

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 374603753
Report Date: 12/13/2024
Date Signed: 12/13/2024 11:08:53 AM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION RIVERSIDE ASC, 1650 SPRUCE ST STE 200 MS29-27 RIVERSIDE, CA 92507
FACILITY EVALUATION REPORT	

FACILITY NAME: SPLENDOR VALLEY, LLC	FACILITY NUMBER: 374603753
ADMINISTRATOR/LU, MARISA L	FACILITY TYPE: 740
DIRECTOR:	
ADDRESS: 930 ROCKWELL SPRINGS COURT	TELEPHONE: (760) 294-6399
CITY: ESCONDIDO	STATE: CA
CAPACITY: 6	ZIP CODE: 92025
TYPE OF VISIT: Required - 1 Year	CENSUS: 6
	DATE: 12/13/2024
	UNANNOUNCED TIME VISIT/INSPECTION
	BEGAN: 09:00 AM
MET WITH: Administrator, Mark Lu	TIME VISIT/INSPECTION
	COMPLETED: 11:30 AM

NARRATIVE	
1	Licensing Program Analyst (LPA) Kathleen Banrasavong arrived unannounced to conduct an annual
2	inspection. Upon arrival LPA was greeted by facility staff and granted entry. LPA began inspection with
3	introduction and visit purpose. Upon arrival LPA learned that six (6) residents live at this facility. There
4	was two (2) staff members present. The Licensee/Administrator, Mark Lu and his wife, Marisa Lu, was
5	advised of the annual and conducted and completed the facility tour.
6	
7	Client Records/Incident Reports/Clients Rights Information: LPA reviewed client records. Six (6)
8	records were reviewed. LPA reviewed for identification and emergency information, admission
9	agreement, medical assessment, and TB test results, needs and service plans, placement, functional
10	assessment, centrally stored medication/destruction records, safeguard for personal property/valuables,
11	and personal rights notification.
12	
13	Personnel Records/Training/ Staffing/ Administration: LPA reviewed employee records. Two (2)
14	records were reviewed. LPA reviewed employee records for first aid certification, criminal record
15	clearance or an exemption, health screening and TB test results, employee rights, training verification,
16	and current administrative organization. Mark Lu, Administrator's certificate expiration date was
17	04/22/2026 and Marisa Lu's is 08/09/2025.
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NAME OF LICENSING PROGRAM MANAGER: Jazmond D Harris

NAME OF LICENSING PROGRAM ANALYST: Kathleen Banrasavong
LICENSING PROGRAM ANALYST SIGNATURE:
 **DATE:** 12/13/2024

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

FACILITY REPRESENTATIVE SIGNATURE:
 **DATE:** 12/13/2024

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

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
FACILITY EVALUATION REPORT (Cont)	COMMUNITY CARE LICENSING DIVISION
	RIVERSIDE ASC, 1650 SPRUCE ST STE 200 MS29-27
	RIVERSIDE, CA 92507

FACILITY NAME: SPLENDOR VALLEY, LLC **FACILITY NUMBER:** 374603753
VISIT DATE: 12/13/2024

NARRATIVE

1 **Food Service:** Food prep areas are clean and organized. Food supply meets the requirement of one (1)
2 week supply of nonperishable and two (2) day supply of perishables. Emergency food and water supply
3 is present. There is a location for sharps in the kitchen.
4

5 **Physical Plant and Safety of Environment/Operational Requirements:** LPA toured the facility inside
6 and outside. LPA observed the facility to be clean and in good repair. The facility is maintained at 75
7 degrees for the client's comfort. Lighting is sufficient for safety. Water temperature measured 108.0
8 degrees F. Laundry is done in the laundry room. There is a locked location for storing laundry soap,
9 cleaning supplies and chemicals in the closet in the laundry room. All outdoor and indoor passageways
10 are free of obstruction. Emergency lighting is available. There is a telephone working at this location.
11 LPA dialed the facility's landline number, which rang and was operable. The LIC 610, emergency
12 disaster plan is maintained. There are no firearms at this facility. There is one (1) secured fireplace at
13 this facility. There are zero (0) pools at the facility. There are two (2) secured gate that have a self-
14 latching lock located on the northeast and northwest sides of the house. LPA observed emergency
15 supplies and one (1) first aid kit. The last emergency fire drill was conducted on 10/01/2024.
16

17 **Infection Control:** The LPA observed the hand washing stations in the facility restrooms and kitchen
18 had hand hygiene supplies and hand washing signs. LPA observed PPE equipment and cleaning
19 supplies to do regular cleaning of the facility. LPA reviewed the facility's infection control plan which met
20 department requirements. LPA reviewed staff records and found that staff had infection control training.
21

22 **Medications/Health Related Services/Incidental Medical Services:** The medications are centrally
23 stored. There is a locked cabinet allocated for medication storage. Centrally stored medication and
24 destruction logs are maintained separately. LPA reviewed medication logs and observed that they were
25 dispensed accurately.
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FACILITY EVALUATION REPORT (Cont)

FACILITY NAME: SPLENDOR VALLEY, LLC

FACILITY NUMBER: 374603753

VISIT DATE: 12/13/2024

NARRATIVE

1 LPA made observation throughout the inspection process to assess if the facility remains in conformity
2 with the State Fire Marshall regulations. LPA observed nine (9) dual smoke detectors and carbon
3 monoxide detectors throughout the facility. There were one (1) fire extinguishers on site, date charged
4 was 06/10/2024.

5
6 Pursuant to Title 22 of The California Code of Regulations Division 6, there are zero (0) deficiencies
7 observed. An exit interview was conducted, this LIC 809 was reviewed with, and a copy of this report
8 was provided to Administrator, Mark Lu.
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