

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198203965
Report Date: 05/30/2025
Date Signed: 05/30/2025 05:34:23 PM

Document Has Been Signed on 05/30/2025 05:34 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, 1000 CORPORATE DR #100 MONTEREY PARK, CA 91754
FACILITY EVALUATION REPORT	

FACILITY NAME: VILLA CHRISTA	FACILITY NUMBER: 198203965
ADMINISTRATOR/ARLENE FELICIANO DIRECTOR:	FACILITY TYPE: 740
ADDRESS: 16421 CHANERA AVE	TELEPHONE: (310) 719-8997
CITY: TORRANCE	STATE: CA ZIP CODE: 90504
CAPACITY: 6	CENSUS: 5 DATE: 05/30/2025
TYPE OF VISIT: Required - 1 Year	UNANNOUNCED TIME VISIT/ INSPECTION 01:40 PM
MET WITH:	BEGAN: TIME VISIT/ INSPECTION 05:00 PM COMPLETED:

NARRATIVE	
1	On 05/20/2025, Licensing Program Analyst (LPA), Wendy Gibbs, conducted an unannounced required
2	Annual Visit using the CARE Inspection Tool. LPA met with Administrator, Arlene Feliciano, and the
3	purpose of today's visit was explained. LPA was granted entry into the facility.
4	The facility is licensed to serve six (6) non-ambulatory residents ages 60 and above, with an approved
5	hospice waiver for one (1) resident. There are currently five (5) residents residing in the facility, one (1)
6	resident is receiving hospice care.
7	Physical Plant/Structure The facility is a single-story structure in a residential neighborhood. It consists
8	of the following: five (5) resident rooms, a staff room, two (2) bathrooms, living area, dining area,
9	kitchen, attached garage, and an outside shaded patio area. All walkways around the outside of facility
10	were observed clean, clear, and free of hazards, obstructions, and debris. All safety handrails on the
11	ramps and stairs are securely fastened. LPA did not observe any bodies of water on the premises.
12	Bedrooms LPA inspected all bedroom and found them to be clean and in good repair. LPA observed all
13	bedrooms have the required furniture including a bed(s), dresser(s), nightstand(s), chair(s), ample
14	storage space for resident's personal belongings, and ample lighting. LPA observed all bed have the
15	required linens including a mattress cover, fitted sheets, blanket, comforter, and pillow. LPA observed an
16	ample supply of linens in good repair, stored in a cabinet in the hallway.
17	Bathrooms LPA inspected all bathrooms and found them to be within Title 22 regulation and were
18	operable. Showers were observed clean, clear and free of mildew and/or mold. The bathrooms have
19	secured safety handrails. LPA observed showers have shower chairs and nonskid mats. LPA observed
20	an ample supply of hygiene products for residents inaccessible to residents. LPA observed an ample
21	supply of towels in good repair. The water temperature measured 105.9-degree and 107.5-degrees
22	Fahrenheit.
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NAME OF LICENSING PROGRAM MANAGER: Eva M Alvarez

NAME OF LICENSING PROGRAM ANALYST: Wendy Gibbs

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 05/30/2025

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 05/30/2025

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.

LIC809 (FAS) - (09/23)

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FACILITY EVALUATION REPORT (Cont)	

FACILITY NAME: VILLA CHRISTA

FACILITY NUMBER: 198203965

VISIT DATE: 05/30/2025

NARRATIVE	
1	Common Rooms LPA observed in the living room a large and small couch available for resident use.
2	LPA observed a sitting area with a large couch. LPA observed games and activities in a cabinet under
3	the television. LPA observed the dining room has a large table with chairs to accommodate all residents.
4	LPA observed the facility appropriately furnished during the time of visit. The facility was maintained at a
5	comfortable temperature. LPA observed a fireplace that is screened and inaccessible to residents. All
6	walkways and hallways inside the facility were observed clean, clear, and free of hazards and
7	obstructions.
8	Kitchen LPA inspected the kitchen and found it to be clean and sanitary. LPA observed all appliances
9	were operable and in good repair. LPA observed an ample supply of cookware, dishware, and cutleries.
10	LPA observed a 3-day supply of perishable foods, and a 7-day supply of non-perishable foods properly
11	packaged, labeled and dated. LPA observed sharps and knives secured in a locked cabinet in the
12	kitchen and are inaccessible to residents. LPA observed cleaning supplies secured in a locked cabinet
13	and are inaccessible to residents. The water temperature measured 106.7-degrees Fahrenheit.
14	Medications LPA observed medications secured in a locked cabinet in the kitchen. LPA observed
15	medications in their original packaging. LPA reviewed the medications and Medication Administration
16	Record (MAR) for five (5) residents and observed five out of five resident's medications are consistent
17	with properly documented records.
18	Files LPA reviewed the files for five (5) residents and observed five (5) out of five (5) residents records
19	contain the required documents. LPA reviewed the files for the Administrator, and two (2) staff and found
20	they contained the required documents, certification, and training. The Administrator Certificate is valid
21	till 04/03/2026. LPA informed Administrator Licensing Fees are due on 06/13/2025 and provided the PIN.
22	Safety LPA observed smoke and carbon monoxide detectors to be operable. LPA observed two (2) fully
23	charged fire extinguishers purchased on 04/25/2025. The last fire inspection by the Torrance Fire
24	Department was conducted on 04/22/2025. The last emergency drill was conducted on 03/10/2025. The
25	Emergency and Disaster Plan (LIC610) was last updated on 05/25/2025. LPA inspected the First Aid kit
26	and observed it had the required items and a manual. All exits are marked with an EXIT sign. All doors
27	exiting the facility have an alarm that sounds when the doors are open. LPA reviewed the Liability
28	insurance through Kinsale Insurance Company that is valid till 12/29/2025. The facility has a working
29	landline telephone. LPA observed all required postings posted in the facility.
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NAME OF LICENSING PROGRAM MANAGER: Eva M Alvarez
NAME OF LICENSING PROGRAM ANALYST: Wendy Gibbs
LICENSING PROGRAM ANALYST SIGNATURE:
DATE: 05/30/2025

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

FACILITY REPRESENTATIVE SIGNATURE:
DATE: 05/30/2025

LIC809 (FAS) - (06/04)

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION
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FACILITY EVALUATION REPORT (Cont)

EL SEGUNDO ASC, 1000 CORPORATE DR #100
MONTEREY PARK, CA 91754

FACILITY NAME: VILLA CHRISTA

FACILITY NUMBER: 198203965

VISIT DATE: 05/30/2025

NARRATIVE

1 **Infection Control** During the visit, LPA observed the facility's infection control practices. LPA observed
2 screening protocols for visitors, staff, and residents, and sanitizing stations in common areas and
3 restrooms. LPA observed the facility has a 30-day supply of Personal Protective Equipment (PPE). All
4 mandated inspection control posters were posted.
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6 LPA did not observe or cite any deficiencies.
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8 An exit interview was conducted with Administrator, Arlene Feliciano and a copy of this report was
9 provided.
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