

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056415	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 02/22/2026
NAME OF PROVIDER OR SUPPLIER LYNWOOD POST ACUTE CARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 3611 EAST IMPERIAL HIGHWAY , LYNWOOD, California, 90262	
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F0000	INITIAL COMMENTS The following reflects the findings of the California Department of Public Health during the investigation of one complaint. Complaint Number: 2784560. The inspection was limited to the specific complaint investigated and does not represent the findings of a full inspection of the facility. One deficiency was issued for complaint number 2784560 at F812.	F0000		
F0812 SS = D	Food Procurement,Store/Prepare/Serve-Sanitary CFR(s): 483.60(i)(1)(2) §483.60(i) Food safety requirements. The facility must - §483.60(i)(1) - Procure food from sources approved or considered satisfactory by federal, state or local authorities. (i) This may include food items obtained directly from local producers, subject to applicable State and local laws or regulations. (ii) This provision does not prohibit or prevent facilities from using produce grown in facility gardens, subject to compliance with applicable safe growing and food-handling practices. (iii) This provision does not preclude residents from consuming foods not procured by the facility. §483.60(i)(2) - Store, prepare, distribute and serve food in accordance with professional standards for food service safety. This REQUIREMENT is NOT MET as evidenced by:	F0812	F812 Food Procurement, Store/Prepare/Serve-Sanitary 483.60 (i)(1)(2) Submission of this Plan of Correction by Lynwood Post Acute Care Center is not a legal admission that a deficiency exists or that this statement of deficiencies was correctly cited. In addition, preparation and submission of this POC does not constitute an admission or agreement of any kind by the facility of the truth of any facts set forth in this allegation by the Survey Agency. Corrective Actions taken for those residents alleged to have been affected by the deficient practice are: <ul style="list-style-type: none"> R1 is no longer a resident of this facility, and therefore no further action can be taken. Actions taken to identify other residents that may have the	

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 reverse for further 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 Administrator	(X6) DATE 3/13/26
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F0812 SS = D	<p>Continued from page 1</p> <p>Based on observation, interview and record review the facility failed to provide one of three sampled residents (Resident 1) palatable food that was pleasant to taste, not overcooked, and appetizing.</p> <p>These failures placed Resident 1 at risk for missed meals and had the potential for weight loss.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record Face Sheet (front page of the chart that contains a summary of basic information about the resident), the Face sheet indicated Resident 1 was admitted to facility on 5/13/2026 with diagnoses including iron deficiency anemia (low iron in the blood), hypothyroidism (a common condition where the thyroid gland fails to produce enough essential hormones slowing down the body's metabolism), and hyperparathyroidism (an overactive parathyroid gland producing excess parathyroid hormone, causing high blood calcium).</p> <p>During a review of Resident 1's History and Physical (H&P), dated 6/3/2025, the H&P indicated Resident 1 had the fluctuating capacity to understand and make decisions.</p> <p>During a review of Resident 1's Minimum Data Set (MDS-a resident assessment tool) dated 2/9/2026, the MDS indicated Resident 1 was independent with eating. The MDS indicated Resident 1 needed setup or clean-up assistance with oral hygiene, sitting, standing and transferring.</p> <p>During a review of Resident 1's Care Plan, dated 5/18/2025, the care plan indicated, Resident 1 had nutritional and hydration problems related to the potential for variable intake of meals related to medical condition, history of (protein calorie malnutrition ([PCM] health problems that may arise due to lack of nutrients), and multiple food allergies". The care plan indicated Resident 1 had was limited in food choices and will only eat requested items. The care plan indicated Resident 1 had multiple food complaints and would receive specific food items as requested.</p> <p>During a review of Resident 1's Order Summary, dated 8/20/2025, the Order Summary indicated Resident 1 had an order for a regular diet, regular texture, thin consistency, double portion fish or chicken ...and eggs at breakfast.</p> <p>During a concurrent observation on 2/21/2026 at 9:52 AM</p>	F0812	<p>potential to be affected by the same deficient practice:</p> <ul style="list-style-type: none"> All residents have the potential to be affected by the alleged deficient practice. <p>The measures the facility will take to ensure the problem will be corrected and will not recur.</p> <ul style="list-style-type: none"> On 3/11/26 DSD in-serviced all staff on reporting to Dietary Supervisor if an incorrect meal is served, or if a meal does not appear palatable so that a new food tray can be issued. On 3/11/26 Dietary supervisor in-serviced kitchen staff on the procedure for cooking hard boiled eggs On 3/11/26 Dietary Supervisor in-serviced kitchen staff on the procedure for cooking broccoli On 3/11/26 dietary Supervisor in-serviced kitchen staff on the 	

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F0812 SS = D	<p>Continued from page 2 with Cook 1 (CK) 1, in the facility's kitchen a container of strawberries was on the counter with an open date, dated 2/18/2026.</p> <p>During an interview on 2/21/2026 at 11:02 a.m. with Resident 1, Resident 1 stated she received hard boiled eggs that are burnt daily. Resident 1 stated food comes burnt, like chicken broccoli, and the strawberries are old and moldy. Resident 1 stated when she sends back the tray and requests another meal the kitchen sends a new tray with everything over cooked.</p> <p>During a concurrent observation and interview on 2/21/2026 at 12:17 p.m. with Resident 1 in Resident 1's room, Resident 1 was observed eating strawberries and broccoli. Resident 1 used her fork to press down on the broccoli, and the broccoli was mushy and overcooked. Resident 1 stated the strawberries appeared to be alright, but when she turned them around in the container, they were old.</p> <p>During a concurrent observation and interview on 2/22/2026 at 8:02 a.m. with Resident 1, Resident 1 was observed with a hard boil egg on her bedside table. Resident 1 stated the food was not good this morning. Resident 1 peeled her hardboiled egg that was green in color, rubbery and peeling in layers.</p> <p>During an interview on 2/22/26 at 9:05 a.m. with CK 2, CK 2 stated he prepared breakfast today and cooked the hardboiled eggs today by placing the eggs in boiling water for 15 minutes. CK 2 stated after the eggs boiled for 15 minutes, he placed the eggs in a warmer at 5:55 a.m. and served the eggs to the residents at 7 a.m. CK 2 stated he did not follow any instructions or recipes on how to cook hardboiled eggs. CK 2 stated he was shown the egg Resident 1 was served for breakfast and it looked oxidized (causing changes like discoloration or degradation) and firmer than expected. CK 2 stated residents would be disappointed, possible angry and would not like the food, and had the potential to be undernourished with possible weight loss when the food is served overcooked.</p> <p>During an interview on 2/22/2026 at 9:32 a.m. with the Dietary Supervisor, the DS stated Resident 1 stated the kitchen is sending out the wrong and bad things. The DS agreed that the broccoli served on 2/21/20226 for lunch was overcooked and the eggs served for breakfast this morning were overcooked as well. The DS stated she will work with dietary staff for improvement of the meals being served.</p> <p>During a review of the facility's policy and procedure</p>	F0812	<p>procedure for discarding spoiled foods (strawberries)</p> <ul style="list-style-type: none"> On 3/11/26 Dietary Supervisor in-serviced kitchen staff on P&P titled, "Food and Nutrition Services" <p>Quality Assurance plans to monitor facility performance to make sure corrections are achieved.</p> <ul style="list-style-type: none"> A QA/QI Tool was developed and initiated by Dietary Supervisor/Designee to ensure the process for the following: <ul style="list-style-type: none"> Ensuring that the food is palatable, pleasant to taste, not overcooked and appetizing. QA will be completed daily for 2 weeks. 	

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F0812 SS = D	Continued from page 3 (P&P), titled "Food and Nutrition Services," date revised 10/2017, the P&P indicated "Each resident is provided with a nourishing, palatable, well-balanced diet that meets his or her daily nutritional and special dietary needs, taking into consideration the preferences of each resident..." The P&P indicated "Food and nutrition services staff will inspect food trays to ensure that the correct meal is provided to each resident, the food appears palatable and attractive, and it is served at a safe and appetizing temperature. If an incorrect meal is provided to a resident, or a meal does not appear palatable, nursing staff will report it to the food service manager so that a new food tray can be issued. Foods that are left without a source of heat (for hot foods) or refrigeration (for cold foods) longer than 2 hours will be discarded." During a review of the facility's P&P titled "Hard Boiled Egg," dated 2026, the P&P indicated "...COOK EGGS IN BOILING WATER FOR 10-15 MINUTES. INTERNAL TEMPERATURE OF COOKED EGGS MUST REGISTER AT LEAST 155°F AT COMPLETION OF COOKING. QUICK-CHILL USING THE HACCP CHART. PEEL EGGS; COVER AND REFRIGERATE UNTIL NEEDED (41°F, 1 DAY)..."	F0812	<ul style="list-style-type: none"> • QA will be completed 3 times a week for 2 weeks. • QA will be completed random check for 2 weeks. • The Dietary Supervisor or Designee will be responsible for ensuring the completion of this tool. The results of the monitoring completed under this Plan of Correction will be submitted monthly to the QAPI committee for review and further follow-up. The QA/QI tool will continue until the QAPI committee deems it is no longer necessary. <p>Completion Date: 3/12/2026</p>	