

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 191603774
Report Date: 03/24/2026
Date Signed: 03/24/2026 03:16:42 PM

Document Has Been Signed on 03/24/2026 03:16 PM - It Cannot Be Edited

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION EL SEGUNDO ASC, 400 CONTINENTAL BLVD, STE 340 EL SEGUNDO, CA 90245	
FACILITY EVALUATION REPORT			
FACILITY NAME: CANTERBURY, THE		FACILITY NUMBER:	191603774
ADMINISTRATOR/DAVE HONE		FACILITY TYPE:	741
DIRECTOR:		TELEPHONE:	(310) 541-2410
ADDRESS: 5801 CRESTRIDGE RD	STATE: CA	ZIP CODE:	90275
CITY: RANCHO PALOS VERDES	CENSUS: 138	DATE:	03/24/2026
CAPACITY: 187;		TIME VISIT/	
187		INSPECTION	09:47 AM
TYPE OF VISIT: Required - 1 Year	UNANNOUNCED	BEGAN:	
		TIME VISIT/	
MET WITH: Executive Director Dave Hone		INSPECTION	03:23 PM
		COMPLETED:	
NARRATIVE			
1	On 03/24/26 Licensing Program Analyst's (LPA's) Villegas and Day conducted an unannounced annual		
2	required visit using the CARE Inspection Tool. LPA's met with Executive Director David Hone as the		
3	purpose of today's visit was explained. The facility is licensed to serve a maximum 187 non-ambulatory		
4	residents of which 15 may be bedridden. Bedridden only in building E, 2nd floor. Ages 60 and above.		
5	There is an approved hospice for 25 clients. First floor all delayed egress memory care unit. Facility		
6	annual fees info was provided (PIN # 080063 amount due \$2,310 Due date: 03/31/26), liability insurance		
7	is active (Caring Communities Shared Services CCRRG-0032-26 exp: 01/01/2027). The facilities		
8	Administrator certificate for is current (7014902740 exp: 2/26/28)		
9			
10	The facility consists of 5 buildings and have a Memory Care Unit, Assisted living, and independent living.		
11	The facility is in a residential neighborhood. It has 98 independent living rooms, 18 assisted living		
12	rooms, 9 memory care rooms, 28 skilled nursing beds, 12 common bathrooms, 2 laundry areas,		
13	Kitchen, kitchenettes & dining area, activity area, lounges, and an outdoor shaded patio areas with		
14	tables and chairs. 14 bedrooms were inspected. Beds and bedding supplies were in good condition,		
15	adequate lighting was provided, and storage for the resident's personal belongings was observed. Bed		
16	linens, comforters, and bath towels were stocked during the visit. Bathrooms were operational, storage		
17	areas for personal hygiene, cleaning supplies, toxins, and sharps objects were stored and not		
18	accessible to residents. The kitchen was inspected, and 2 days supplies perishable, and 7 days non-		
19	perishable food was maintained. The water temperature		
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NAME OF LICENSING PROGRAM MANAGER: Janae Hammond			

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 03/24/2026

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 03/24/2026

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

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

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FACILITY EVALUATION REPORT (Cont)	COMMUNITY CARE LICENSING DIVISION
	EL SEGUNDO ASC, 400 CONTINENTAL BLVD, STE 340
	EL SEGUNDO, CA 90245

FACILITY NAME: CANTERBURY, THE	FACILITY NUMBER: 191603774
	VISIT DATE: 03/24/2026

NARRATIVE	
1	measured between 110 F- 113F.. Fire extinguishers were charged, and smoke detectors and carbon monoxide were operable in each resident's room. Official inspection by the Los Angeles Fire Department was on 11/20/25. LPA conducted a review of (10) resident records, (10) Medication Records Administration (MAR), and (6) personnel records. No discrepancies were observed during today's visit. Exit interview conducted, and a copy of this report was provided.
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NAME OF LICENSING PROGRAM MANAGER: Janae Hammond	
NAME OF LICENSING PROGRAM ANALYST: Lizeth Villegas	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 03/24/2026
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