

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 197609961

Report Date: 03/18/2026

Date Signed: 03/18/2026 01:11:43 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 21731 VENTURA BLVD., STE. 250 WOODLAND HILLS, CA 91364
FACILITY EVALUATION REPORT	

FACILITY NAME: A CARING TOUCH BOARD AND CARE	FACILITY NUMBER: 197609961
ADMINISTRATOR/PAIGE ESQUIVEL	FACILITY TYPE: 740
DIRECTOR:	
ADDRESS: 10348 LARAMIE STREET	TELEPHONE: (818) 477-2990
CITY: CHATSWORTH	STATE: CA
CAPACITY: 6	ZIP CODE: 91311
TYPE OF VISIT: Required - 1 Year	CENSUS: 6
	DATE: 03/18/2026
	UNANNOUNCED TIME VISIT/INSPECTION
	BEGAN: 10:15 AM
MET WITH: Paige Esquivel, Administrator	TIME VISIT/INSPECTION
	COMPLETED: 01:00 PM

NARRATIVE	
1	Licensing Program Analyst (LPA) Angela Panushkina conducted a Pre-Licensing Inspection and met
2	with the Administrator and explained the reason for the visit.
3	
4	A tour of the physical plant was initiated at 10:20am and the following were observed:
5	
6	The facility maintains a comfortable temperature at 70°F.
7	
8	KITCHEN: The facility has a kitchen area that is equipped with a refrigerator, microwave oven and sink.
9	LPA observed there to be sufficient stock of one-week perishable foods and two-day non-perishable
10	foods. Frozen foods are properly wrapped and stored appropriately. Food storage and preparation areas
11	are clean and inaccessible to pests. The fire extinguisher is located in the kitchen and was last serviced
12	on 07/10/2025.
13	
14	BEDROOMS: The facility has six (6) bedrooms designated for residents' use. All bedrooms are
15	furnished with beds, dressers and required bedding and linen. The bedrooms have sufficient closet
16	space and lighting. Facility also has an awake staff at night.
17	
18	BATHROOMS: The facility has three (3) bathrooms. LPA observed all bathrooms have non-skid mat,
19	soap, paper towels and hand washing signs. Extra towels and linens were readily available.
20	
21	MEDICATION ROOM: At approximately 10:30am, LPA observed medications are centrally stored and
22	locked, in the kitchen cabinet, and inaccessible to residents in care. The first-aid kit has been inspected
23	which has at least the following: tweezers, scissors, antiseptic, bandages, gauze, thermometer;
24	including a current First Aid manual.
25	Continue on LIC809-C

NAME OF LICENSING PROGRAM MANAGER: Nichelle Gillyard
NAME OF LICENSING PROGRAM ANALYST: Angela Panushkina

LICENSING PROGRAM ANALYST SIGNATURE:


DATE: 03/18/2026

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

FACILITY REPRESENTATIVE SIGNATURE:


DATE: 03/18/2026

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 CCLD Regional Office, 21731 VENTURA BLVD., STE. 250 WOODLAND HILLS, CA 91364
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FACILITY NAME: A CARING TOUCH BOARD AND CARE

FACILITY NUMBER: 197609961

VISIT DATE: 03/18/2026

NARRATIVE	
1	LAUNDRY ROOM: The laundry room is located by the garage. The washer/dryer appears to be in good
2	condition. Laundry supplies are kept inaccessible when not in use with supervision.
3	
4	COMMON AREAS: These include a dining area and a living room. The Common areas are furnished
5	with adequate furniture to accommodate a maximum capacity of six (6) residents. At 10:40am, smoke
6	and carbon monoxide detectors were tested and observed to be operable. There were no visible
7	immediate hazards.
8	
9	SURROUNDING GROUNDS: At approximately 10:45am LPA toured the outside area of the facility. LPA
10	observed appropriate outdoor furniture, with a covered shaded area for residents. LPA discussed the
11	importance of maintaining care and supervision to meet the needs of clients. There are no bodies of
12	water.
13	
14	Between 11:00am to 12:30pm, LPA reviewed records of six (6) residents and three (3) staff. Resident
15	and staff records appeared to be complete and updated. LPA observed Administrator certificated
16	renewed on 11/30/2025 with an expiration date of 11/29/2027. LPA collected Certificate of Liability
17	Insurance and LIC500.
18	
19	No citations were issued during this visit.
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21	Exit interview conducted and copy of this report signed and delivered.
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NAME OF LICENSING PROGRAM MANAGER: Nichelle Gillyard NAME OF LICENSING PROGRAM ANALYST: Angela Panushkina LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 03/18/2026
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FACILITY REPRESENTATIVE SIGNATURE:	DATE: 03/18/2026
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