

Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 366423875

Report Date: 01/26/2026

Date Signed: 01/26/2026 03:09:54 PM

Document Has Been Signed on 01/26/2026 03:09 PM - It Cannot Be Edited

| | |
|--|---|
| STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY | CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SAN BERNARDINO, 1650 SPRUCE ST STE 200 MS29-27 RIVERSIDE, CA 92507 |
|--|---|

| | | | |
|-------------------------------------|-------------|-----------------------|----------------|
| FACILITY NAME: MISSION OF LOVE II | | FACILITY NUMBER: | 366423875 |
| ADMINISTRATOR/JESSICA V. VILLANUEVA | | FACILITY TYPE: | 740 |
| DIRECTOR: | | TELEPHONE: | (760) 947-5211 |
| ADDRESS: 11991 7TH AVENUE | STATE: CA | ZIP CODE: | 92345 |
| CITY: HESPERIA | CENSUS: 11 | DATE: | 01/26/2026 |
| CAPACITY: 14 | UNANNOUNCED | TIME VISIT/INSPECTION | 12:50 PM |
| TYPE OF VISIT: Required - 1 Year | | BEGAN: | |
| MET WITH: Jessica Villanueva | | TIME VISIT/INSPECTION | 03:15 PM |
| | | COMPLETED: | |

| NARRATIVE | |
|-----------|--|
| 1 | Licensing Program Analyst (LPA) Magda Malcore made an unannounced visit to the |
| 2 | facility to conduct a required annual inspection. LPA met with Jessica Villanueva, |
| 3 | Administrator, and discussed the purpose of the visit. |
| 4 | |
| 5 | |
| 6 | The facility is a Residential Care Facility for the Elderly (RCFE) with a license |
| 7 | capacity of (14) and a current census of (11) residents in care. LPA conducted an |
| 8 | overall inspection of the facility, which included, but was not limited to, the following: |
| 9 | |
| 10 | Physical Plant/Environment: Indoor and outdoor passageways are free of |
| 11 | obstruction. The facility has no swimming pools or similar bodies of water. The |
| 12 | facility has sufficient indoor and outdoor areas for resident activities. Outdoor shaded |
| 13 | area is sufficient for resident activities and is enclosed with latching gates. The |
| 14 | facility has sufficient lighting and is maintained at a comfortable temperature of 72 |
| 15 | degrees fahrenheit (F). Resident bathrooms audited were operating in a safe and |
| 16 | sanitary conditions. The hot water temperature in residents' bathrooms measured |
| 17 | 106 degrees F. Resident bedrooms audited had sufficient lighting and furniture in |
| 18 | good repair. Facility has smoke/carbon monoxide alarm system, fully charged fire |
| 19 | extinguishers, covered fireplace, emergency water, laundry equipment, and |
| 20 | telephone service. The facility has sufficient linen, towels, and personal hygiene |
| 21 | items for residents. The facility has posted in a common area: the Community Care |
| 22 | Licensing complaint poster, Ombudsman poster, Resident Personal Rights, facility |
| 23 | license and emergency telephone numbers. Facility staff maintains sharps, |
| 24 | disinfectants, and cleaning solutions in a locked cabinet. |
| 25 | |

NAME OF LICENSING PROGRAM MANAGER: Karen Clemons

NAME OF LICENSING PROGRAM ANALYST: Magda Malcore

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 01/26/2026

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 01/26/2026

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

