

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198603416
Report Date: 08/07/2026
Date Signed: 08/07/2026 03:28:19 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION MONTEREY PARK ASC, 1000 CORPORATE CNTR DR. ST 500 MONTEREY PARK, CA 91754	
FACILITY EVALUATION REPORT			
FACILITY NAME: MORNINGSTAR OF PASADENA		FACILITY NUMBER:	198603416
ADMINISTRATOR/TALIAFERRO, KEVIN		FACILITY TYPE:	740
DIRECTOR:		TELEPHONE:	(626) 204-1700
ADDRESS: 951 S. FAIR OAKS AVENUE	STATE: CA	ZIP CODE:	91105
CITY: PASADENA	CENSUS: 154	DATE:	08/07/2026
CAPACITY: 310	UNANNOUNCED	TIME VISIT/	
TYPE OF VISIT: Required - 1 Year		INSPECTION	02:40 PM
		BEGAN:	
MET WITH: Rhonda Guzman, Wellness Director		TIME VISIT/	
		INSPECTION	03:35 PM
		COMPLETED:	

NARRATIVE	
1	Licensing Program Analyst (LPA) Daniel Konishi conducted an unannounced Required- 1 year visit and
2	met with the Wellness Director, Rhonda Guzman and LPA explained the purpose of the visit. The Facility
3	is licensed to serve 310 non- ambulatory adults 60 and over, of which 25 may be bedridden. Facility has
4	an approved hospice waiver for 30 residents.
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6	On today's date, LPA utilized the Compliance and Regulatory Enforcement (CARE) tools and inspected
7	the three (3) domains including: Resident Rights/Information, Planned Activities, and Food Services.
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9	Resident Rights-Information: Resident personal rights, complaint hotline information and visitors
10	policy posters are posted in the mailing area. The facility provides internet service to all residents and
11	have access to the facility phone.
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13	Planned Activities: Sufficient space to accommodate both indoor and outdoor activities was observed.
14	Facility has a Life Enrichment Director, who coordinates activities provided at the facility. LPA observed various
15	areas throughout the facility that provides puzzles, games reading areas, gardening. Memory Care Unit has an
16	activity area that promotes painting with a system for other sensory activities.
17	
18	Food Service: The kitchen was inspected and the food preparation area and storage areas were
19	observed to be clean and sanitary. Sufficient food supply is stored in the kitchen and pantry areas
20	consisting of 2-day perishables, 7-day non-perishables, and emergency food supplies. Currently, there
21	are two (2) residents with modified diets. Sanitation practices and kitchen cleanliness was observed.
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DATE: 08/07/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 08/07/2026

This report must be available at Child Care and Group Home facilities for public review for 3 years.

LIC809 (FAS) - (06/04)
California Health & Human Services Agency

Page: 1 of 3
California Department of Social Services

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.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
FACILITY EVALUATION REPORT (Cont)	COMMUNITY CARE LICENSING DIVISION
	MONTEREY PARK ASC, 1000 CORPORATE CNTR
	DR. ST 500
	MONTEREY PARK, CA 91754

FACILITY NAME: MORNINGSTAR OF PASADENA

FACILITY NUMBER: 198603416

VISIT DATE: 08/07/2026

NARRATIVE	
1	Due to time restraint and LPA was not able to complete the full inspection tool and interview residents and staff and LPA will come back at another time to complete. Per California Code of Regulations, Title 22, and California Health and Safety Code, no deficiencies observed during the visit. Exit Interview conducted and a copy of the report was provided to the Wellness Director, Rhonda Guzman.
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NAME OF LICENSING PROGRAM MANAGER: David Sicairos	
NAME OF LICENSING PROGRAM ANALYST: Daniel Konishi	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 08/07/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 08/07/2026