<meta name="robots" content="noindex">

Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 315920164
Report Date: 06/27/2025
Date Signed: 06/27/2025 04:07:37 PM

Document Has Been Signed on 06/27/2025 04:07 PM **- It Cannot Be Edited**

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

FACILITY NAME:	ROCKLIN MODERN CARE			FACILITY NUMBER:	315920164
ADMINISTRATOR/ DIRECTOR:	CHU, CHRISTPHER			FACILITY TYPE:	740
ADDRESS:	5720 MORNING SIDE CT.			TELEPHONE:	(916) 202-5008
CITY:	ROCKLIN	STATE: CA		ZIP CODE:	95677
CAPACITY: 6		CENSUS: 5		DATE:	06/27/2025
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED		TIME VISIT/ INSPECTION BEGAN:	01:04 PM
MET WITH:	Administrator - Kaydian Pryce			TIME VISIT/ INSPECTION COMPLETED:	03:40 PM

NARRATIVE

On 06/27/25 Licensing Program Manager (LPM) Troy Ordonez and Licensing Program Analyst (LPA) Graham Gunby arrived unannounced at the facility to conduct a required 1-year annual inspection. LPA met with Administrator, Kaydian Pryce, and explained the purpose of the visit.

LPM, LPA and Admin conducted a tour of the interior and exterior of the facility. Areas toured included but not limited to: resident rooms, bathrooms, kitchen, dining room, common areas, and back yard. LPA observed medications, cleaners, and sharps to be locked and inaccessible to residents. The residence was found to be clean, safe, sanitary and in good condition.

LPA observed the facility to have the mandated posters posted. Fire extinguishers are maintained and ready for emergency use. Facility has required food supplies.

LPA conducted a file review of five (5) resident files and three (3) staff files. During review of the facility files and interviews, LPM and LPA observed (1) caregiver working at the facility that was not fingerprint cleared. Administrator stated they have been working for a month, and caregiver was not fingerprint cleared.

Deficiencies are cited on 809-D and civil penalties will be assessed. Exit interview conducted and a copy of the report and appeal rights were emailed to Administrator.

NAME OF LICENSING PROGRAM MANAGER: Troy Ordonez

NAME OF LICENSING PROGRAM ANALYST: Graham Gunby **LICENSING PROGRAM ANALYST SIGNATURE:**	**DATE:** 06/27/2025
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	**DATE:** 06/27/2025

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.

Document Has Been Signed on 06/27/2025 04:07 PM **- It Cannot Be Edited**

Created By: Graham Gunby On 06/27/2025 at 03:06 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

FACILITY NAME: ROCKLIN MODERN CARE **FACILITY NUMBER:** 315920164
DEFICIENCY INFORMATION FOR THIS PAGE: **VISIT DATE:** 06/27/2025

DEFICIENCIES & PLANS OF CORRECTION (POCs)

	Type A	Section Cited	HSC	87355	

This requirement is not met as evidenced by: 87355 Crinimal Record Clearance (e) All individuals subject to a criminal record review pursuant to Health and Safety Code Section 1569.17(b) shall prior to working, residing, or volunteering in a licensed facility: (2) Obtain a California clearance or a criminal record exemption as required by the Department.

	Deficient Practice Statement
1 2 3 4	Based on interview and file review, Licensee did not comply with the section cited above as S1 was observed working at the facility without a fingerprint clearance which poses an immediate risk for residents in care.
	POC Due Date: 06/30/2025
	Plan of Correction
1 2 3 4	S1 was aked to leave facility. Licensee will submit a statement of understanding that all staff are required to have a criminal record cleared prior to working, residing, or volunteering in a licensed facility

		Section Cited			

	Deficient Practice Statement
1 2 3 4	
	POC Due Date:
	Plan of Correction
1 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:	Troy Ordonez
NAME OF LICENSING PROGRAM ANALYST:	Graham Gunby

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 06/27/2025

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 06/27/2025