

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 306002644
Report Date: 04/27/2026
Date Signed: 04/27/2026 05:54:34 PM

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

FACILITY NAME:	SUNRISE OF MISSION VIEJO	FACILITY NUMBER:	306002644
ADMINISTRATOR/MARIA T. DOMINGO		FACILITY TYPE:	740
DIRECTOR:			
ADDRESS:	26151 COUNTRY CLUB DRIVE	TELEPHONE:	(949) 582-2010
CITY:	MISSION VIEJO	STATE: CA	ZIP CODE: 92691
CAPACITY: 110		CENSUS: 84	DATE: 04/27/2026
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED TIME VISIT/INSPECTION	01:45 PM
		BEGAN:	
MET WITH:	Parminder	TIME VISIT/INSPECTION	06:10 PM
		COMPLETED:	

NARRATIVE	
1	On April 27, 2026, Licensing Program Analyst (LPA) Garlli Tat conducted an unannounced required visit to the facility for the purpose of conducting the required annual inspection. LPA explained reason for the visit and was greeted and granted entry by staff on duty. During the visit, staff on duty contacted Resident Care Director Parminder Singh about the visit, who was able to assist with the inspection.
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6	The PUB475 "See Something, Say Something" poster was observed to be located near the front entrance. LPA observed the Administrator's Certificate for Maria "Tisset" Domingo, which expires on June 16, 2027.
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10	LPA toured the interior and exterior portions of the facility with Resident Care Director. The facility is a three-story structure and is licensed for 110 residents, 88 of which may be non-ambulatory, 15 may be bedridden, and a hospice waiver for 16. For this visit, there are a total of 86 residents in care, of which 11 are on hospice, 9 are on home health, and 3 are bedridden.
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15	LPA toured the facility and observed that bedrooms were provided with furniture in good repair, clean linens, adequate storage space, and kept free of tripping hazards. Restrooms were observed to be in good repair, toilets were operational and grab bars and non-skid floor mats were provided. Water temperature in restrooms were measured to be between 115.5 to 119.4 degrees Fahrenheit.
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19	Continued on LIC 809-C.
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NAME OF LICENSING PROGRAM MANAGER: Sheila Santos
NAME OF LICENSING PROGRAM ANALYST: Garlli Tat

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 04/27/2026

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 04/27/2026

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 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.

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FACILITY EVALUATION REPORT (Cont)	

FACILITY NAME: SUNRISE OF MISSION VIEJO	FACILITY NUMBER: 306002644
	VISIT DATE: 04/27/2026

NARRATIVE	
1	Facility met the minimum two-day perishable and seven-day non-perishable food supplies. The kitchen is inaccessible to residents in care. Fire extinguisher was charged, mounted and located in hallway and the kitchen. Fire extinguishers were dated and tagged on April 1, 2026. LPA observed that the most recent fire inspection conducted at the facility was held on April 1, 2026. LPA observed all the required postings in the reception area of the facility. Facility had back-up emergency food and water supply, located in the storage room in the first floor. LPA observed that First Aid Kit had all the required components. Medications and toxins were also observed to be locked and inaccessible to residents in care. For the exterior portion, LPA observed patio furniture under shading, and the grounds were free of any hazards. No bodies of water were observed. Emergency disaster drill was conducted on March 4, 2026. LPA reviewed 8 resident files. All the required documentation were present and current in the resident files reviewed. LPA reviewed residents' medication and medication records. LPA reviewed two staff files. All staff are background cleared and associated to the facility. For today's visit, no deficiencies were issued per Title 22 Division 6 of the California Code of Regulations. An exit interview was conducted with Parminder Singh. A copy of this report was reviewed and provided at the end of visit.
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NAME OF LICENSING PROGRAM MANAGER: Sheila Santos	
NAME OF LICENSING PROGRAM ANALYST: Garlli Tat	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 04/27/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 04/27/2026