

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 374604227

Report Date: 02/12/2026

Date Signed: 03/11/2026 03:36:00 PM

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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
FACILITY EVALUATION REPORT	

FACILITY NAME:	SUMMERFIELD OF ENCINITAS	FACILITY NUMBER:	374604227
ADMINISTRATOR/MARGRITZ, MERCEDES DIRECTOR:		FACILITY TYPE:	740
ADDRESS:	1350 S. EL CAMINO REAL	TELEPHONE:	(760) 479-1818
CITY:	ENCINITAS	STATE: CA	ZIP CODE: 92024
CAPACITY:	56	CENSUS: 40	DATE: 02/12/2026
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED TIME VISIT/ INSPECTION BEGAN:	09:10 AM
MET WITH:	Receptionist Emerald Jordan and Executive Director Mercedes Margritz	TIME VISIT/ INSPECTION COMPLETED:	03:20 PM

NARRATIVE

1 Licensing Program Analyst (LPA) Arian Golbakhsh conducted an unannounced, required Annual
2 Inspection. The facility file and personnel report was reviewed prior to the visit. LPA was welcomed by,
3 identified themselves to, and discussed the purpose of the visit to Business Office Manager Emerald
4 Jordan and Executive Director Mercedes Margritz. The facility's license shows a maximum capacity of
5 fifty-six (56) non-ambulatory residents. Additionally the facility is approved for a secured perimeter and
6 holds a hospice waiver for twenty (20). There is a separately licensed Adult Day Program on the same
7 property. During today's inspection there were forty (40) residents in care.
8
9 LPA and Executive Director Margritz toured the interior and exterior of the facility and inspected a
10 sample of occupied and unoccupied resident rooms. The facility was clean, sanitary, and in good repair.
11 Pathways were free of obstruction and slip hazards. Client bedrooms visited contained the required
12 furnishings. Doors, windows, screens, toilets, and showers were in working order. Hot water
13 temperature at taps accessible to clients were all compliant: one common bathroom sink was measured
14 at 106.8F. Extra linens and hygiene supplies were present, as well as Personal Protective Equipment.
15
16 The facility had sufficient space and equipment to facilitate dining, laundry, visitation, meetings, and
17 client activities. The facility contained at least two (2) days of perishable food, and at least seven (7)
18 days non-perishable food, all safely stored. Cooking, dining equipment, and utensils were present. As
19 the kitchen is locked and requires code access, knives were inaccessible to residents. Kitchenettes
20 accessible to residents throughout the facility did not contain knives or similar sharp objects.
21
22 [Continued on LIC 809-C]
23
24
25

NAME OF LICENSING PROGRAM MANAGER: Sabel Martinez

NAME OF LICENSING PROGRAM ANALYST: Arian Golbakhsh

LICENSING PROGRAM ANALYST SIGNATURE:


DATE: 02/12/2026

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

FACILITY REPRESENTATIVE SIGNATURE:


DATE: 02/12/2026

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.

FACILITY EVALUATION REPORT (Cont)

FACILITY NAME: SUMMERFIELD OF ENCINITAS

FACILITY NUMBER: 374604227

DEFICIENCY INFORMATION FOR THIS PAGE:

VISIT DATE: 02/12/2026

DEFICIENCIES & PLANS OF CORRECTION (POCs)

Type A

Section Cited

CCR

87309(a)

Storage Space and Access

(a) Except as specified in subsection (b), the licensee shall ensure that disinfectants, cleaning solutions, poisonous substances, knives, matches, tools, sharp objects, and other similar items which could pose a danger to residents are in locked storage and are not left unattended if outside the locked storage.

This requirement is not met as evidenced by:

Deficient Practice Statement

- 1 Based on LPA observation and interview, the licensee did not comply with the section cited above in
- 2 ensuring cleaning/disinfecting chemicals were kept locked and inaccessible to residents, which poses
- 3 an immediate health, safety and personal rights risk to 40 out of 40 persons in care.
- 4

POC Due Date: 02/26/2026**Plan of Correction**

- 1 Licensee immediately removed the items from accessible areas and placed them in secured storage.
- 2 Licensee will replace locks on the cabinets they wish the designate as chemical storage and conduct
- 3 review or retraining of chemical/toxic items storage procedures with staff and submit proof to LPA by
- 4 POC due date.

Section Cited

Deficient Practice Statement

- 1
- 2
- 3
- 4

POC Due Date:**Plan of Correction**

- 1
- 2
- 3
- 4

Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

NAME OF LICENSING PROGRAM

Sabel Martinez

MANAGER:**NAME OF LICENSING PROGRAM**

Arian Golbakhsh

ANALYST:**LICENSING PROGRAM ANALYST SIGNATURE:****DATE:** 02/12/2026

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

FACILITY REPRESENTATIVE SIGNATURE:**DATE:** 02/12/2026