

Department of  
**SOCIAL SERVICES**

*Community Care Licensing*

***FACILITY EVALUATION REPORT***

**Facility Number:** 374604294  
**Report Date:** 05/30/2025  
**Date Signed:** 05/30/2025 05:05:27 PM

**Document Has Been Signed on 05/30/2025 05:05 PM - It Cannot Be Edited**

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
<b>FACILITY EVALUATION REPORT</b>	

FACILITY NAME:	LAS VILLAS DEL NORTE	FACILITY NUMBER:	374604294
ADMINISTRATOR/FARISH, JOLENE		FACILITY TYPE:	740
DIRECTOR:		TELEPHONE:	(760) 741-1047
ADDRESS:	1325 LAS VILLAS WAY	ZIP CODE:	92026
CITY:	ESCONDIDO	STATE: CA	
CAPACITY: 198		CENSUS: 181	DATE: 05/30/2025
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED TIME VISIT/INSPECTION	03:05 PM
MET WITH:	Administrative Executive Director, Reu Baggao	BEGAN: TIME VISIT/INSPECTION	05:05 PM
		COMPLETED:	

NARRATIVE	
1	On 5/30/2025, Licensing Program Analyst (LPA) Janette Romero conducted an unannounced visit to the
2	facility for a required annual inspection. LPA met with Administrative Executive Director, Reu Baggao
3	who was informed of the purpose of the visit. The facility has a fire clearance for 198 non-ambulatory
4	elderly residents, of which 86 may be bedridden.
5	
6	LPA toured the facility's interior and exterior with Baggao. During the tour, LPA observed the facility is
7	made up of three (3) buildings, which are designated for independent living, assisted living, and memory
8	care. Indoor and outdoor passageways are free of obstruction. Outdoor shaded seating is available and
9	there are several activities available for resident leisure. The facility has an in-ground pool that is gated
10	and secured with a master lock. During tour of the kitchen, LPA observed the facility met Departmental
11	requirements for a two-day supply of perishable foods and seven-day non-perishable food items, and
12	sharps are secured and inaccessible to residents in care. Medications are secured in medication carts,
13	only accessible to authorized personnel such as medication technicians. Cleaning solutions and
14	disinfectants are secured in storage closets, inaccessible to the residents. LPA toured a sample of the
15	resident bedrooms and private restrooms in the memory care unit, which appeared to be clean and
16	sanitary with no foul odors. LPA also observed the facility installed protective covers to all of the memory
17	care unit fire alarm pull stations. Baggao lifted one of the covers and showed LPA the warning horn that
18	was placed as a preventative measure to help staff detect and possibly prevent false fire alarms.
19	Baggao also showed LPA the new siren alarm installed on the courtyard gate to alert staff when the gate
20	has been unexpectedly opened. LPA observed several fire extinguishers mounted throughout the facility
21	that were last serviced on 4/21/2025 along with fire alarm systems and carbon monoxide detectors.
22	During today's visit, no deficiencies were cited and LPA did not observe any health or safety concerns
23	identified on 10/20/2023's non-compliance conference. An exit interview was conducted and a copy of
24	this report was reviewed and provided to AED Baggao.
25	

**NAME OF LICENSING PROGRAM MANAGER:** Anthony Perez

**NAME OF LICENSING PROGRAM ANALYST:** Janette Romero

**LICENSING PROGRAM ANALYST SIGNATURE:**



**DATE:** 05/30/2025

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

**FACILITY REPRESENTATIVE SIGNATURE:**



**DATE:** 05/30/2025

**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.