

# Department of SOCIAL SERVICES

Community Care Licensing

## FACILITY EVALUATION REPORT

Facility Number: 191221839

Report Date: 01/14/2026

Date Signed: 01/14/2026 03:06:31 PM

Document Has Been Signed on 01/14/2026 03:06 PM - It Cannot Be Edited

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION WOODLAND HILLS S.RO, 21731 VENTURA BLVD., STE. 250 WOODLAND HILLS, CA 91364
<b>FACILITY EVALUATION REPORT</b>	

FACILITY NAME:	BROADVIEW RESIDENTIAL CARE CENTER	FACILITY NUMBER:	191221839
ADMINISTRATOR/DIRECTOR:	BETSY K DAVIS	FACILITY TYPE:	740
ADDRESS:	535 WEST BROADWAY	TELEPHONE:	(818) 246-4951
CITY:	GLENDALE	STATE:	CA
CAPACITY:	180	ZIP CODE:	91204
TYPE OF VISIT:	Required - 1 Year	CENSUS:	75
		DATE:	01/14/2026
		UNANNOUNCED TIME VISIT/INSPECTION BEGAN:	09:30 AM
MET WITH:	Administrator, Betsy Davis	TIME VISIT/INSPECTION COMPLETED:	03:20 PM

### NARRATIVE

1 Licensing Program Analyst (LPA) Antonia Alvizar-Ettima conducted an unannounced Required One (1)  
2 year inspection visit at this facility today. LPA met with Administrator and explained the reason for the  
3 visit. LPA utilized the Compliance and Regulatory Enforcement (CARE) tools.  
4

5 At 9:30a.m. LPA and Administrator toured the physical plant areas inside and outside to ensure there  
6 are no health and safety hazards, and facility is in compliance with Title 22 Regulations. The facility is  
7 fire cleared for one hundred eighty (180) residents of which sixty-five (65) may be non-ambulatory and  
8 has a hospice waiver for two (02). The facility is currently occupying seventy-five (75) residents. The  
9 facility is a two (02) story building in a residential community. The 1st floor consists of the following: a  
10 lobby area, administrative offices, dining area, activities room, kitchen, garden lounge, beauty shop,  
11 game room, tea room, indoor gardens with water fountains, TV areas, outdoor gardens, and residents'  
12 rooms. The 2nd floor consists of activity area, TV areas, library lounge, Zen room, snack room, large  
13 lounge area, and residents' rooms. The passageways and walkways are free of hazards and free from  
14 obstruction.  
15

16 The facility maintains a comfortable temperature at 74°F. There are carbon monoxide detectors installed  
17 in the facility. Fire extinguishers are located all throughout the facility and last inspected on 05/13/2025.  
18 The fire extinguishers were observed to be fully charged and in compliance. The facility is equipped with  
19 emergency fire sprinkler system. Facility Fire drill was last conducted on 12/02/2025.  
20

21 There is only one entrance being utilized at the facility, all required posters were posted in the hallway.  
22 During today's visit, in addition to the physical plant inspection LPA interviewed seven (07) out of  
23 seventy-five (75) residents.  
24

25 Cont. on LIC 809-C

**NAME OF LICENSING PROGRAM MANAGER:** Naira Margaryan  
**NAME OF LICENSING PROGRAM ANALYST:** Antonia Alvizar-Ettima

**LICENSING PROGRAM ANALYST SIGNATURE:**


DATE: 01/14/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**


DATE: 01/14/2026

**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  <b>FACILITY EVALUATION REPORT (Cont)</b>	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION WOODLAND HILLS S.RO, 21731 VENTURA BLVD., STE. 250 WOODLAND HILLS, CA 91364
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**FACILITY NAME:** BROADVIEW RESIDENTIAL CARE CENTER

**FACILITY NUMBER:** 191221839

**VISIT DATE:** 01/14/2026

**NARRATIVE**

1 Cont. from LIC 809  
 2  
 3 A tour of the physical plant was conducted, and the following was noted:  
 4  
 5 **Kitchen:** The kitchen appliances and fixtures were functional. Food supplies was sufficient amount for  
 6 two (02) days of perishable and seven (07) days of non-perishable was stored in covered containers at  
 7 the appropriate temperatures. Knives and sharp objects were observed to be locked and inaccessible to  
 8 residents. Storage areas for cleaning solutions, toxics, knives, and hazardous items were secured and  
 9 made inaccessible to residents. Walls, ceiling, and floor is in good repair, ample supply of dishes, cups,  
 10 glasses and utensils for the current census. **Dining Area:** The dining area was observed to be neat,  
 11 clean and in proper order. Walls, ceiling, tables, chairs and floor is in good repair. **Laundry rooms:**  
 12 There are laundry rooms located on each floor of the building. All toxins such as laundry detergents and  
 13 cleaning agents were observed to be inaccessible to the residents in laundry rooms. **Medication:**  
 14 Medications are centrally stored in the locked medication stations located on the first floor. The  
 15 medications were observed to be locked and inaccessible to residents. There are multiple complete first  
 16 aid kits in the facility. **Bedrooms:** LPA randomly selected resident's apartments on each floor. Resident  
 17 bedrooms were properly furnished with appropriate bedding and linens with sufficient lighting. Hygiene  
 18 supplies for residents were observed, and hallways/passageways are lit. There were enough clean linen  
 19 available in the closets. Each resident's apartment has their own closet and restroom. **Bathrooms:** LPA  
 20 randomly selected residents' bathrooms on each floor. The bathrooms were observed to be clean  
 21 properly supplied, functional fixtures and appropriate grab bars in showers and toilets. The hot water  
 22 temperature measure range was between 110.1 – 115.1 degrees Fahrenheit within Title 22 Regulations.  
 23 Towels and washcloths are not shared. **Common Areas:** LPA observed common areas on every floor.  
 24 All furnishings are in good repair, lighting is good, walls, ceiling and floors are also in good repair.  
 25 **Surrounding Grounds:** The front grounds of the facility are well landscaped with a waterfall with Koi  
 26 fish and turtles which are enclosed. All passageways were observed to be clear from obstruction.  
 27  
 28 Due to time constraints, LPA had to terminate the visit and will return on a later date to complete the  
 29 Required - 1 Year inspection by reviewing medication, residents and staff records.  
 30  
 31 No health and safety issues noted at the time of this visit.  
 32  
 An exit interview was conducted. A copy of this report was provided to the Administrator.

<b>NAME OF LICENSING PROGRAM MANAGER:</b> Naira Margaryan	
<b>NAME OF LICENSING PROGRAM ANALYST:</b> Antonia Alvizar-Ettima	
<b>LICENSING PROGRAM ANALYST SIGNATURE:</b>	<b>DATE:</b> 01/14/2026

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

<b>FACILITY REPRESENTATIVE SIGNATURE:</b>	<b>DATE:</b> 01/14/2026
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