

# Department of SOCIAL SERVICES

*Community Care Licensing*

## *FACILITY EVALUATION REPORT*

**Facility Number:** 198320375

**Report Date:** 10/20/2025

**Date Signed:** 10/20/2025 01:56:23 PM

**Document Has Been Signed on** 10/20/2025 01:56 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
<b>FACILITY EVALUATION REPORT</b>	

FACILITY NAME:	CIELA	FACILITY NUMBER:	198320375
ADMINISTRATOR/SHRAM, RONY DIRECTOR:		FACILITY TYPE:	740
ADDRESS:	17310 WEST VEREDA DELA MONTURA	TELEPHONE:	(917) 667-5303
CITY:	PACIFIC PALISADES	STATE: CA	ZIP CODE: 90272
CAPACITY:	100	CENSUS: 64	DATE: 10/20/2025
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED TIME VISIT/ INSPECTION	BEGAN: 09:35 AM
MET WITH:	Rony Shram-Administrator	TIME VISIT/ INSPECTION	COMPLETED: 02:15 PM

### NARRATIVE


1 At 9:35 AM, Licensing Program Analyst (LPA) Bernadette Allen conducted an unannounced visit to  
2 conduct a required annual inspection. Upon arrival LPA introduced herself to Valerie Trujillo and she was  
3 informed of the purpose of the visit. Valerie informed LPA that Rony Shram-Administrator would be  
4 arriving soon.  
5  
6 At 10:15 AM, the Administrator Rony Shram arrived, and he was informed of the purpose of the visit.  
7  
8 The facility is licensed to serve 100 non-ambulatory residents aged 60 and above, of which 20 may be  
9 bedridden. The facility is approved for 20 hospice residents and approved for delayed egress. All facility  
10 units are approved for bedridden clients. The facility is a four story building with two underground floors  
11 located in a residential area. There are currently no hospice residents or bedridden.  
12  
13  
14  
15  
16 The Annual Licensing Fees are current.  
17  
18 The first floor consists of: The main entrance with lobby/front desk, office areas, kitchen, dining room,  
19 residential mail area, public restrooms, bistro, and lounge area. The first floor also has dementia care  
20 unit, kitchen area, café, dining room area, and medication room.  
21  
22  
23  
24 The second floor consists of: Salon, office rooms, lounge/library area, courtyard, public bathrooms, and  
25 residential units. The third floor consists of: outside patio area, public bathrooms, and residential units.  
The fourth floor consists of: residential units

Continued

**NAME OF LICENSING PROGRAM MANAGER:** Stephanie Cifuentes

**NAME OF LICENSING PROGRAM ANALYST:** Bernadette Allen

**LICENSING PROGRAM ANALYST SIGNATURE:**



**DATE:** 10/20/2025

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

**FACILITY REPRESENTATIVE SIGNATURE:**



**DATE:** 10/20/2025

**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 III, 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  <b>FACILITY EVALUATION REPORT (Cont)</b>	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION EL SEGUNDO ASC, 400 CONTINENTAL BLVD, STE 340 EL SEGUNDO, CA 90245
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**FACILITY NAME:** CIELA

**FACILITY NUMBER:** 198320375

**VISIT DATE:** 10/20/2025

**NARRATIVE**

1 There are two underground lower levels that consists of: parking garage, theater room, gym, spa room,  
 2 pool room, food storage, staff break room, resident storage. The facility has a total of 82 residential  
 3 units, and several indoor and outdoor common areas with shaded seating.  
 4

5 At 10:30 PM, LPA reviewed six (6) residents files for admission agreements, updated physician reports,  
 6 needs and services plans all of which appeared to be current.  
 7

8 LPA reviewed seven (7) staff files for First Aid/CPR certification, criminal record clearance, training's,  
 9 and health screenings which all appeared to be current.  
 10

11 At 12:45 PM, LPA conducted a tour of the kitchen and there was 5-day supply of perishable and a 7day  
 12 supply of non-perishable food items available, which were adequately maintained/stored. LPA also  
 13 observed that there was a menu available for review there were no health and safety concerns.  
 14

15 LPA inspected a total of six (6) bedrooms and six (6) bathrooms. The beds and bedding were in good  
 16 condition, adequate lighting was provided, and storage for the residents' personal belongings was  
 17 observed. The bathrooms were in good condition and operational with required handrails and nonskid  
 18 flooring. The water temperature ranged from 105°F to 118. °F.  
 19

20 LPA observed that the facility appeared to be clean, sanitary, and appropriately furnished throughout the  
 21 facility. LPA also observed the temperature to range between 72°- 85° degrees.  
 22

23 Based on LPA observation no deficiencies were cited per Title 22 Regulations.  
 24

25 An exit interview was conducted, and this report was discussed and provided to Rony Shran-  
 26 Administrator at the conclusion of the visit.  
 27  
 28  
 29  
 30  
 31  
 32

**NAME OF LICENSING PROGRAM MANAGER:** Stephanie Cifuentes  
**NAME OF LICENSING PROGRAM ANALYST:** Bernadette Allen  
**LICENSING PROGRAM ANALYST SIGNATURE:** \_\_\_\_\_ **DATE:** 10/20/2025

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

**FACILITY REPRESENTATIVE SIGNATURE:** \_\_\_\_\_ **DATE:** 10/20/2025