

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 342701154
Report Date: 07/31/2026
Date Signed: 07/31/2026 04:47:30 PM

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

FACILITY NAME:	SHERRY'S RCFE	FACILITY NUMBER:	342701154
ADMINISTRATOR/AHUJA, SHERRY V. DIRECTOR:		FACILITY TYPE:	740
ADDRESS:	3996 WILDROSE WAY	TELEPHONE:	(650) 690-4881
CITY:	SACRAMENTO	STATE: CA	ZIP CODE: 95826
CAPACITY: 6		CENSUS: 6	DATE: 07/31/2026
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED TIME VISIT/ INSPECTION	03:00 PM
MET WITH:	Sherry Ahuja	BEGAN: TIME VISIT/ INSPECTION	05:00 PM
		COMPLETED:	

NARRATIVE	
1	Licensing Program Analyst (LPA) Christina Valerio arrived unannounced to the facility to conduct an annual required inspection. LPA Valerio met with facility staff Telka Grant, and explained the purpose of the visit. LPA was later met by facility administrator Sherry Ahuja
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5	Upon entry, LPA Valerio observed two staff on shift. LPA Valerio observed a ring camera facing the living room area. According to administrator Sherry, she just installed it a couple days ago and will be removing it today. LPA Valerio informed Administrator of the Guidelines for Video Surveillance and stated before installing a camera pointed a private area, the facility needs to obtain a waiver. Administrator requested LPA send guidelines via cell phone. LPA Valerio inspected resident bedrooms. Resident bedrooms were fully furnished. LPA Valerio inspected the facility bathroom. The bathroom was observed to deliver hot water at 130.1 degrees Fahrenheit, which is above the regulatory range of 105.0 to 120 degrees F. Before leaving, the temperature of the water was measured at 111.0 degrees F. The facility common areas was observed to be fully furnished and free from odors. In the living room area, there is a table under the television. On this table, LPA Valerio observed a bottle of acetaminophen and a unidentified blue pill, which was cut in half, accessible to residents in care. The kitchen was observed to have an unlocked cabinet with a pair of scissors. The facility was observed to have an adequate food supply located in the kitchen, pantry, and extra refrigerator in the garage. In the garage, LPA Valerio observed a locked door, which was observed to be a staff bedroom. LPA Valerio requested a copy of the facility sketch. According to administrator Sherry, she did not submit this to the licensing office. LPA Valerio requested copies of the permits for the construction done to the garage.
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	Continues on LIC 809 - C...

Stephen Richardson	
Christina Valerio	

DATE: 07/31/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 07/31/2026

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.

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

FACILITY NAME: SHERRY'S RCFE

FACILITY NUMBER: 342701154

VISIT DATE: 07/31/2026

NARRATIVE	
1	LPA Valerio reviewed two resident files and two staff files. LPA Valerio observed a fire extinguisher to be
2	fully charged with an annual inspection tag dated 2026. LPA observed carbon monoxide detector to be
3	in working condition. The date of the last fire drill was 07/13/2026
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5	The exterior area was observed to be free from obstructions. The pool area is fenced and covered.
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7	LPA Valerio requested the following:
8	- LIC 500
9	- LIC 308
10	- LIC 610D
11	- Copy of liability insurance
12	- Permits for construction in garage
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16	Per California code of regulations (CCR) - deficiencies are being cited on the attached LIC 809 - D
17	page. Appeal rights were provided to Administrator Sherry. Failure to correct deficiencies may result in
18	civil penalties.
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21	An exit interview was conducted, and a copy of this report was provided.
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NAME OF LICENSING PROGRAM MANAGER: Stephen Richardson	
NAME OF LICENSING PROGRAM ANALYST: Christina Valerio	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 07/31/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 07/31/2026

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FACILITY EVALUATION REPORT (Cont)**FACILITY NAME:** SHERRY'S RCFE**FACILITY NUMBER:** 342701154**DEFICIENCY INFORMATION FOR THIS PAGE:****VISIT DATE:** 07/31/2026**DEFICIENCIES & PLANS OF CORRECTION (POCs)**

	Type A	Section Cited	CCR	87309(a)	
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Storage Space and Access

(a) Except as specified in subsection (b), the licensee shall ensure that disinfectants, cleaning solutions, poisonous substances, knives, matches, tools, sharp objects, and other similar items which could pose a danger to residents are in locked storage and are not left unattended if outside the locked storage.

This requirement is not met as evidenced by:

	Deficient Practice Statement
1 2 3 4	Based on observation, the licensee did not comply with the section cited above by having scissors in an unlocked cabinet, which poses an immediate health, safety or personal rights risk to persons in care.
	POC Due Date: 08/01/2026
	Plan of Correction
1 2 3 4	Licensee had scissors put away and locked. Licensee to provide training to staff. LPA to receive a copy of the in-service.

	Type A	Section Cited	CCR	87465(h)(2)	
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Incidental Medical and Dental Care Services

(h) The following requirements shall apply to medications which are centrally stored: (2) Centrally stored medicines shall be kept in a safe and locked place that is not accessible to persons other than employees responsible for the supervision of the centrally stored medication.

This requirement is not met as evidenced by:

	Deficient Practice Statement
1 2 3 4	Based on observation, the licensee did not comply with the section cited above by having a bottle of medication and an unidentified pill on a table, which poses an immediate health, safety or personal rights risk to persons in care.
	POC Due Date: 08/01/2026
	Plan of Correction
1 2 3 4	Licensee locked the bottle in the medication cabinet and destroyed the pill. Licensee will conduct an in-service training on medications with staff. LPA Valerio to receive a copy of training.

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:	Stephen Richardson
NAME OF LICENSING PROGRAM ANALYST:	Christina Valerio
LICENSING PROGRAM ANALYST SIGNATURE:	
	DATE: 07/31/2026
I acknowledge receipt of this form and understand my appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	
	DATE: 07/31/2026

