STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555398	A. Building B. Wing	12/11/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Hayward Post Acute	25919 Gading Road Hayward, CA 94544

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, staff interview, and record review, the facility failed to store and prepare food in accordance with professional standards for safety when: 1. The kitchen refrigerator had packages of uncooked meat stored directly above fruit.2. Diet Aide (DA) 1 had uncovered facial hair while they prepared resident food. These failures had the potential for contamination of food resulting in food borne illness for the 88 residents who lived at the facility.During an observation on 12/8/25 at 9:30 a.m., in the kitchen, the refrigerator had uncooked turkey and beef stored directly over cantaloupes. During an observation on 12/8/25 at 12:53 p.m., in the kitchen, DA 1 had uncovered facial hair while DA 1 prepared resident sandwiches. During an interview on 12/11/25 at 2:21 p.m., with Registered Dietician (RD), RD stated uncooked meat should not have been stored over fruit and it was important to avoid cross contamination. RD stated DA 1 should have covered their facial hair when they prepared resident food and it was important to avoid food contamination. According to the 2022 Federal Food Code, food is to be protected from cross contamination by separating raw animal foods during storage from fruits and vegetables before they are washed. During a review of the facility's policy and procedure (P&P) titled, Staff Attire, revised January 2025, the P&P indicated, All staff will have their hair off the shoulders, confined in a hair net or cap, and facial hair properly restrained.

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0561 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to and the facility must promote and facilitate resident self-determination through support of resident choice. Based on observation, interview, and record review, the facility failed to allow one out of 22 Residents (Resident 11) to exercise their right to self-determination when they were not provided nutrition in accordance with their preferences. This failure had the potential to result in Resident 11 feeling upset and disrespected. During a review of Resident 11's admission Record, printed 12/9/25, the record indicated Resident 11 was admitted to the facility in January 2025 with a diagnosis of moderate protein-calorie malnutrition. During a review of Resident 11's Brief Interview for Mental Status (BIMS, is a scoring system used to determine the resident's cognitive status regarding attention, orientation, and ability to register and recall information. A BIMS score of thirteen to fifteen is an indication of intact cognitive status.), dated 2/3/25, the record indicated Resident 11's BIMS score was 14. During a concurrent observation and interview on 12/8/25, at 12:43 p.m., with Resident 11, Resident 11's lunch tray was observed with mixed vegetables that included cauliflower. Resident 11 stated it made them upset, and they would not eat it. During a review of Resident 11's Lunch Meal Ticket, dated 12/8/25, the Meal Ticket indicated, Resident 11's Dislikes: . Cauliflower. During an interview on 12/8/25, at 12:54 p.m., with [NAME] (CK) 1, CK 1 stated Resident 11 should not have received mixed vegetables that had cauliflower, and it was a mistake. During an interview on 12/11/25, at 2:49 p.m., with Director of Nursing (DON), DON stated it was important to honor resident food choices so they could have eaten more, prevent weight loss and for resident happiness. During a review of Resident 11's Care Plan, Resident is at nutritional risk., printed 12/11/25, the Care Plan indicated, Honor food preferences within meal plan.