

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 306006475
Report Date: 06/17/2026
Date Signed: 06/17/2026 03:31:20 PM

Document Has Been Signed on 06/17/2026 03:31 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:	LOVING CARE OF HUNTINGTON BEACH	FACILITY NUMBER:	306006475
ADMINISTRATOR/KANASE, VIJAY		FACILITY TYPE:	740
DIRECTOR:			
ADDRESS:	8271 KINER DRIVE	TELEPHONE:	(562) 234-7657
CITY:	HUNTINGTON BEACH	STATE: CA	ZIP CODE: 92646
CAPACITY: 6		CENSUS: 5	DATE: 06/17/2026
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCEDTIME VISIT/INSPECTION	01:00 PM
MET WITH:		BEGAN: TIME VISIT/INSPECTION	03:45 PM
		COMPLETED:	

NARRATIVE	
1	On June 17, 2026, Licensing Program Analyst (LPA) Eboni Bentley arrived unannounced for the purposes of conducting a required 1-Year annual visit using the CARE Inspection Tool. LPA Bentley was greeted and granted entry into the facility after stating the reason for the visit, and met with Administrators (Admins) Vijay Kanase and Myrna Ebreo.
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6	The facility is licensed to operate age 60 and over for (6) non-ambulatory residents of which one (1) may be bedridden, with a Hospice waiver for six (6). The building is a single story structure located in a residential neighborhood, which consists of the following: four (4) resident bedrooms, one (1) staff bedroom, three (3) bathrooms, living area, dining room area, kitchen, outdoor covered seating areas, and an attached two car garage. LPA Bentley toured the inside and outside of the physical plant with Admin. There were no bodies of water or obstructions on the premises. All rooms were inspected and the facility was observed to be appropriately furnished at the time of visit. Beds and bedding supplies were in good condition, adequate lighting was provided, storage for each resident's personal belongings was observed. Additional linens, comforters, and bath towels were adequately stocked and available. Bathrooms were found to be clean and operational with water temperatures measured between 109.4 degrees F to 114.8 degrees F. The kitchen was observed clean, all appliances were operational, and there is a two-day supply of perishable and seven-day supply of non-perishable food available. Toxins, disinfectants, sharps, and medications were secured and inaccessible to residents in care. The fireplace was covered with a screen and secure. The garage and backyard were observed free of clutter and debris and the facility has two exit gates that was operational during the visit.
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NAME OF LICENSING PROGRAM MANAGER:	Kevin Saborit-Guasch
NAME OF LICENSING PROGRAM ANALYST:	Eboni Bentley

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 06/17/2026

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 06/17/2026

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: LOVING CARE OF HUNTINGTON BEACH

FACILITY NUMBER: 306006475
VISIT DATE: 06/17/2026

NARRATIVE	
1	The smoke alarms and carbon monoxide detectors were operable. An emergency safety drill was last conducted on April 30, 2026 and are conducted quarterly. Emergency food, emergency water, and emergency supplies were stored in the garage. The facility has one (1) fire extinguisher that was charged, mounted, and serviced on November 21, 2025. First aid kit is maintained and contains all the necessary elements. A working telephone (714-843-9384) remains available and the facility has a device that can be used for video teleconference purposes. LPA Bentley conducted an audit of five (5) resident files (R1-R5), four (4) staff files (S1-S4), and medication and medication administration records review were all found in order and complete. Interviews were conducted with staff and residents. Liability Insurance is effective August 13, 2025 and expires on August 13, 2026. Based on today's observations, no deficiencies were cited during the visit, per Title 22, Division 6, Chapter 8 of the California Code of Regulations. An exit interview was conducted with Administrators (Admins) Vijay Kanase and Myrna Ebreo, and a copy of this report was provided at the end of the visit.
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NAME OF LICENSING PROGRAM MANAGER: Kevin Saborit-Guasch	
NAME OF LICENSING PROGRAM ANALYST: Eboni Bentley	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 06/17/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 06/17/2026