and Nursing Cent	535 South Elm Itasca, IL 60143

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 0835 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Administer the facility in a manner that enables it to use its resources effectively and efficiently. Based on interview and record review, the facility failed to administer a food service operation in a manner to provide adequate quality/quantities of food to residents of the facility. This applies to all 125 residents receiving oral diets at the facility.The findings include: Facility Daily Census, dated 5/18/26, shows the facility resident census was 127.Facility document provided 5/28/26 shows two residents had physician orders for NPO (no food by mouth).On 5/18/26 at 2:40 PM, V10 (Regional Director of Operations) stated the facility was budgeted to spend $6.40 per person per day. At a census of 127 residents, the facility was providing approximately $5690 per week for food/beverage/nutritional supplement purchases provided by the kitchen.On 5/18/2026, at 9:53 AM V3 (Food Service Manager) V3 stated he was allotted $5500 for his weekly food purchases, and he was unable to purchase all the weekly menu items required to serve the facility approved weekly menus. V3 stated he received a delivery every Wednesday and was usually running low on food by the next food delivery. V3 stated he felt he usually had menu entrees but not specific fruits so he would change the fruits served to fruits he had on hand at the end of the week. V3 stated the facility was serving chicken tenders at lunch that day instead of the planned corned beef because the corned beef was too expensive for his weekly food budget. V3 said he can only afford to order one case instead of two cases of hamburgers a week (which were listed on the Always Available Menu for substitutions offered to residents) due to lack of funds. V3 stated one case of hamburgers was insufficient to provide the weekly requested meal substitutions when the planned meal was not palatable for residents to eat. Food delivery order, delivered 5/13/26, showed V3 spent $5616.87 on food purchases from the food vendor for the week. On 5/19/26 at 10:43 PM with V15 (Corporate Food Service), an inventory of the kitchen refrigerator and freezers showed minimal amounts of protein foods available in stock in the kitchen for residents. V15 stated there was no more than 2 days of protein tops - that's pushing it.On 5/21/26, V16 (Dietitian) stated during her scheduled visits to the facility she reported to V3 (Food Service Manager), V1 (Administrator), and V17 (Regional Director of Food Service) that residents were consistently not receiving food/double portions/nutritional supplements/nutritional interventions as ordered by the physician and V16 was told the food purchases were limited by budgetary constraints. V16 stated the kitchen regularly maintained very little food on hand and should always maintain no less than three days of emergency food - including for those residents with nutrition interventions such as double portions. V16 stated she recommended nutrition interventions for residents such as nutrition supplements, added food items (ice cream/yogurt/pudding) and double portions of meals for residents who experienced significant/insidious weight loss, protein malnutrition, or were at risk of experiencing either. V16 stated the following residents were receiving nutrition supplements and/or double portions due to a history of significant weight loss, protein malnutrition or to aid in meeting their nutritional requirements at meals: R11, R15, R16, R17, R18, R19, R21, R22, R23, R22, R24, R25, R26, R27, R28, R29, and R36. V16 stated she witnessed the kitchen not serving all of the nutritional interventions listed on resident meal tickets as required. V16 stated the facility kitchen was consistently running out of food items such as nutrition supplements, cottage cheese, yogurt, ice cream, pudding, always available menu alternative foods, and between meal snacks for dementia residents.On 5/22/26 at 2:57 PM, V10 (Regional Director of Operations) asked V1 (Administrator) if he was aware of V16's concerns the facility was not purchasing enough food. V1 stated he was aware of the concerns and spoke to V17 (Regional Director of Food Service) regarding the concerns and was told they were constrained by the budget for their food purchases.On 5/19/26 during lunch, the facility failed to serve double portions to several residents (R6, R11, R15, R17, R18, R35, and R37) per their tray tickets and ran out of the chili entree and bread rolls with seven residents not yet served their lunches.On 5/18/26 at 10:46 AM, V5 (Cook) stated the staff often ran out of meat and other foods during meal service at the facility.Facility Weight Change Report, dated November 2025 to May 2026, (continued on next page)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145752	A. Building B. Wing	06/01/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Landmark of Itasca Rehabilitation and Nursing Cent	535 South Elm Itasca, IL 60143

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 0835 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	shows R15, R16, R21-R24, R27, R28, R30-R33 all experienced significant weight loss. Review of the residents' May 2026 POS showed all of the residents had physician orders for double portions of foods at one or more meals as nutrition interventions to prevent further weight loss.On 5/19/26 during lunch service, R16 was not served her extra sandwich at lunch per her physician diet order, R23 stated he did not receive double portions at breakfasts per his meal ticket, R21 stated he did not always receive his nutritional supplements on his meal trays, and R24 stated he did not receive enough food at meals and never received double portions at breakfast per his meal ticket.On 5/18/26 at 11:58 AM, the kitchen had no yogurt in the refrigerator and V3 stated the facility ran out of yogurt.On 5/20/26, V6 (Dietary Aide) stated the kitchen ran out of nutritional supplements that morning and would not have any nutritional supplements for residents at lunch. V6 stated the facility also ran out of yogurt and several residents did not receive yogurt that morning. V6 stated the facility was also out of cottage cheese and lactose free milk (which they had not had on hand for two weeks.) On 5/18/26 at 10:48 AM, V6 (Dietary Aide) stated the kitchen often ran out of hamburgers for resident substitutions. V5 (Food Service Director) stated the kitchen ran out of hamburgers for substitutions on Friday, 5/15/26. On 5/18/26 at 11:55 AM, R3 stated the facility used her privately purchased plant-based milk to serve to residents who required lactose free milk when the kitchen ran out of lactose free milk. On 5/18/26 at 12:25 PM, V12 (CNA) stated the facility usually ran out of R3's plant based milk, hamburgers, cottage cheese, sugar substitutes, and salad dressings. On 5/22/26 at 9:19 AM, R47 stated she was the last resident to receive a tray at meals and sometimes she did not even receive a meal tray during meals. R47 stated several times a week she did not receive items that were listed on the menu and suspected the facility ran out of food by the end of meal service. On 5/18/26 during resident interviews, R1, R4, R5, R9, R38, all expressed concerns regarding the quality of the food, and some residents expressed concerns about the facility ran out of food during meal service.On 5/19/26 at 10:08 AM, R42 expressed concerns that the facility was running out of food and stated he was not served items at meals that were listed on the menus.