

# Department of SOCIAL SERVICES

## Community Care Licensing

# FACILITY EVALUATION REPORT

Facility Number: 374603625  
Report Date: 07/18/2025  
Date Signed: 07/18/2025 05:19:57 PM

Document Has Been Signed on 07/18/2025 05:19 PM - It Cannot Be Edited

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SAN DIEGO RO, 7575 METROPOLITAN DR. #109 SAN DIEGO, CA 92108
<b>FACILITY EVALUATION REPORT</b>	

FACILITY NAME: STELLAR CARE	FACILITY NUMBER: 374603625
ADMINISTRATOR/BRANDON CHO DIRECTOR:	FACILITY TYPE: 740
ADDRESS: 4518 54TH STREET	TELEPHONE: (619) 287-2920
CITY: SAN DIEGO	STATE: CA ZIP CODE: 92115
CAPACITY: 150	CENSUS: 94 DATE: 07/18/2025
TYPE OF VISIT: Required - 1 Year	UNANNOUNCED TIME VISIT/ INSPECTION 10:00 AM
MET WITH:	BEGAN: TIME VISIT/ INSPECTION 04:30 PM COMPLETED:

NARRATIVE	
1	Licensing Program Analyst (LPA) Amy Rodgers, made an unannounced visit to conduct the required
2	One-Year Inspection. LPA Rodgers were granted entry into the facility by Administrator Brandon Cho
3	after herself and stating the purpose of the inspection. The facility serves 150 elderly residents, age 60
4	and above, all whom may be non-ambulatory. Approved for ten (10) may be bedridden.
5	
6	LPA was accompanied by licensee staff for a tour of the facility, which was conducted inside and out and
7	included a sample of resident units, the dining area, recreation rooms and large patio area. The facility
8	had sufficient space and equipment to facilitate dining, laundry, visitation, meetings, and client activities.
9	Exterior and interior passageways were free from obstructions. Pull cords are present and easily
10	assessable to residents. Resident and facility room temperatures were within a comfortable range.
11	Client bedrooms contained the required furnishings. Doors, windows, toilets, and showers were in
12	working order. Extra linens and hygiene supplies were present.
13	
14	Facility has a two-day supply of perishable and a seven-day supply of nonperishable food items. Food
15	supply is replenished frequently by outside vendors. Food was observed to be properly stored and
16	labeled. Food menus and activities schedule were posted. Chemicals and cleaning supplies were stored
17	in a locked closet. The medication carts were locked and medications were labeled and kept in
18	compliance with label instructions. LPA reviewed multiple staff and client records/files. LPA interviewed
19	multiple staff and clients. LPA conducted a review of In-service training procedures. The staff and client
20	files which LPA reviewed contained required documents. Confidential records were stored in locked
21	areas.
22	
23	
24	No deficiencies were observed or cited during today's annual inspection. An exit interview was
25	conducted with Administrator Cho, to whom a copy of this report was provided during the visit.

NAME OF LICENSING PROGRAM MANAGER: Simon Jacob

**NAME OF LICENSING PROGRAM ANALYST:** Amy Rodgers

**LICENSING PROGRAM ANALYST SIGNATURE:**



**DATE:** 07/18/2025

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

**FACILITY REPRESENTATIVE SIGNATURE:**



**DATE:** 07/18/2025

**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.