

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 100404809

Report Date: 02/26/2026

Date Signed: 03/02/2026 11:34:07 AM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION FRESNO RO, 1314 E SHAW AVE FRESNO, CA 93710
FACILITY EVALUATION REPORT	

FACILITY NAME: PALM VILLAGE RETIREMENT COMMUNITY	FACILITY NUMBER: 100404809
ADMINISTRATOR/JIM HIGBEE	FACILITY TYPE: 741
DIRECTOR:	
ADDRESS: 703 WEST HERBERT AVENUE	TELEPHONE: (559) 638-6933
CITY: REEDLEY	STATE: CA
CAPACITY: 262	ZIP CODE: 93654
TYPE OF VISIT: Required - 1 Year	CENSUS: 63
	DATE: 02/26/2026
	UNANNOUNCED TIME VISIT/INSPECTION
	BEGAN: 01:30 PM
MET WITH: Administrator: Karely Alcantar	TIME VISIT/INSPECTION
	COMPLETED: 07:30 PM

NARRATIVE

1 On 2/26/2026 Licensing Program Analyst (LPA) J. Leffall arrived unannounced for an annual inspection
2 visit. LPA was met by Administrator, Karley Alcantar. LPA introduced self, explained reason for visit and
3 was permitted entry into the facility.
4
5 Facility has sufficient furnishings inside and outside for resident use. The facility was observed to be at a
6 comfortable temperature, clean, and no passageway obstructions or fire hazards. LPA toured a sample
7 of resident bedrooms in Assisted Living and Memory Care. Also, LPA observed 1 independent resident's
8 apartment. LPA toured facility library, activity room, and moving room. Residents' rooms were toured and
9 observed with adequately furnished with bed, dresser, and adequate lightning. Residents were observed
10 seating in common areas and dining areas. Facility is equipped with pull stations and fire sprinklers
11 throughout facility. Fire extinguisher was observed throughout the facility with a service date of: 3/5/25.
12 LPA toured kitchen. An adequate supply of perishable and non-perishable food was observed to be
13 properly stored in freezer, refrigerator, and pantry. Temperature for refrigerator observed maintained at
14 38 degrees F and freezer maintained at -4 degrees F.
15
16 LPA observed washer and dryer operational in laundry room. Bathrooms hot water temperature was
17 tested and within range between 109.5 to 117.1 degrees F. LPA observed securely fastened grab bars
18 and non-skid surfaces in shower. Outside was toured and observed adequate outdoor seatings available
19 for residents. A sample of resident and staff files were reviewed to have all the required documents.
20 Medications were stored in a locked medication room in a medication cart. MARs and medications were
21 reviewed. First Aide kit observed to have all of the required items.
22
23 Continued on page 809-C.....
24
25

NAME OF LICENSING PROGRAM MANAGER: See Moua
NAME OF LICENSING PROGRAM ANALYST: Jacques Leffall

LICENSING PROGRAM ANALYST SIGNATURE:


DATE: 02/26/2026

I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE:


DATE: 02/26/2026

This report must be available at Child Care and Group Home facilities for public review for 3 years.

FACILITY EVALUATION REPORT California law requires a public report of each licensing visit/inspection. This report is a record for the facility and the licensing agency. This report is available for public review; therefore, care is taken not to disclose personal or confidential information. Inquiries concerning the location, maintenance, and contents of these reports may be directed to the Licensing Program Analyst or Regional Office whose address and telephone number are listed on the front of this form.

DEFICIENCIES A deficiency is an instance of noncompliance with licensing requirements, including applicable statutes, regulations, interim licensing standards, operating standards, and written directives. Applicants/ licensees must be notified in writing of all licensing deficiencies. Deficiencies are listed on the left side of this form, and the applicable licensing requirement upon which the deficiency is identified. There are two types of deficiencies:

- Type A deficiencies are violations of licensing requirements that, if not corrected, have a direct and immediate risk to the health, safety, or personal rights of persons in care.
- Type B deficiencies are violations of licensing requirements that, without correction, could become a risk to the health, safety, or personal rights of persons in care, a recordkeeping violation that could impact the care of said persons and/or protection of their resources, or a violation that could impact those services required to meet the needs of persons in care.

PLANS OF CORRECTION (POCs) The licensing agency is required to establish a reasonable length of time to correct a deficiency. In order to set the time, the licensing agency must take into consideration the seriousness of the violation, the number of persons in care involved, and the availability of equipment and personnel necessary to correct the violation. Applicants/licensees are requested to provide a specific plan for each violation on the right side of the form across from each deficiency. The more specific the plan, the less chance exists for any misunderstanding in setting time limits and reviewing corrections. The applicant/licensee who encounters problems beyond their control in completing the corrections within the specified time frame may request and may be granted an extension of the correction due date by the licensing agency.

CORRECTION NOTIFICATION The applicant/licensee is responsible for completing all corrections and promptly notifying the licensing agency of corrections. Applicants/licensees are advised to keep a dated copy of any correspondence sent to the licensing agency concerning corrections, or if corrections are telephoned to the licensing agency, the date, person contacted, and information given.

CIVIL PENALTIES The licensing agency is required by law to issue a Penalty Notice, when applicable, to all facilities holding a license issued by the licensing agency, or subject to licensure, except Certified Family Homes, Resource Families, and Foster Family Homes, or any governmental entity.

PENALTY NOTICE GIVEN The statement concerning civil penalties serves as a penalty notice on this Licensing Report and failure to correct cited licensing deficiencies will result in civil penalties. Applicants/ licensees are required to pay civil penalties when administrative appeals have been exhausted and in accordance with any payment arrangements made with the licensing agency.

APPEAL RIGHTS The applicant/licensee has a right without prejudice to discuss any disagreement in this report with the licensing agency concerning the proper application of licensing requirements. The applicant/ licensee may request a formal review by the licensing agency to amend or dismiss the notice of deficiency and/ or civil penalty. Requests for review shall be made in writing within 15 business days of receipt of a deficiency notification or civil penalty assessment. Licensing deficiencies may be appealed pursuant to the procedures in the LIC 9058 Applicant/Licensee Rights.

AGENCY REVIEW The licensing agency review of an appeal may be conducted based upon information provided in writing by the applicant/licensee. The applicant/licensee may request an office meeting to provide additional information. The applicant/licensee will be notified in writing of the results of the agency review within 60 business days of the date when all necessary information has been provided to the licensing agency.

EMAIL REQUIREMENT Adult Community Care Facilities, Residential Care Facilities for the Chronically Ill, and Residential Care Facilities for the Elderly are required to provide and maintain an active email address of record with the licensing agency.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY FACILITY EVALUATION REPORT (Cont)	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION FRESNO RO, 1314 E SHAW AVE FRESNO, CA 93710
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FACILITY NAME: PALM VILLAGE RETIREMENT COMMUNITY

FACILITY NUMBER: 100404809

VISIT DATE: 02/26/2026

NARRATIVE	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32	<p>No deficiencies issued during this inspection.</p> <p>Exit interview was conducted. The following documents are requested and submitted to Fresno CCL by: 3/12/26. LPA received a copy of Lic 500. The following updated forms were requested: Lic 308, Lic 309, Lic 610E, current liability insurance, and Administrator Certificate. A copy of this report was provided to Administrator, whose signature confirm receipt of this report.</p> <p>Due to facility size and time frames, LPA will return for an annual continuation visit. Exit interview completed with Administrator. A copy of this report, deficiencies and appeal rights were provided.</p>

NAME OF LICENSING PROGRAM MANAGER: See Moua NAME OF LICENSING PROGRAM ANALYST: Jacques Leffall LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 02/26/2026
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FACILITY REPRESENTATIVE SIGNATURE:	DATE: 02/26/2026
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