

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 315920051
Report Date: 09/10/2025
Date Signed: 09/10/2025 04:13:20 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SACRAMENTO NORTH ASC, 9835 GOETHE ROAD, SUITE 100 SACRAMENTO, CA 95827
FACILITY EVALUATION REPORT	

FACILITY NAME:	SONRISA SENIOR LIVING	FACILITY NUMBER:	315920051
ADMINISTRATOR/CLYMO, MICHAEL		FACILITY TYPE:	740
DIRECTOR:		TELEPHONE:	(279) 213-0047
ADDRESS:	1031 ROSEVILLE PKWY	STATE: CA	ZIP CODE: 95678
CITY:	ROSEVILLE	CENSUS: 119	DATE: 09/10/2025
CAPACITY: 199		UNANNOUNCED TIME VISIT/ INSPECTION	10:20 AM
TYPE OF VISIT: Required - 1 Year		BEGAN:	
		TIME VISIT/ INSPECTION	04:25 PM
MET WITH: Michael Clymo		COMPLETED:	

NARRATIVE	
1	On 9/10/25, Licensing Program Analyst (LPA) Kevin Mknelly arrived unannounced at
2	the facility to conduct a required annual inspection utilizing the full CARE tool. LPA
3	met with Executive Director, Michael Clymo, and explained the purpose of the visit.
4	
5	
6	During today's inspection, LPAs and Executive Director conducted a tour the interior
7	and exterior of the facility. Areas toured included but not limited to: courtyard,
8	memory care unit bedrooms, assisted living unit bedrooms, main dining, kitchen,
9	gym, and the common areas. LPAs observed care staff assisting residents with
10	walking and other activities. LPAs observed the facility to be clean, safe and in good
11	repair.
12	
13	File review was conducted for 6 residents and 2 personnel files. LPAs observed the
14	files to be mostly complete with the required documents. Inspection tool completed
15	and found staff training documentation to not contain required training for some staff.
16	
17	
18	As a result of this investigation, LPA finds allegation to be (S) Substantiated - A
19	finding that the complaint is Substantiated means that the allegation is valid because
20	the preponderance of the evidence standard has been met. The following
21	deficiencies were cited on 9099-D, per Title 22 Regulations, Division 6. (B) This
22	poses a potential Health and Safety risk, or personal rights violation, to
23	clients/residents in care.
24	
25	Report reviewed with Michael Clymo . Copy of this report and appeal rights
	provided.

NAME OF LICENSING PROGRAM MANAGER: Maribeth Senty NAME OF LICENSING PROGRAM ANALYST: Kevin Mknelly LICENSING PROGRAM ANALYST SIGNATURE: 	DATE: 09/10/2025
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I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

FACILITY REPRESENTATIVE SIGNATURE: 	DATE: 09/10/2025
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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.

LIC809 (FAS) - (09/23)

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Created By: Kevin Mknelly On 09/10/2025 at 03:22 PM
Link to Parent Document Below:

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY FACILITY EVALUATION REPORT (Cont)	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION , 9835 GOETHE ROAD, SUITE 100 SACRAMENTO, CA 95827
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FACILITY NAME: SONRISA SENIOR LIVING

FACILITY NUMBER: 315920051

DEFICIENCY INFORMATION FOR THIS PAGE:

VISIT DATE: 09/10/2025

DEFICIENCIES & PLANS OF CORRECTION (POCs)

	Type B	Section Cited	HSC	1569.625(b)(2)	
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Other Provisions

(2) In addition to paragraph (1), training requirements shall also include an additional 20 hours annually, eight hours of which shall be dementia care training, as required by subdivision (a) of Section 1569.626, and four hours of which shall be specific to postural supports, restricted health conditions, and hospice care, as required by subdivision (a) of Section 1569.696. This training shall be administered on the job, or in a classroom setting, or both, and may include online training.

This requirement is not met as evidenced by:

	Deficient Practice Statement
1	Based on record review, the licensee did not comply with the section cited above in 4 of 4 staff files (S1-4), which poses/posed a potential health, safety or personal rights risk to persons in care.
2	
3	
4	
POC Due Date: 10/08/2025	
Plan of Correction	
1	Licensee will submit proof of staff training as outlined in CCR and PIN 23-16-ASC for the four identified staff as well as a plan to ensure provide and audit training.
2	
3	
4	

	Type B	Section Cited	HSC	1569.69(a)(1)	
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Other Provisions

(a) Each residential care facility for the elderly licensed under this chapter shall ensure that each employee of the facility who assists residents with the self-administration of medications meets all of the following training requirements: (1) In facilities licensed to provide care for 16 or more persons, the employee shall complete 24 hours of initial training. This training shall consist of 16 hours of hands-on shadowing training, which shall be completed prior to assisting with the self-administration of medications, and 8 hours of other training or instruction, as described in subdivision (f), which shall be completed within the first four weeks of employment.

This requirement is not met as evidenced by:

	Deficient Practice Statement

1	Based on record review, the licensee did not comply with the section cited above in 2 of two med tech records reviewed (S3-4) which poses/posed a potential health, safety or personal rights risk to persons in care.
2	
3	
4	
POC Due Date: 10/08/2025	
Plan of Correction	
1	Licensee will submit proof of staff training as outlined in CCR and PIN 23-16-ASC for S3-4 as well as a plan to ensure provide and audit training.
2	
3	
4	

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

NAME OF LICENSING PROGRAM MANAGER:	Maribeth Senty
NAME OF LICENSING PROGRAM ANALYST:	Kevin Mknelly
LICENSING PROGRAM ANALYST SIGNATURE:	
	DATE: 09/10/2025
I acknowledge receipt of this form and understand my appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	
	DATE: 09/10/2025