

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 374604315
Report Date: 08/21/2026
Date Signed: 08/21/2026 12:03:24 PM

Document Has Been Signed on 08/21/2026 12:03 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
FACILITY EVALUATION REPORT	

FACILITY NAME:	CARING HEARTS COTTAGE	FACILITY NUMBER:	374604315
ADMINISTRATOR/LAZARUS, AARON		FACILITY TYPE:	740
DIRECTOR:			
ADDRESS:	682 VALE VIEW DR	TELEPHONE:	(619) 246-0731
CITY:	VISTA	STATE: CA	ZIP CODE: 92081
CAPACITY: 8		CENSUS: 5	DATE: 08/21/2026
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED TIME VISIT/INSPECTION	09:30 AM
		BEGAN:	
MET WITH:	Aaron Lazurus - Administrator	TIME VISIT/INSPECTION	12:10 PM
		COMPLETED:	

NARRATIVE	
1	Licensing Program Analyst (LPA), Robert Campbell arrived at the facility unannounced to conduct the
2	Required Annual Inspection and met with Administrator, Aaron Lazarus. The facility file review was
3	conducted at the Regional Office and additional records were requested and reviewed on site. The
4	facility is licensed for eight (8) Residents, and is currently operating with five (5) Residents.
5	
6	LPA toured the facility along with Administrator, Aaron Lazarus, and made observations pertaining to the
7	annual visit. LPA inspected the facility inside and outside there were no obstructions or debris to the
8	indoor or outdoor passageways at the time of this visit. The facility is a two-story home with five (5)
9	Resident rooms and three (3) bathrooms.
10	
11	Physical Plant: The facility phone number is (760) 643-9618 and it is operable. LPA observed the
12	residents' bedrooms, and each was equipped with required furniture as per Title 22. LPA inspected
13	facility bathrooms, and the hot water temperature tested (108 degrees) within regulations. The
14	bathrooms were clean, and appliances were operating appropriately currently at the time of this visit.
15	The facility is equipped with operating smoke detectors, carbon monoxide alarms, and fire extinguishers.
16	LPA observed required postings such as "If you See Something, Say Something" and the "Personal
17	Rights." The cleaning supplies and sharp items were kept locked and inaccessible to the residents in
18	care. There was a designated storage space for the residents and staff files, and it was locked.
19	
20	Continued to LIC809C...
21	
22	
23	
24	
25	

Jazmond D Harris
Robert Campbell

DATE: 08/21/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 08/21/2026

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.

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.

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: CARING HEARTS COTTAGE

FACILITY NUMBER: 374604315

VISIT DATE: 08/21/2026

NARRATIVE	
1	Continued...
2	
3	Medications: Were locked and inaccessible to residents in care, and there was a sufficient supply of
4	medication for each resident. The overall facility is clean, the furniture is in good condition. The facility
5	cooling system and other appliances were operable currently at the time of this visit.
6	
7	Food Service: Non-perishable and perishable food supply is sufficient per regulations, and there are a
8	variety of food types available for residents. Dishes and utensils were in sufficient supply and stored
9	properly, and sharp items are locked.
10	
11	Care & Supervision: Facility has sufficient staff, currently two (2) staff and five (5) residents were
12	present in the facility.
13	
14	Administration: Emergency exiting plans, telephone numbers and Ombudsman information and other
15	required signage are posted throughout the facility. Drills are conducted monthly and logged, the last
16	drill was conducted on June of 2026.
17	
18	Facility tests and logs water regularly: Water was tested and logged on today and tested within
19	regulations. Fire extinguishers are charged and in the green.
20	
21	Training and Administrator Certificate: LPA reviewed administrator's certification for Aaron Lazarus,
22	and it was current at the time of this visit with an expiration 10/14/2027. Training is done in person every
23	month by a certified RN and the last training was completed.
24	
25	Records Review: LPA reviewed resident and staff files. LPA reviewed five (5) staff records and those
26	reviewed have current Criminal Background Clearance, and training's are current. Five (5) Client
27	records were reviewed and contained required documents. Physician reports are current and TB test
28	were completed at the time of admission.
29	
30	There were no Title 22, Division 6 Regulation violations observed or cited during today's visit.
31	
32	An exit interview was conducted, and a copy of this report was discussed and given to Administrator,
	Aaron Lazarus.

NAME OF LICENSING PROGRAM MANAGER: Jazmond D Harris	
NAME OF LICENSING PROGRAM ANALYST: Robert Campbell	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 08/21/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 08/21/2026