

Department of  
**SOCIAL SERVICES**

*Community Care Licensing*

***FACILITY EVALUATION REPORT***

**Facility Number:** 306006095  
**Report Date:** 02/22/2023  
**Date Signed:** 02/22/2023 05:28:20 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION ORANGE & INLAND A/SC, 770 THE CITY DR., SUITE 7100 ORANGE, CA 92868
<b>FACILITY EVALUATION REPORT</b>	

FACILITY NAME: EPIC ASSISTANCE CARE HOME	FACILITY NUMBER: 306006095
ADMINISTRATOR: MESDJIAN, LIZA	FACILITY TYPE: 740
ADDRESS: 26751 CARRETAS DRIVE	TELEPHONE: (818) 220-0282
CITY: MISSION VIEJO STATE: CA	ZIP CODE: 92691
CAPACITY: 6 CENSUS: 5	DATE: 02/22/2023
TYPE OF VISIT: Case Management - Deficiencies UNANNOUNCED	TIME BEGAN: 04:30 PM
MET WITH: Liza Mesdjian, administrator (via telephone)	TIME COMPLETED: 05:30 PM

NARRATIVE	
1	On this day, Licensing Program Analyst (LPA) Kevin Saborit-Guasch conducted an unannounced visit to
2	the facility for the purpose of documenting deficiencies observed during the initial investigation of the
3	allegations in complaint reference #22-AS-20230217143103. LPA was greeted and granted entry by
4	caregiving staff and spoke with administrator by telephone.
5	
6	During the health and safety tour of the physical plant, LPA observed that the mounted fire extinguisher
7	had maintenance tags dated August 2021, meaning the required maintenance is outdated by six
8	months.
9	
10	A review of resident records at the facility showed that four out of the five physician reports indicated a
11	confirmed dementia diagnosis yet were dated by up to two years prior and were therefore outdated per
12	the Title 22 regulations requirements.
13	
14	The physician report for resident R1 indicates that upon admission, resident was healing from a Stage 3
15	dermal ulcer. No records of an exemption request to admit a resident with a Prohibited or Restricted
16	Health Condition were found. A Technical Violation advisory is issued to the licensee.
17	
18	LPA was able to verify administrator's Liza Mesdjian's administrator certificate is current. However, the
19	certificates posted in facility per Title 22 regulations are shown to be outdated and related to individuals
20	no longer associated to the facility. A Technical Assistance advisory note is issued.
21	
22	
23	Based on observation and records reviewed at the facility, two deficiencies are being cited per Title 22
24	Division 6 of the California Code of Regulations. An exit interview was conducted via telephone and a
25	copy of the report along with appeal rights was provided and left at the facility.

<b>NAME OF LICENSING PROGRAM MANAGER:</b> Sheila Santos
<b>NAME OF LICENSING PROGRAM ANALYST:</b> Kevin Saborit-Guasch

**LICENSING PROGRAM ANALYST SIGNATURE:**



**DATE:** 02/22/2023

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

**FACILITY REPRESENTATIVE SIGNATURE:**



**DATE:** 02/22/2023

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

LIC809 (FAS) - (06/04)

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**Created By: Kevin Saborit-Guasch On 02/22/2023 at 05:01 PM**

**Link to Parent Document Below:**

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

**FACILITY NAME:** EPIC ASSISTANCE CARE HOME

**FACILITY NUMBER:** 306006095

**DEFICIENCY INFORMATION FOR THIS PAGE:**

**VISIT DATE:** 02/22/2023

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)	
Type B 03/22/2023 Section Cited	1 The California Code of Regulations 2 Title 7 Section 6151(e)(3) indicates 3 that: "Portable fire extinguishers shall 4 be subjected to an annual 5 maintenance check. " 6 7		
	8 This requirement is not met as 9 evidenced by: 10 Based on observation and record 11 review, fire extinguisher maintenance 12 is out of date since August 2022 13 which poses a potential Health, 14 Safety, or Personal Rights risk to persons in care.	8 9 10 11 12 13 14	
Type B 03/22/2023 Section Cited	1 The California Code of Regulations 2 Section 87705(c)(5) on the Care of 3 Persons with Dementia states that: 4 "Each resident with dementia shall 5 have an annual medical assessment 6 as specified in Section 87458, 7 Medical Assessment, (...)		
	8 This requirement is not met as 9 evidenced by: Based on review, the 10 four resident records observed to 11 include an outdated physician report 12 for residents with confirmed dementia 13 diagnoses, which poses a potential 14 Health, Safety, or Personal Rights risk to persons in care.	8 9 10 11 12 13 14	

**Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.**

<b>SUPERVISOR'S NAME:</b>	Sheila Santos
<b>LICENSING EVALUATOR NAME:</b>	Kevin Saborit-Guasch

**LICENSING EVALUATOR SIGNATURE:**



**DATE:** 02/22/2023

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

**FACILITY REPRESENTATIVE SIGNATURE:**



**DATE:** 02/22/2023