

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198603310
Report Date: 06/20/2026
Date Signed: 06/20/2026 09:53:36 AM

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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: MIRACLE MILE MANOR RCFE		FACILITY NUMBER:	198603310
ADMINISTRATOR/NAGEL, EDITH		FACILITY TYPE:	740
DIRECTOR:		TELEPHONE:	(323) 807-0549
ADDRESS:	6273 DEL VALLE DRIVE	ZIP CODE:	90048
CITY:	LOS ANGELES	STATE: CA	DATE: 06/20/2026
CAPACITY: 6	CENSUS: 0	UNANNOUNCED TIME VISIT/	INSPECTION
TYPE OF VISIT: Required - 1 Year			09:00 AM
MET WITH: Edith Nagel		BEGAN: TIME VISIT/	INSPECTION
			09:59 AM
		COMPLETED:	
NARRATIVE			
1	On June 20, 2026, Licensing Program Analyst (LPA) Ernand Dabuet conducted an unannounced visit to		
2	the facility for its annual inspection. LPA met with Edith Nagel, the Administrator, to discuss the purpose		
3	of the visit. The facility is licensed to serve (6) six non-ambulatory residents ages 60 and over of which		
4	(1) one resident may be bedridden. The facility has an approved hospice waiver for (4) four residents.		
5	Currently, there are no residents in care.		
6			
7	The facility is a single-story home that includes five resident bedrooms, four bathrooms, a living room, a		
8	dining room, a kitchen, a laundry area (located in the kitchen), and an outdoor shaded patio area. There		
9	is a gated pool in the backyard.		
10			
11	LPA toured the bedrooms and noted that they had the required furniture, bed linens, and adequate		
12	closet and drawer space to accommodate each resident comfortably. The resident bathrooms were		
13	inspected; toilets and water faucets functioned properly; grab bars were secure; the shower was free of		
14	mold and mildew; and a non-skid mat was in place—the water temperature measured between 105°F.		
15	Common areas were clean and free of hazards, and doorways were unobstructed. The kitchen was		
16	inspected and found to comply with Title 22 regulations. Both perishable and non-perishable food		
17	supplies were checked. All cleaning solutions, hazardous items, and medications were securely locked		
18	and inaccessible to residents. Smoke detectors were functioning properly, and the fire extinguisher was		
19	fully charged. The carbon monoxide detector was operational. Outdoor grounds were toured, and no		
20	bodies of water were observed. Walkways around the home were clear of hazards. There were no		
21	security bars or weapons on the premises. The facility has a current administrator certificate for Edith		
22	Nagel #7007433740 effective 03/16/2025 through 03/15/2027.		
23			
24	During today's visit, LPA did not observe any deficiencies. An exit interview was conducted with Edith		
25	Nagel, Administrator. A copy of this report was provided at the time of the visit.		
NAME OF LICENSING PROGRAM MANAGER: Janae Hammond			
NAME OF LICENSING PROGRAM ANALYST: Ernand Dabuet			

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 06/13/2026

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 06/13/2026

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.