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Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198320431
Report Date: 08/22/2026
Date Signed: 08/22/2026 03:42:55 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **FACILITY EVALUATION REPORT**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION EL SEGUNDO ASC, 400 CONTINENTAL BLVD, STE 340 EL SEGUNDO, CA 90245

FACILITY NAME:	IVY PARK AT PALOS VERDES		FACILITY NUMBER:	198320431
ADMINISTRATOR/ DIRECTOR:	JOE SALDANA		FACILITY TYPE:	740
ADDRESS:	25535 HAWTHORNE BLVD.		TELEPHONE:	(310) 377-7425
CITY:	TORRANCE	STATE: CA	ZIP CODE:	90505
CAPACITY: 115		CENSUS: 82	DATE:	08/22/2026
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED	TIME VISIT/ INSPECTION BEGAN:	09:16 AM
MET WITH:	Brenda Myers, Executive Director		TIME VISIT/ INSPECTION COMPLETED:	03:00 PM

NARRATIVE

Licensing Program Analyst, Mayra Cota, conducted an unannounced annual visit today. LPA met with Markeith McGrew, Memory Care Director and Brenda Myers, Executive Director and the reason for the visit was explained.

The facility is licensed to serve 115 non-ambulatory residents aged 60 and over, of which 8 may be bedridden. The facility has an approved hospice waiver for 20. The facility is a five-story structure located in a commercial neighborhood in Torrance and consists of car park, entrance and lobby, the first and second floor is Assisted Living (AL) and the third and fourth floor is Memory Care (MC). There is a total of 37 resident rooms in the AL units and 61 in MC. The building as a whole has common bathrooms, beauty salon, 2 areas with a TV, computer area, dining rooms, bistro area, industrial kitchen, kitchenettes, laundry rooms, offices, staff break room, activity room/theater room, wellness center, janitorial closets, storage rooms, shaded outdoor patios and sensory rooms.

During today's visit, LPA inspected (14) resident rooms at random. Resident rooms have the required furniture and sufficient lighting. Bathrooms were observed clean and water measured between 113.3 – 117.6 degrees F which is within compliance range. Bathrooms are kept clean and sanitary. Showers have safety grab bars and anti-slip surfaces. Bathing equipment was also observed to be in good repair. Call buttons in resident rooms were tested and observed to be working properly.

The facility's main kitchen was inspected and observed to be clean for the preparation and storage of food. Refrigerators and freezers were also observed clean, and food is kept properly stored. The facility has sufficient 2-day perishable and 7-day non-perishable food supply. Food preparation areas are kept clean and food is properly stored. *****Continues on LIC 809-C*****

Wei Siew Ho
Mayra Cota

	**DATE:** 08/22/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

	**DATE:** 08/22/2026

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.

FACILITY NAME: IVY PARK AT PALOS VERDES **FACILITY NUMBER:** 198320431

VISIT DATE: 08/22/2026

NARRATIVE

Common areas have sufficient seating and furniture throughout the facility is in good repair. Passageways, walkways, ramps and exits are kept clear and free of obstructions. Storage rooms are kept locked and inaccessible to residents. The facility is equipped with fire extinguishers which are kept charged and operational. The facility also has a sprinkler system and smoke alarms which are tested yearly. Last inspection was conducted on 9/26/2025. The facility's back-up generator is also tested and serviced routinely. Last inspection was conducted on 6/18/2026. Safety drills are conducted quarterly. Last drill was conducted on 6/30/2026. Emergency and Disaster Plan is current. Carbon monoxide detectors were also tested throughout the building and were working properly.

Six (6) resident and (7) staff files were reviewed. Files contained all documents required to maintain regulatory compliance.

No deficiencies noted during today's visit. Exit interview was conducted and a copy of the report was provided.

NAME OF LICENSING PROGRAM MANAGER: Wei Siew Ho
NAME OF LICENSING PROGRAM ANALYST: Mayra Cota
LICENSING PROGRAM ANALYST SIGNATURE:
DATE: 08/22/2026

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

FACILITY REPRESENTATIVE SIGNATURE:
DATE: 08/22/2026