

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 107209324
Report Date: 05/06/2026
Date Signed: 05/06/2026 05:26:30 PM

Document Has Been Signed on 05/06/2026 05:26 PM - It Cannot Be Edited

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: GROVE, THE		FACILITY NUMBER:	107209324
ADMINISTRATOR/BREWER, NORSELL DIRECTOR:		FACILITY TYPE:	740
ADDRESS: 7444 NORTH CEDAR AVE		TELEPHONE:	(801) 815-0808
CITY: FRESNO	STATE: CA	ZIP CODE:	93720
CAPACITY: 130	CENSUS: 78	DATE:	05/06/2026
TYPE OF VISIT: Required - 1 Year	UNANNOUNCED	TIME VISIT/ INSPECTION	09:30 AM
MET WITH: Administrator - Norshell Brewer		BEGAN: TIME VISIT/ INSPECTION	05:30 PM
		COMPLETED:	

NARRATIVE	
1	On 05/06/26, Licensing Program Analysts (LPAs) M. Vega arrived to the facility unannounced to conduct
2	the required annual inspection, LPAs were greeted by Administrator - Norshell Brewer, stated the
3	purpose of the visit and were allowed entry into the facility.
4	
5	LPAs toured the facility inside and out with Administrator. LPAs observed the facility to be 2 stories with
6	63 rooms in Assisted Living and 13 rooms in the Memory Care unit named "Journey". Memory Care unit
7	was observed to have a 15 second delayed egress system with a keypad and alarm. LPAs observed a
8	hydro therapeutic tub located on the first floor in journey room and another on the second floor. Room
9	137 (1st floor) restroom water temperature reading was 115.3 degrees F and room 219 (2nd floor)
10	restroom water temperature reading was 114.0 degrees F.
11	
12	Bedrooms were observed to have the required lighting and furnishings and were free from odor and any
13	passageway obstruction / fire hazards. Facility temperatures throughout the facility were observed to be
14	comfortable. Cleaning supplies were observed to be locked in janitorial closet located next to laundry
15	room.
16	
17	LPA toured the kitchen observed the required 7-day supply of Non-perishable food and 2- day supply of
18	fresh perishables to be properly stored. Menus for the facility were observed. LPA toured the kitchen and
19	dining area which was being cleaned and prepped for dinner. LPAs observed a daily special and weekly
20	menus posted at the entrance of the dining area. Facility has an Executive chef and a e-menu system
21	that tracks daily meals and special diets for each resident in care.
22	
23	Continued on LIC 809C
24	
25	

NAME OF LICENSING PROGRAM MANAGER: Alexandria Walton	
NAME OF LICENSING PROGRAM ANALYST: Martin Vega	

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 05/06/2026

I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.**FACILITY REPRESENTATIVE SIGNATURE:**

DATE: 05/06/2026

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.

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

Page: 2 of 3

FACILITY NAME: GROVE, THE **FACILITY NUMBER:** 107209324
VISIT DATE: 05/06/2026

NAME OF LICENSING PROGRAM MANAGER: Alexandria Walton	
NAME OF LICENSING PROGRAM ANALYST: Martin Vega	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 05/06/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 05/06/2026