

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198603701
Report Date: 02/27/2025
Date Signed: 02/27/2025 05:55:01 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY		CALIFORNIA DEPARTMENT OF SOCIAL SERVICES	
FACILITY EVALUATION REPORT		COMMUNITY CARE LICENSING DIVISION GREATER LA AC/SC, 1000 CORPORATE CNTR DR. ST 500 MONTEREY PARK, CA 91754	
FACILITY NAME: DIAMOND BAR RCFE		FACILITY NUMBER:	198603701
ADMINISTRATOR/ANDREW MENTE		FACILITY TYPE:	740
DIRECTOR:		TELEPHONE:	(909) 861-7430
ADDRESS: 1652 MAPLE HILL ROAD	STATE: CA	ZIP CODE:	91765
CITY: DIAMOND BAR	CENSUS: 3	DATE:	02/27/2025
CAPACITY: 6	UNANNOUNCED TIME VISIT/	INSPECTION	01:45 PM
TYPE OF VISIT: Case Management - Annual Continuation	BEGAN:	TIME VISIT/	INSPECTION
MET WITH: Taren Mente, Staff	COMPLETED:		04:15 PM

NARRATIVE	
1	Licensing Program Analyst (LPA) Cynthia Chan conducted a subsequent visit to continue the annual
2	inspection. LPA met with Staff, Taren Mente. The initial visit was held on 2/20/25.
3	
4	During the visit today, LPA inspected the remaining domains of the CARE tools.
5	Staffing: There is sufficient staffing at the facility and backup staff if needed. Staff employed have
6	fingerprint clearance and associated to the facility.
7	Personnel Records-Training: LPA reviewed 3 staff files and all documents are in file. Staff have current
8	CPR/first aid training and sufficient on-going training that meets the annual requirement.
9	Resident Records-Incident Reports: LPA reviewed 3 resident files and the following documents are
10	found - admission agreements, Identification & Emergency Information, Physician's Report, Consent
11	forms, Resident rights, Safeguards for Personal Property/Valuables form.
12	Resident Rights-Information: The Complaint poster, Local Ombudsman, and Residents personal
13	rights are posted.
14	Incidental Medical & Dental: The medications are centrally stored and locked in the cabinet. Resident
15	medications were reviewed and marked in the Medication Administration Record (MAR) log when given.
16	Resident with Special Needs: There are currently no residents with a prohibited or restricted health
17	condition or using oxygen.
18	Disaster Preparedness: The facility has an Emergency Disaster Plan posted with contact numbers and
19	at least 2 relocation sites. LPA provided a technical advisory for disaster drills.
20	
21	No deficiencies were issued today. An exit interview was held and a copy of this report was given to the
22	administrator.
23	
24	
25	

Cynthia D Chan



DATE: 02/27/2025

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 02/27/2025

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