

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198603786

Report Date: 12/09/2025

Date Signed: 12/09/2025 02:14:39 PM

Document Has Been Signed on 12/09/2025 02:14 PM - It Cannot Be Edited

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION GREATER LA AC/SC, 1000 CORPORATE CNTR DR. ST 500 MONTEREY PARK, CA 91754
--	---

FACILITY NAME: CLAREMONT PLACE		FACILITY NUMBER: 198603786
ADMINISTRATOR/MARIANO, CARLA DIRECTOR:		FACILITY TYPE: 740
ADDRESS: 120 WEST SAN JOSE AVENUE	CITY: CLAREMONT	STATE: CA
CAPACITY: 93	TYPE OF VISIT: Required - 1 Year	TELEPHONE: (909) 447-5259
		ZIP CODE: 91711
		DATE: 12/09/2025
		UNANNOUNCED TIME VISIT/INSPECTION: 09:22 AM
		BEGAN: TIME VISIT/INSPECTION: 02:30 PM
MET WITH: Carla Mariano - Executive Director		COMPLETED:

NARRATIVE

1 Licensing Program Analyst (LPA) Tena Herrera conducted the required annual inspection. LPA arrived
2 unannounced and met with Executive Director Carla Mariano and explained the purpose for today's
3 visit. The facility is licensed to serve 93 Non-Ambulatory residents ages 60 and over; of which 10 may
4 be bedridden, and an approved hospice waiver for 20.
5 LPA utilized the Compliance and Regulatory Enforcement (CARE) tools for the visit today and observed
6 the following:
7 **Infection Control:** The facility maintain the required Infection Control Plan.
8 **Operational Requirements:** The facility has an approved fire clearance and maintain the required
9 liability insurance that has an expiration date of 8/2026.
10 **Physical Plant & Environment Safety:** LPA toured facility, residents' bedrooms were checked and had
11 the required closet/drawer space to accommodate each resident comfortably available. Resident rooms
12 have signal systems located in each bathroom that were tested an operating properly. There are smoke
13 detectors, carbon monoxide detectors and an emergency sprinkler system throughout the facility that
14 are operable and in compliance. The fire extinguishers were observed throughout the facility and are
15 fully charged. No bodies of water were observed at the facility. There are no security bars or weapons
16 on the premises. Hygiene products are readily available. The hot water temperature was tested
17 throughout the facility measured within the required range of 105-120 degrees. There are multiple
18 shaded patio/garden areas for residents. There is a separate wing for memory care both the delayed
19 egress and signal systems were tested and operable.
20 **Staffing & Personnel Records-Training:** There appears to be sufficient staffing at all times in the
21 facility. Staff have criminal record clearance, current First-Aid/CPR/AED training; and training in postural
22 supports, Alzheimer's and Dementia, medication assistance, and other ongoing training which are
23 documented in personnel files. LPA reviewed 6 staff files with no issues observed.
24 Administrator/Executive Director Carla Mariano maintains a valid Administrator certificate that expires on
25 4/4/26.
(Continued on LIC809-C)

NAME OF LICENSING PROGRAM MANAGER: David Sicairos

LICENSING PROGRAM ANALYST SIGNATURE:

[Signature area]

DATE: 12/09/2025

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

FACILITY REPRESENTATIVE SIGNATURE:

[Signature area]

DATE: 12/09/2025

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

