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Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 306002889
Report Date: 09/11/2024
Date Signed: 09/11/2024 04:38:30 PM

Document Has Been Signed on 09/11/2024 04:38 PM **- It Cannot Be Edited**

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

FACILITY NAME:	MEADOWLARK GARDENS IV		FACILITY NUMBER:	306002889
ADMINISTRATOR/DIRECTOR:	CHRISTINE WILKES		FACILITY TYPE:	740
ADDRESS:	16351 SARATOGA LANE		TELEPHONE:	(714) 840-1776
CITY:	HUNTINGTON BEACH	STATE: CA	ZIP CODE:	92649
CAPACITY: 6		CENSUS: 6	DATE:	09/11/2024
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED	TIME VISIT/ INSPECTION BEGAN:	01:03 PM
MET WITH:	Ronald Wilkes		TIME VISIT/ INSPECTION COMPLETED:	04:55 PM

NARRATIVE

Licensing Program Analyst (LPA) Michael Tea conducted an unannounced visit. The purpose of today's visit was to conduct the Annual Required inspection. At around 1:03 PM, LPA Tea was greeted and granted entry into the facility by caregivers, Mary Elizabeth Parke and Mary Ann Lawson and explained the reason for the visit. The administrator (AD) Ronald Wilkes arrived shortly to assist with the visit. The facility is licensed for six non-ambulatory residents with a hospice waiver for four. Currently there are six residents, of which two are on hospice during today's visit.

Around 1:35 PM, LPA Tea reviewed six resident files and two staff files. Resident files and staff files contained all required documentation. Upon review of records, the facility is up to date with required quarterly emergency disaster drills, which was last conducted in June 19, 2024. AD Wilkes administrator certificate is current and expires September 07, 2025.

LPA Tea along with House Manager Sharon Pajarillaga and AD Wilkes toured the facility at 2:30 PM. LPA toured the physical plant, checked food service, and the first aid kit. The facility is a single-story home, that consists of 5 resident bedrooms, 1 staff room, 3 bathrooms, living room, dining room, kitchen and an attached garage. LPA observed smoke detectors/carbon monoxide in common areas and bedrooms are operational. Resident bedrooms had the required furniture, bed linens and closet/drawer space to accommodate each resident comfortably. Resident bathrooms were checked. Toilets and water faucets worked properly, grab bars were secure, and showers were free of mold/mildew. Water temperature measured around 113.1 F degrees. Resident bath towels, toiletries and personal hygiene supplies were adequately stocked at time of visit. Common areas were clean and clear of hazards, doorways were free of obstructions. First aid kit had all the required elements including bandages, tweezers, thermometer, and scissors. Kitchen was inspected. Perishable and non-perishable food supply was checked and adequately stocked at time of visit. LPA observed sharps locked and inaccessible to residents in a cabinet in the garage. LPA also observed toxin substances secured in the same cabinet in the garage.

Annual continuation on LIC809-C

NAME OF LICENSING PROGRAM MANAGER: Alisa Ortiz
NAME OF LICENSING PROGRAM ANALYST: Michael Tea
LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 09/11/2024

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 09/11/2024

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

FACILITY EVALUATION REPORT (Cont)

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

FACILITY NAME: MEADOWLARK GARDENS IV **FACILITY NUMBER:** 306002889
VISIT DATE: 09/11/2024

NARRATIVE

The fire extinguisher in the kitchen is fully charged and was serviced on September 10, 2024. Kitchen appliances are operational during today's visit. LPA toured the outside grounds and there is ample seating underneath a shaded patio area in the backyard. The resident and their visitors sometimes hang out in the backyard.

There are two exit gates that are self-latching and operational on both sides of the house. LPA observed PPE supplies, emergency food and water stored in the garage. Facility provides activities based on their personal choice. Residents like to go for walks around the neighborhood and inside the facility. They play bingo, color, read magazines or books. A fitness instructor comes to the facility to have residents do exercises and dance. High school volunteers bring their pets for pet therapy for the residents. At the time of the visit, LPA observed resident eating lunch and lounging in the living room watching television.

At 2:47 PM LPA reviewed medication storage and administration. Medications are stored in a locked cabinet in the garage. Medications are being administered per physician order. LPA interviewed residents regarding their quality of care and spoke to staff present regarding care provided.

Based on the observation made during today’s visit, no deficiencies were noted today in the areas inspected per Title 22 Division 6 of the California Code of Regulations.

This report was reviewed with Administrator Ronald Wilkes and a copy of this report LIC809, along with the 809-C, LIC858, and LIC859 were read and provided to the facility.

NAME OF LICENSING PROGRAM MANAGER: Alisa Ortiz
NAME OF LICENSING PROGRAM ANALYST: Michael Tea
LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 09/11/2024

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

FACILITY REPRESENTATIVE SIGNATURE:	DATE: 09/11/2024