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

Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 342701213
Report Date: 08/26/2026
Date Signed: 08/26/2026 04:11:49 PM

Document Has Been Signed on 08/26/2026 04:11 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 SOUTH ASC, 9835 GOETHE ROAD, SUITE 100 SACRAMENTO, CA 95827

FACILITY NAME:	CARLTON SENIOR LIVING SACRAMENTO		FACILITY NUMBER:	342701213
ADMINISTRATOR/ DIRECTOR:	WIMMER, KASIE		FACILITY TYPE:	740
ADDRESS:	1075 FULTON AVENUE		TELEPHONE:	(916) 971-4800
CITY:	SACRAMENTO	STATE: CA	ZIP CODE:	95825
CAPACITY: 185		CENSUS: 131	DATE:	08/26/2026
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED	TIME VISIT/ INSPECTION BEGAN:	11:15 AM
MET WITH:	Administrator- Kassie Wimmer		TIME VISIT/ INSPECTION COMPLETED:	02:00 PM

NARRATIVE

On August 26, 2026, at 11:15 PM, Licensing Program Analyst (LPA) Sulma Lopez and Licensing Program Manager (LPM) Arielle Pascua arrived unannounced at the facility to conduct an annual required inspection. LPA Lopez and LPM Pascua met with Administrator Kassie Wimmer and explained the purpose of today's visit.

The Administrator holds current certificate 7010128740 and expires on May 21, 2027. The facility is approved for 120 non-ambulatory and 65 ambulatory residents ages 60 and over. There is a hospice waiver approved for (20) residents. There are currently 131 residents who reside at this facility.

At 12:00 PM, LPA reviewed (10) staff and (10) resident files. The files are maintained and kept current. The facility has a current Infection Control Plan and Emergency Control Plan which are being reviewed and updated on a regular basis. The facility conducts monthly fire drills and the most recent one took place on August 17, 2026.

At 1:10 PM, LPA and LPM toured the facility with the administrator. The facility was clean, safe, and in good repair. The facility temperature was 75 degrees. The facility's hot water temperature was 110 degrees. The facility's fire extinguishers were last inspected on August 8, 2026. The facility carbon monoxide and fire alarms are located on the ceilings. LPA observed the dining area which was clean and free of hazards. The facility kitchen contained a 7- day supply of non-perishable foods, and at least 2 days of perishable food items. Facility cleaning supplies, toxins, and sharps are stored in the kitchen and made inaccessible to residents.

Continued on LIC 809-C.

Arielle Pascua
Sulma Lopez

	**DATE:** 08/26/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

	**DATE:** 08/26/2026

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 **FACILITY EVALUATION REPORT (Cont)**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SACRAMENTO SOUTH ASC, 9835 GOETHE ROAD, SUITE 100 SACRAMENTO, CA 95827

FACILITY NAME: CARLTON SENIOR LIVING SACRAMENTO **FACILITY NUMBER:** 342701213

VISIT DATE: 08/26/2026

NARRATIVE

The courtyard contained shaded seating areas for resident use. LPA observed the activity room in which residents were participating in structured activity.

LPA toured the memory care side of the building and inspected resident rooms. The residents' bedrooms were clean, free of odors, and contained furniture that was in good repair. LPA tested the delayed egress doors which were alarmed and opened after 15 seconds.

at 1:50 PM, LPA conducted a medication administration record review with the Medication Technician Manager. The Medication Administration Records (MAR) are being recorded electronically. It was learned that medications are refilled at least 7 days prior to running out and overflow medications are stored to prevent missed doses.

As a result of today's annual inspection, no deficiencies are being cited. The facility is in compliance with Title 22 regulations. An exit interview was conducted, and a copy of this report was provided to the facility.

NAME OF LICENSING PROGRAM MANAGER: Arielle Pascua
NAME OF LICENSING PROGRAM ANALYST: Sulma Lopez
LICENSING PROGRAM ANALYST SIGNATURE:
DATE: 08/26/2026

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

FACILITY REPRESENTATIVE SIGNATURE:
DATE: 08/26/2026