

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198320498

Report Date: 02/24/2026

Date Signed: 02/24/2026 05:26:04 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, 1000 CORPORATE DR #100 MONTEREY PARK, CA 91754
FACILITY EVALUATION REPORT	

FACILITY NAME:	GENERATIONS OF LOS ANGELES ASSISTED LVNG. FACILITY	198320498
	FACILITY	NUMBER:
ADMINISTRATOR/DIRECTOR:	JENNIFER RIVAS	FACILITY TYPE:
		740
ADDRESS:	3540 MARTIN LUTHER KING, JR.	TELEPHONE:
	LYNWOOD	(310) 638-4113
CITY:	STATE: CA	ZIP CODE:
		90262
CAPACITY:	178	CENSUS:
		106
TYPE OF VISIT:	Case Management - Deficiencies	DATE:
	UNANNOUNCED	02/24/2026
	TIME VISIT/	
	INSPECTION	08:10 AM
	BEGAN:	
MET WITH:	Administrator - Jennifer Rivas	TIME VISIT/
		INSPECTION
		05:30 PM
		COMPLETED:

NARRATIVE

1 On 02/24/2026, Licensing Program Analyst (LPA) Socorro Leandro conducted an
2 unannounced Case Management – Deficiency visit, to document two deficiencies
3 observed during a complaint investigation control number 11-AS-20260223121758
4 at this facility. LPA met with Administrator, Jennifer Rivas, and the purpose of the visit
5 was explained. LPA was allowed entrance to the facility.
6
7

8 The following deficiencies were observed:

- 9 • Time-Delay-Egress-Doors not opening within 15 to 30 seconds in the Memory
10 Care Unit.
11
12
13
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15 LPA pressed on the first-floor north side memory care unit door, which is a time-
16 delay-egress-door, for 52.20 seconds when the door opened. LPA recorded the time
17 on their Iphone stopwatch. Staff 1 was a witness to the event.
18
19

20 LPA pressed on the first-floor south side memory care unit door, which is a time-
21 delay-egress-door, for 49.88 seconds when the door opened. LPA recorded the time
22 on their Iphone stopwatch. Staff 1 was a witness to the event.
23
24
25

NAME OF LICENSING PROGRAM MANAGER: Ulysses Coronel

NAME OF LICENSING PROGRAM ANALYST: Socorro Leandro

LICENSING PROGRAM ANALYST SIGNATURE:


DATE: 02/24/2026

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

FACILITY REPRESENTATIVE SIGNATURE:


DATE: 02/24/2026

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 III, and Residential Care Facilities for the Elderly are required to provide and maintain an active email address of record with the licensing agency.

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Created By: Socorro Leandro On 02/24/2026 at 02:03 PM
Link to Parent Document Below:

<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 , 1000 CORPORATE DR #100 MONTEREY PARK, CA 91754</p>
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FACILITY NAME: GENERATIONS OF LOS ANGELES ASSISTED LVNG. FACILITY

FACILITY NUMBER: 198320498

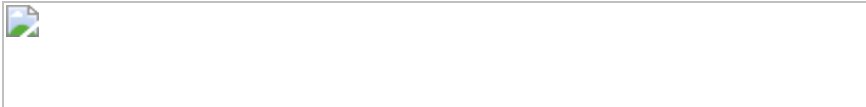
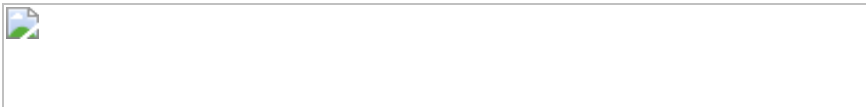
DEFICIENCY INFORMATION FOR THIS PAGE:

VISIT DATE: 02/24/2026

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
<p>Type B 03/09/2026 Section Cited HSC 1569.699(a)(4)</p>	<p>1 1569.699 Exit doors; egress-control 2 devices of time-delay type; fences (a) 3 When approved by the person 4 responsible for enforcement, as 5 described in Section 13146, exit doors 6 in facilities classified as Group R, 7 Division 2 facilities under the California Building Standards Code, licensed as residential care facilities for the elderly, and housing clients with Alzheimer's disease or major neurocognitive disorder, may be equipped with approved listed special egress-control devices of the time-delay type, provided the building is protected throughout by an approved automatic sprinkler system and an approved automatic smoke- detection system. The devices shall conform to all of the following requirements: (4) Initiate an irreversible process that will deactivate the egress- control device whenever a manual force of not more than 15 pounds (66.72?N) is applied for two seconds to the panic bar or other door-latching hardware. The egress-control device shall deactivate within an approved time period not to exceed a total of 15 seconds, except that the person responsible for enforcement, as described in Section 13146, may approve a delay not to exceed 30 seconds in residential care facilities for the elderly serving patients with Alzheimer's disease. The time delay established for each egress-control device shall not be field adjustable.</p>	<p>1 The Administrator has agreed to test 2 out the delay-egress-doors with the 3 Delta fire company and if the timer is off 4 she will have them adjust the timer. 5 6 7</p>

		This requirement is not met as evidenced by:	
	8 9 10 11 12 13 14	Based on observation, the licensee did not comply with the section cited above in time-delay-egress-doors did not open after 30 seconds of having manual force pressing on the door latching hardware; during the health and safety tour of the facility, the first-floor north side memory care unit door, which is a time-delay-egress-door was manually pushed on the door latching hardware for 52.20 seconds when the door finally opened; the first-floor south side memory care unit door, which is a time-delay-egress-door was manually pushed on the door latching hardware for 49.88 seconds when the door finally opened; which poses/posed a potential health, safety or personal rights risk to persons in care.	Adminstrator will submit proof of correction via email to Socorro.Leandro@dss.ca.gov
	1 2 3 4 5 6 7		
	1 2 3 4 5 6 7		

Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

NAME OF LICENSING PROGRAM MANAGER:	Ulysses Coronel
NAME OF LICENSING PROGRAM ANALYST:	Socorro Leandro
LICENSING PROGRAM ANALYST SIGNATURE:	
	DATE: 02/24/2026
I acknowledge receipt of this form and understand my appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	
	DATE: 02/24/2026



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Created By: Socorro Leandro On 02/24/2026 at 04:16 PM
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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION , 1000 CORPORATE DR #100 MONTEREY PARK, CA 91754
FACILITY EVALUATION REPORT (Cont)	

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
Type A 02/25/2026 Section Cited CCR 87307(d)(6)	1 87307 Personal Accommodations and 2 Services (d) The following space and 3 safety provisions shall apply to all 4 facilities: (6) All outdoor and indoor 5 passageways and stairways shall be 6 kept free of obstruction. 7 This requirement is not met as evidenced by:	1 The Administrator has agreed to create 2 a plan to verify that all outdoor and 3 indoor passageways are free of 4 obstruction, for example, all residents 5 including residents with mobility devices 6 have the ability to move through 7 passageways and doorways without the assistance of others.
	8 Based on observation and interviews, 9 the licensee did not comply with the 10 section cited above in, adding large 11 white double doors in the front entrance 12 in-between the front lobby and the 13 residents living quarters without 14 residents being able to open the doors from the residents living quarters; staff and resident interviews indicated that doors were installed more than 5 months ago; resident indicated that residents are not able to open the doors and residents are not allowed to go into the facility's front lobby; LPA attempted to open the double doors from the residents living quarters but was unable to open the door, which poses/posed a potential health, safety or personal rights risk to persons in care.	8 Email Plan to: 9 Socorro.Leandro@dss.ca.gov 10 11 12 13 14
	1 2 3 4 5 6 7	1 2 3 4 5 6 7
	1 2 3 4 5 6 7	1 2 3 4 5 6 7

Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

NAME OF LICENSING PROGRAM	Ulysses Coronel
MANAGER:	
NAME OF LICENSING PROGRAM	Socorro Leandro
ANALYST:	
LICENSING PROGRAM ANALYST SIGNATURE:	
	DATE: 02/24/2026
I acknowledge receipt of this form and understand my appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	
	DATE: 02/24/2026

FACILITY EVALUATION REPORT (Cont)**FACILITY NAME:** GENERATIONS OF LOS ANGELES
ASSISTED LVNG. FACILITY**FACILITY NUMBER:** 198320498**VISIT DATE:** 02/24/2026**NARRATIVE**

- 1 • Outdoor and Indoor passageways were not kept free of obstructions.
2
3
4 Large white double doors in between the front lobby and the residents' living
5 quarters, residents were unable to open the doors from the living quarters side to the
6 front lobby.
7
8 On 02/24/2026 around 9:00 AM, LPA was able to push the large white double doors
9 open from the front lobby to the residents' living quarters. LPA attempted to push the
10 doors open from the residents' living quarters to the front lobby but LPA was unable
11 to open the doors (LPA took pictures and video footage of LPA attempting to open
12 the doors – footage was submitted to the department for review).
13
14
15 On 02/24/2026 around 10:00 AM, the facility installed door handles on the large
16 white double doors on the residents' living quarter side.
17
18
19 LPA observed a resident on a wheelchair attempt to open the large white double
20 doors but was unable to open the doors.
21
22
23 Interviews conducted with staff and residents revealed the following: residents and
24 staff indicated that the large white double doors were installed more than 5 months
25 ago. Residents indicated that they are unable to open the doors and residents are
26 not allowed in the front lobby of the facility.
27
28
29 Deficiencies are being cited from Title 22 Regulations please see LIC809-D.
30
31 An exit interview was conducted, and a plan of correction was developed. Appeal
32 Rights and a hard copy of this report were provided to Administrator, Jennifer Rivas.

NAME OF LICENSING PROGRAM MANAGER: Ulysses Coronel**NAME OF LICENSING PROGRAM ANALYST:** Socorro Leandro**LICENSING PROGRAM ANALYST SIGNATURE:****DATE:** 02/24/2026**I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.****FACILITY REPRESENTATIVE SIGNATURE:****DATE:** 02/24/2026