

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198320269
Report Date: 05/14/2025
Date Signed: 05/14/2025 11:49:38 AM

Document Has Been Signed on 05/14/2025 11:49 AM - 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: DIAMOND SENIOR LIVING INC.	FACILITY NUMBER: 198320269
ADMINISTRATOR/DELOSAROS, RICHARD	FACILITY TYPE: 740
DIRECTOR:	
ADDRESS: 2311 ROSWELL AVENUE	TELEPHONE: (949) 490-0001
CITY: LONG BEACH	STATE: CA
CAPACITY: 6	ZIP CODE: 90815
TYPE OF VISIT: Required - 1 Year	CENSUS: 5
	DATE: 05/14/2025
	UNANNOUNCED TIME VISIT/INSPECTION
	BEGAN: 09:00 AM
MET WITH: Richard Delarosa	TIME VISIT/INSPECTION
	COMPLETED: 12:00 PM

NARRATIVE	
1	On 05/14/2025 , Licensing Program Analyst (LPA) Deborah Lee conducted an
2	unannounced Required – 1 Year Inspection to the above-named facility and met with
3	Licensee/Administrator Richard Delarosa. LPA explained the purpose of the visit.
4	Facility is licensed to serve a total of 6 adults ages 55 and above, of which 5 may be
5	non-ambulatory residents and 1 may be bedridden. A total of 5 residents are
6	currently residing in this facility. The Annual Licensing Fees are current.
7	
8	
9	<u>Structure/physical plant:</u>
10	
11	The facility is a one-story house located in a residential street. The home consists of
12	5 resident bedrooms, 3 full bathrooms, 1 toilet room, 1 office room, 1 staff bedroom,
13	1 laundry room, 1 living/dining/kitchen/tv room area, 1 attached 3 car garage, and 1
14	outside patio area with shaded seating. LPA and Licensee Administrator tour the
15	facility inside and out. There were no bodies of water observed on the premises. The
16	patio furniture is under a shaded area and accessible to residents. Walkways around
17	the home were clear of hazards. There are no security bars or weapons on the
18	premises.
19	
20	
21	
22	<u>Kitchen:</u>
23	
24	LPA toured the kitchen area and observed supplies of nonperishable foods for a
25	minimum of one week and fresh perishable foods for a minimum of two days. Knives

and toxins were kept in locked storage cabinet.

page 1 of 3

NAME OF LICENSING PROGRAM MANAGER: Eva M Alvarez

NAME OF LICENSING PROGRAM ANALYST: Deborah Lee

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 05/14/2025

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 05/14/2025

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

LIC809 (FAS) - (06/04)
California Health & Human Services Agency

Page: 1 of 4
California Department of Social Services

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.

<p>STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY</p> <p>FACILITY EVALUATION REPORT (Cont)</p>	<p>CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION EL SEGUNDO ASC, 400 CONTINENTAL BLVD, STE 340 EL SEGUNDO, CA 90245</p>
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FACILITY NAME: DIAMOND SENIOR LIVING INC.

FACILITY NUMBER: 198320269

VISIT DATE: 05/14/2025

NARRATIVE	
1	<u>Bedrooms/Bathrooms:</u>
2	
3	All 5 bedrooms were inspected. The mattresses were in good condition, adequate
4	lighting, plenty of dresser and closet space observed. Walls and floors were clean
5	and in good condition. Comforters, bed linen, bath towels and mattress protectors
6	were adequately stocked.
7	
8	
9	Bathroom toilets and water faucets worked properly, grab bars were secure, and a non-skid
10	mat was in place. Adequate lighting and toiletries accessible to residents. LPA tested hot
11	water temperature, and it measured between 105 and 120 degrees Fahrenheit. This facility
12	provides residents with hygiene products such as feminine napkins, soap, toilet paper,
13	toothbrush, toothpaste, and comb.
14	
15	
16	<u>Medications:</u>
17	
18	LPA observed that medications were safe, locked, and inaccessible. All medications observed
19	were labeled and maintained in compliance with label instructions and State and Federal law.
20	
21	
22	<u>Safety:</u>
23	
24	LPA inspected the First Aid kit and found it contained an ample supply of required items:
25	Scissors, tweezers, gauze, disinfectant wipes, band aids. LPA observed all exits to be clear
26	and easily accessible. All toxins locked and inaccessible to residents in care.
27	
28	
29	Smoke and carbon monoxide detectors were operational. There is a fire extinguisher near the
30	kitchen area, and it was last serviced on 1/27/25. The last emergency drill was conducted on
31	5/1/25. There is a landline telephone and a videoconferencing device dedicated for client use
32	in the front desk.
	Page 2 of 3

<p>NAME OF LICENSING PROGRAM MANAGER: Eva M Alvarez</p> <p>NAME OF LICENSING PROGRAM ANALYST: Deborah Lee</p> <p>LICENSING PROGRAM ANALYST SIGNATURE:</p>	<p>DATE: 05/14/2025</p>
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I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 05/14/2025

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 (Cont)

FACILITY NAME: DIAMOND SENIOR LIVING INC.

FACILITY NUMBER: 198320269

VISIT DATE: 05/14/2025

NARRATIVE

1 **Files/postings:**

2
3 LPA reviewed 5 resident files and found that (5) out of (5) contained all the necessary
4 documentation. LPA reviewed 4 staff files and found that (4) out of (4) contained the required
5 documentation, certification, and training. Liability Insurance expires on 7/13/25
6
7

8 There were no deficiencies cited during today's visit.
9

10 An exit interview was conducted with Licensee/Administrator Richard Delarosa and a copy
11 of this report was provided.
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13 Page 3 of 3
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NAME OF LICENSING PROGRAM ANALYST: Deborah Lee

LICENSING PROGRAM ANALYST SIGNATURE:

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