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Department of

SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 247206921
Report Date: 04/29/2026
Date Signed: 04/29/2026 06:15:31 PM

Unsubstantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **COMPLAINT INVESTIGATION REPORT**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION FRESNO RO, 1314 E SHAW AVE FRESNO, CA 93710

This is an official report of an unannounced visit/investigation of a complaint received in our office on **03/11/2026** and conducted by Evaluator Vadim Gorban

PUBLIC	COMPLAINT CONTROL NUMBER: 24-AS-20260311130945

FACILITY NAME:	MERCED SENIOR LIVING			**FACILITY NUMBER:**	247206921
ADMINISTRATOR:	LISA BARICEVIC			**FACILITY TYPE:**	740
ADDRESS:	3420 R ST			**TELEPHONE:**	(209) 580-6124
CITY:	MERCED	**STATE:** CA		**ZIP CODE:**	95348
CAPACITY:	93	**CENSUS:** 86		**DATE:**	04/29/2026
		UNANNOUNCED		**TIME BEGAN:**	02:45 PM
MET WITH:	Lisa Baricevic, administrator			**TIME COMPLETED:**	04:45 PM

ALLEGATION(S):

1	Staff are not able to implement a fire safety plan which poses a risk to residents in care
2	Facility kitchen is not kept clean
3	Staff did not provide good quality foods to residents in care
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INVESTIGATION FINDINGS:

1	On 04/29/2026, Licensing Program Analyst (LPA) V Gorban conducted complaint investigation visit,
2	introduced self and was allowed entry. LPA met with administrator Lisa Baricevic. The purpose of this visit
3	is to deliver the findings of the investigation completed by the Department.
4	During the visit, LPA conducted a tour of the facility, interior and exterior to ensure there is no potential or
5	immediate health and safety risk at the facility.
6	Allegations: Staff are not able to implement a fire safety plan which poses a risk to residents in care,
7	Facility kitchen is not kept clean, and Staff did not provide good quality foods to residents in care.
8	Regarding fire safety plan, based on records reviews, facility poses fire and disaster plan, train staff and
9	conduct quarterly disaster drills with staff. Regarding unclean kitchen, based on observation and
10	interviews, kitchen appeared clean and staff clean kitchen after each meal prep. Regarding quality
11	meals, based on records review, records meets regulation expectations. Although the allegation may
12	have happened or is valid, there is not a preponderance of evidence to prove the alleged violation did or
13	did not occur, therefore the allegation is unsubstantiated. Exit interview conducted, report signed and
	copy provided for facility records.

Unsubstantiated	Estimated Days of Completion:

SUPERVISORS NAME: Alexandria Walton
LICENSING EVALUATOR NAME: Vadim Gorban
LICENSING EVALUATOR SIGNATURE:
DATE: 04/29/2026

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

FACILITY REPRESENTATIVE SIGNATURE:
DATE: 04/29/2026

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