

Department of  
**SOCIAL SERVICES**

*Community Care Licensing*

***FACILITY EVALUATION REPORT***

**Facility Number:** 371881418  
**Report Date:** 06/14/2023  
**Date Signed:** 06/14/2023 02:55:43 PM

**Document Has Been Signed on** 06/14/2023 02:55 PM - **It Cannot Be Edited**

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 1650 SPRUCE ST STE 200 MS29-27 RIVERSIDE, CA 92507
<b>FACILITY EVALUATION REPORT</b>	

FACILITY NAME: VILLA BERNARDO	FACILITY NUMBER: 371881418
ADMINISTRATOR: DERAFERA, TESS	FACILITY TYPE: 740
ADDRESS: 2960 BERNARDO AVE	TELEPHONE: (858) 925-8858
CITY: ESCONDIDO	STATE: CA
CAPACITY: 10	ZIP CODE: 92029
TYPE OF VISIT: Prelicensing	CENSUS: 9
MET WITH: Applicant Zayden Chen	ANNOUNCED
	DATE: 06/14/2023
	TIME BEGAN: 02:00 PM
	TIME COMPLETED: 03:15 PM

NARRATIVE	
1	Licensing Program Analyst (LPA) Janira Arreola, conducted an announced visit for the purpose of
2	conducting the prelicensing inspection. LPA met with applicant Zayden Chen and administrator Teresa
3	Derafera for the visit. The applicant is seeking a change of ownership for a residential care facility for the
4	elderly with a capacity for (10) residents, ages 60 and up.
5	
6	LPA conducted a walk through of the interior and exterior of the facility. The home is a (10) bedroom and
7	(3) bathroom, one story home. The fire clearance conducted on 4/18/2023 by Escondido Fire
8	Department was approved the home for (10) non-ambulatory residents. The resident bedrooms were
9	observed to have the appropriate linens, furniture such as bed, dresser, closet space, light, night stand
10	and chair. The home has extra linens and bath towel in a hallway closet. First aid kit was locked in kept
11	locked with medications. The facility kitchen has enough pots and pans, cooking utensils, plates and
12	cups for (10) Residents. The applicant will send the LPA proof of purchase of non-perishable foods by
13	6/15/2023. LPA observed the bathrooms in the facility to have hand hygiene supplies, and personal care
14	items were kept in locked closet. The laundry room was observed be functional, and the facility
15	possesses cleaning supplies to conduct regular cleaning of the facility which were locked in laundry
16	room. The smoke alarms and carbon monoxide detectors were found in working condition. The dining
17	room was observed and the outdoor area is free of hazards. LPA observed the home has activities for
18	clients to engage in, and observed residents in their rooms and in living area playing BINGO. The hot
19	water temperature was recorded in the facility restroom at 109.7F and the land line was observed to be
20	operational (858-925-8858). No bodies of water or firearms are being kept in the facility. Kitchen knives
21	will be kept locked in a kitchen drawer.
22	
23	LPA observed the facilities MARS sheets for resident, Administrator's current certificate, and staff files
24	which were kept locked in facility hallway.
25	
	An exit interview was conducted were this report was reviewed and provided to the applicant, Zayden Chen and Administrator Teresa Derafera.

<b>NAME OF LICENSING PROGRAM MANAGER:</b> Joel Esquivel
<b>NAME OF LICENSING PROGRAM ANALYST:</b> Janira Arreola

**LICENSING PROGRAM ANALYST SIGNATURE:**



**DATE:** 06/14/2023

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

**FACILITY REPRESENTATIVE SIGNATURE:**



**DATE:** 06/14/2023

**This report must be available at Child Care and Group Home facilities for public review for 3 years.**