

# Department of SOCIAL SERVICES

*Community Care Licensing*

## *FACILITY EVALUATION REPORT*

**Facility Number:** 306005505  
**Report Date:** 12/23/2025  
**Date Signed:** 12/23/2025 03:58:28 PM

**Document Has Been Signed on** 12/23/2025 03:58 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
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FACILITY NAME:	SELECT SENIOR CARE LLC	FACILITY NUMBER:	306005505
ADMINISTRATOR/DATCU, DANIEL DIRECTOR:		FACILITY TYPE:	740
ADDRESS:	1221 N BIG SPRING ST	TELEPHONE:	(714) 695-9370
CITY:	ANAHEIM	STATE: CA	ZIP CODE: 92807
CAPACITY:	6	CENSUS: 5	DATE: 12/23/2025
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED TIME VISIT/INSPECTION	BEGAN: 01:15 PM
MET WITH:	Administrator Daniel Dactu and Brandon Mora	TIME VISIT/INSPECTION	COMPLETED: 04:30 PM

NARRATIVE	
1	On December 23, 2025, Licensing Program Analyst (LPA) Jenifer Tirre conducted an unannounced
2	required annual visit. LPA was greeted by staff and granted entry after stating the purpose of the visit.
3	Administrator Daniel Dactu was available to assist with the facility inspection.
4	
5	The facility is licensed for six (6) Non ambulatory of which one (1) may be bed ridden with approved
6	Hospice waiver of four (4). There are five (5) Residents present during today's visit of which one (1) is
7	on hospice.
8	
9	This is a two story home with attached garage facility. The facility has seven rooms located on first floor
10	(six private resident rooms and one (1) staff room) and four (4) bathrooms. Second floor is three (3)
11	bedrooms for live in staff. Residents do not have access to second floor.
12	
13	LPA conducted a tour of the physical plant accompanied by Administrator Daniel Dactu, and the
14	following was observed: There were no bodies of water on the premises. All rooms were inspected.
15	Beds and bedding supplies were in operational condition, lighting was provided, and storage for the
16	residents' personal belongings was observed. Bathrooms were operational with water temperature
17	measured between 106.5 to 107.9 degrees F. A comfortable temperature of 71 degrees F. was
18	maintained in the facility.
19	
20	
21	
22	
23	LPA observed the facility to be furnished at the time of the visit. Storage areas for personal hygiene,
24	toxins and sharps objects were stored and not accessible to residents. The kitchen was inspected, and
25	sufficient perishable and non-perishable food was maintained adequately. Facility has emergency food and water supply. Two fire extinguishers was mounted and fully charged.

**NAME OF LICENSING PROGRAM MANAGER:** Lourdes Montoya

**LICENSING PROGRAM ANALYST SIGNATURE:**



**DATE:** 12/23/2025

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

**FACILITY REPRESENTATIVE SIGNATURE:**



**DATE:** 12/23/2025

**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

**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.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY  <b>FACILITY EVALUATION REPORT (Cont)</b>	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION ORANGE COUNTY RO, 770 THE CITY DR., SUITE 7100 ORANGE, CA 92868
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**FACILITY NAME:** SELECT SENIOR CARE LLC

**FACILITY NUMBER:** 306005505

**VISIT DATE:** 12/23/2025

<b>NARRATIVE</b>	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32	<p>During the visit, LPA observed the facility has a supply of Personal Protective Equipment (PPE). All mandated inspection control posters were posted.</p> <p>LPA observed First Aid Kit was maintained. The last fire drill was conducted on December 01, 2025. The facility had operational smoke and carbon monoxide detectors in bedrooms and common areas. The facility has current liability insurance on file effective 12/18/2025- 12/18/2026.</p> <p>A review of five residents (R1-R5) service files and three staff (S1-S3) personnel files was revealed to be complete. The facility has the current administrator's certification on file for Daniel Dactu Expiration 3/12/2026.</p> <p>No deficiencies during this inspection visit.</p> <p>An exit interview was conducted with Administrator Daniel Dactu, and a copy of the report was provided.</p>

<b>NAME OF LICENSING PROGRAM MANAGER:</b> Lourdes Montoya <b>NAME OF LICENSING PROGRAM ANALYST:</b> Jenifer Tirre <b>LICENSING PROGRAM ANALYST SIGNATURE:</b>	<b>DATE:</b> 12/23/2025
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**I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.**

<b>FACILITY REPRESENTATIVE SIGNATURE:</b>	<b>DATE:</b> 12/23/2025
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