

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 306004759
Report Date: 12/11/2025
Date Signed: 12/11/2025 03:20:13 PM

Document Has Been Signed on 12/11/2025 03:20 PM - It Cannot Be Edited

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:	TLC ELDERLY RESIDENCE 1	FACILITY NUMBER:	306004759
ADMINISTRATOR/TALLAT BATLA		FACILITY TYPE:	740
DIRECTOR:		TELEPHONE:	(949) 367-9248
ADDRESS:	25751 GOLDEN ROD CIRCLE	ZIP CODE:	92653
CITY:	LAGUNA HILLS	STATE:	CA
CAPACITY:	6	CENSUS:	5
TYPE OF VISIT:	Required - 1 Year	DATE:	12/11/2025
		UNANNOUNCED TIME VISIT/INSPECTION	01:45 PM
		BEGAN:	
MET WITH:	Masroor Batla	TIME VISIT/INSPECTION	04:00 PM
		COMPLETED:	

NARRATIVE	
1	Licensing Program Analyst (LPA) Ruth Martinez is conducting this unannounced visit for the purpose of completing an annual required inspection. LPA arrived at the facility and was greeted and granted entry by caregiver. There are five residents at the facility and there are no residents receiving hospice services currently.
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6	LPA began the tour of the inside and outside of the facility. LPA observed required department postings throughout the facility. Facility stays within the capacity limitations. There is a minimum of one week of non-perishables foods and two days of perishables foods available. There is additional food storage in storage in two spare refrigerators located in the garage. The facility is maintained at a comfortable temperature. LPA inspected that medication is centrally stored in a safe locked storage cabinet located in the kitchen. LPA reviewed medication and observed medication was labeled and stored inaccessible to residents in care. LPA inspected the bathroom. LPA measured the hot water temperature which measured 111.10 Fahrenheit degrees. All bathrooms observed to have a supply of soap, toilet paper and towels. Bathroom is equipped with required safety measures such as non-skid mats and grab bars. Lighting is sufficient to ensure safety and comfort. The facility is equipped with sufficient hand hygiene, cleaning, and disinfecting supplies. LPA observed that toxic chemicals, cleaning solutions and disinfectants are stored locked in the storage closet. The facility has an available clean supply of linens. LPA inspected residents' bedrooms which has sufficient lighting to ensure the safety and comfort. All bedrooms observed to have all required components. Storage space is provided for residents in their bedroom. Smoke detectors were tested and found to be operational. LPA toured the outside of the facility and observed outdoor passageways are free of
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	Continued on LIC809-C

NAME OF LICENSING PROGRAM MANAGER:	Armando J Lucero
NAME OF LICENSING PROGRAM ANALYST:	Ruth Martinez

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 12/11/2025

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 12/11/2025

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 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: TLC ELDERLY RESIDENCE 1	FACILITY NUMBER: 306004759
	VISIT DATE: 12/11/2025

NARRATIVE	
1	obstructions. LPA observed there are shaded seating areas for residents' enjoyment. LPA observed a
2	swimming pool adjacent to the house with a fence around it. LPA observed the pool gate has two self-
3	latching entry door which opens away from the pool. Both fence entries have a key lock at the gate door
4	for inaccessibility. LPA measured the pool fence which measured 5ft from base of the floor to the top of
5	the fence and it was observed to enclose the entire pool area. LPA observed a fire extinguisher with
6	service date April 15, 2025, in the kitchen. Fire drills are conducted every three months. The facility is
7	two stories and LPA observed no resident in care to reside on the second floor. Residents in care do not
8	have access to the second story. LPA began review of records. LPA reviewed two resident records. All
9	the required documentation was present and current in the residents' files reviewed. LPA reviewed two
10	employee records. All employees present have a criminal record clearance and are associated to the
11	facility. LPA observed records reviewed have a current First Aid certificate.
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13	Based on the observations made during today's visit, no deficiencies were noted today in the areas
14	inspected per Title 22 Division 6 of the California Code of Regulations.
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16	This report was reviewed with the Administrator and a copy of this report was provided to the facility.
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NAME OF LICENSING PROGRAM MANAGER: Armando J Lucero	
NAME OF LICENSING PROGRAM ANALYST: Ruth Martinez	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 12/11/2025
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 12/11/2025