

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198320437
Report Date: 03/20/2026
Date Signed: 03/20/2026 03:35:15 PM

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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: PETERS FAMILY HOME		FACILITY NUMBER:	198320437
ADMINISTRATOR/PETERS, JADESHA		FACILITY TYPE:	740
DIRECTOR:		TELEPHONE:	(323) 481-8771
ADDRESS: 427 E JAVELIN ST	STATE: CA	ZIP CODE:	90745
CITY: CARSON	CENSUS: 5	DATE:	03/20/2026
CAPACITY: 5	UNANNOUNCED	TIME VISIT/INSPECTION	01:05 PM
TYPE OF VISIT: Required - 1 Year		BEGAN:	
MET WITH: Director Jadesha Peters		TIME VISIT/INSPECTION	03:38 PM
		COMPLETED:	
NARRATIVE			
1	On 3/20/26 Licensing Program Analyst (LPA) Villegas conducted an unannounced annual required		
2	inspection visit using the new CARE Inspection Tool. LPA met with Jadesha Peters as the purpose of		
3	today's visit was explained. The facility is licensed to operate for (5) ambulatory residents ages 60 and		
4	above. The facility is approved for (3) hospice residents. The facilities annual fees info. and pin were		
5	provided, liability insurance is active (Identity Insurance Services ISCAH0100000358-00 exp: 3/3/27),		
6	surety bond is active (Western Surety company 66970565), and the facilities Administrator certificate is		
7	current and expires on 3/28/2026.		
8			
9	The facility is a single-story home and consists of the following: (4) resident bedrooms, (2) bathrooms,		
10	living room, kitchen, dining room, back yard with shaded seating, and an attached garage that houses a		
11	washer and dryer, a deep freezer, and is used for storage. A land line was observed. All resident rooms		
12	were checked, mattresses and box springs were in good condition, adequate lighting was observed,		
13	plenty of dresser and closet space, walls and floors were clean and in good repair, and bed linens,		
14	comforters and bath towels were fully stocked. Bathrooms were found to be within Title 22 regulation,		
15	toilets and water faucets worked properly, shower was free of mold/mildew, thre are sufficient toiletries		
16	accessible to the residents. The water temperature measured between 105- 120 F. degrees.		
17			
18	LPA conducted a records review of (5) residents records, (5) P&I ledgers, (3) Medication Administration		
19	Records (MAR), and (3) staff records. No discrepancies observed. (1) fire extinguishers fully charged,		
20	carbon monoxide and smoke detectors are interconnected and operational, and the first aid kit was		
21	checked and fully stocked. The fire/emergency drill was completed on 3/02/26.		
22			
23	Exit interview conducted, and a copy of this report was provided.		
24			
25			

NAME OF LICENSING PROGRAM MANAGER: Janae Hammond
NAME OF LICENSING PROGRAM ANALYST: Lizeth Villegas

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 03/20/2026

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 03/20/2026

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.