

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 300603257
Report Date: 03/07/2022
Date Signed: 03/07/2022 04:24:26 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 770 THE CITY DR., SUITE 7100 ORANGE, CA 92868
FACILITY EVALUATION REPORT	

FACILITY NAME: REGENTS POINT	FACILITY NUMBER: 300603257
ADMINISTRATOR: FORNEY, MELINDA M	FACILITY TYPE: 741
ADDRESS: 19191 HARVARD AVENUE	TELEPHONE: (949) 854-9500
CITY: IRVINE	STATE: CA
CAPACITY: 399	ZIP CODE: 92612
TYPE OF VISIT: Required - 1 Year	CENSUS: 287
MET WITH: Melinda Forney and Ashley Croslin	DATE: 03/07/2022
	UNANNOUNCED TIME BEGAN: 09:20 AM
	TIME COMPLETED: 12:20 PM

NARRATIVE

1 Licensing Program Analyst (LPA) Kimberly Lyman conducted an unannounced visit to Regents Point.
2 The purpose of today's visit was to conduct the Required 1 Year inspection. LPA was allowed entry into
3 the facility and met with Executive Director Melinda Forney. Facility is licensed for a capacity of 399
4 residents including 60 non-ambulatory residents. Facility also has an approved hospice waiver for 12
5 residents as well as approval for delayed egress. There are 7 residents in the memory care unit, 37 in
6 assisted living and 243 in the independent living. There are 4 residents on hospice care during today's
7 visit. Nurse Manager Sheila Weathers and Director of Wellness Ashley Croslin were present as well.
8 Executive Director Melinda Forney has an administrator certificate expiring on 07/22/2023.
9
10 At 10:25 AM, LPA toured the facility with Executive Director and Director of Wellness. Facility consists of
11 Assisted Living, Independent Living and Memory Care units. LPA observed multiple outside shaded
12 visitation areas, dining room, bistro, library, hair salon, gym, and Wellness Center. LPA observed
13 residents relaxing in the facility. All residents appeared happy and well taken care of. Facility appears
14 clean and sanitary. All resident rooms had the required elements as well as restrooms stocked with
15 soap/ sanitizer. All rooms observed are single occupancy. Facility screens all visitors to the facility and
16 LPA observed the screening/ sanitizing station in the facility. Facility utilizes an electronic visitor sign in
17 sheet/ questionnaire. Facility takes resident and staff temperatures daily and documents. Facility has all
18 required department postings. LPA observed the first aid kit has all required items. Facility mitigation
19 plan has been approved. Facility has emergency evacuation chairs at the top of stairwells. LPA
20 observed an ample supply of emergency food and water. Facility has a generator on-site for
21 emergencies. Facility has an outside agency, Phoenix Fire, come into the facility quarterly for fire
22 inspection. Facility maintenance tests smoke and carbon monoxide detectors. LPA toured the outside
23 grounds and observed a secured pool, putting green, and lawn bowling. LPA observed the medication
24 room and facility uses electronic medical records for medication management. Facility has a plan for
25 covid testing residents and staff as needed as well as a plan for isolation and quarantine. CONTINUED
ON LIC 809C DATED 03/07/2021.

NAME OF LICENSING PROGRAM MANAGER: Alisa Ortiz
NAME OF LICENSING PROGRAM ANALYST: Kimberly Lyman

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 03/07/2022

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 03/07/2022

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

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
CCLD Regional Office, 770 THE CITY DR., SUITE 7100
ORANGE, CA 92868

FACILITY EVALUATION REPORT (Cont)

FACILITY NAME: REGENTS POINT

FACILITY NUMBER: 300603257

VISIT DATE: 03/07/2022

NARRATIVE

1	LPA reviewed select resident files during the visit and all files are up to date including emergency information. Most residents and staff are vaccinated for Covid-19. LPA consulted with Executive Director regarding the importance of hand washing signs in all public restrooms. No deficiencies noted during today's visit. An exit interview was conducted and a copy of this report was left at the facility.
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NAME OF LICENSING PROGRAM MANAGER: Alisa Ortiz

NAME OF LICENSING PROGRAM ANALYST: Kimberly Lyman

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 03/07/2022

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FACILITY REPRESENTATIVE SIGNATURE:

DATE: 03/07/2022