

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198320032
Report Date: 07/20/2021
Date Signed: 07/30/2021 05:58:11 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES	
FACILITY EVALUATION REPORT		COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 1000 CORPORATE DR #100 MONTEREY PARK, CA 91754	
FACILITY NAME: KENSINGTON REDONDO BEACH, THE		FACILITY NUMBER:	198320032
ADMINISTRATOR: MAY, ROBERT		FACILITY TYPE:	740
ADDRESS:	801 S PACIFICA COAST HIGHWAY	TELEPHONE:	(424) 241-2064
CITY:	REDONDO BEACH	STATE: CA	ZIP CODE: 90277
CAPACITY:	132	CENSUS: 95	DATE: 07/20/2021
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED TIME BEGAN:	10:00 AM
MET WITH:	Robert May, Executive Director	TIME COMPLETED:	04:00 PM

NARRATIVE	
1	Licensing Program Analyst (LPA) Ana Soto conducted an unannounced Annual required visit and an infection
2	control inspection to the above facility. LPA was met by Robert May, Executive Director and the purpose of
3	today's visit was explained.
4	
5	There are currently (95) residents in the facility. The facility has 3 sections within the facility. The assisted
6	Living, Connections, and Haven sections. (38) residents are ambulatory and (60) are non-ambulatory. The facility
7	is a two-story structure located in a residential neighborhood. It consists (116) bedrooms, (133) bathrooms, shaded
8	court yard, shaded front yard with water fountain, and trash area in the back of building in the south parking lot.
9	1st floor; kitchen, staff room, laundry room, dining room, library, 3 restrooms (2 inside building and 1 outside
10	court yard area, lobby area, reception area, executive office, copy room, hallways, bistro, cinema room (team
11	member desk,) electric room, Director of team support office, Maintenance closet, French dining room, Loggia
12	with fire place, dining supplies closet, activity room. 2nd floor: connections and haven sections. Connection
13	section; closet with medical supplies, spa, linens storage, nursing supply storage, cafe, activity room, family room
14	with fireplace and office, trash closet, electrical closet, toxic supplies closet, patio. Haven section; cafe, activity
15	room with sink, ocean room with balcony and fireplace, laundry room, trash closet, electrical closet, medication
16	carts in all 3 sections. Assisted living on 1st floor and 2nd Floor with salon, and medical office.
17	
18	
19	LPA and Robert and Raquel Martinez (Business Director) toured the entire facility inside and out. Documents are
20	posted as mandated. 95 Rooms are occupied by residents and contain the mandated furniture. All bathrooms are
21	clean and operational. First aid kit complete with manual; smoke detectors and carbon monoxide detector were in
22	compliance and operational. No firearms are stored at facility and water fountain present but does not present a
23	hazard for residents. Medications are stored, locked and inaccessible to residents.
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25	

NAME OF LICENSING PROGRAM MANAGER: Janae Hammond
NAME OF LICENSING PROGRAM ANALYST: Ana Soto

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 07/20/2021

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 07/20/2021

This report must be available at Child Care and Group Home facilities for public review for 3 years.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
CCLD Regional Office, 1000 CORPORATE DR #100
MONTEREY PARK, CA 91754

FACILITY EVALUATION REPORT (Cont)

FACILITY NAME: KENSINGTON REDONDO BEACH, THE

FACILITY NUMBER: 198320032

VISIT DATE: 07/20/2021

NARRATIVE

1 Medications and file are current. 4 Staff files are current. Ample supply of perishable and nonperishable food, hot
 2 water temperature is 111 degrees Fahrenheit, linens and personal hygiene supplies are adequate, hazardous toxins
 3 and/or sharp items are inaccessible to residents, 10 fire extinguishers are fully charged. Exit, walkways and/or
 4 passageways, front and court yard are free of debris and/or hazards. The facility is in excellent repair.
 5
 6 During the visit, LPA observed the facility infection control practices. LPA observed a sanitizing station at the
 7 facility entry and the court yard, visitors are logged, and temperature checked, sanitizer/soap in the all
 8 bathroom and additional sanitation supplies are locked in the copy room. LPA observed staff and clients
 9 wearing masks, residents' private rooms will be converted to isolation rooms (if needed) and/or residents
 10 will be moved to a suite for isolation and required postings throughout the facility. The facility has an
 11 approved Mitigation plan. The resident's temperatures are checked and logged once a day. PPE's are
 12 enough for 30 days.
 13
 14 According to the California Code of Regulations (Title 22, Division 6, Chapter 8), LPA did not observe any
 15 deficiencies, therefore no citations were issued at this time.
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 17 An exit interview conducted with Robert May, Executive Director and copy of report provided.
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NAME OF LICENSING PROGRAM MANAGER: Janae Hammond

NAME OF LICENSING PROGRAM ANALYST: Ana Soto

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 07/20/2021

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FACILITY REPRESENTATIVE SIGNATURE:

DATE: 07/20/2021