

# Department of SOCIAL SERVICES

*Community Care Licensing*

## *FACILITY EVALUATION REPORT*

**Facility Number:** 374604388

**Report Date:** 01/23/2026

**Date Signed:** 01/23/2026 01:29:40 PM

**Document Has Been Signed on** 01/23/2026 01:29 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:	SUNSET CLIFFS ELDER CARE	FACILITY NUMBER:	374604388
ADMINISTRATOR/DIRECTOR:	TRAVONNA WASHINGTON	FACILITY TYPE:	740
ADDRESS:	1039 SANTA BARBARA STREET	TELEPHONE:	(619) 791-5495
CITY:	SAN DIEGO	STATE:	CA
CAPACITY:	6	ZIP CODE:	92107
TYPE OF VISIT:	Case Management - Deficiencies	CENSUS:	6
	UNANNOUNCED	DATE:	01/23/2026
	TIME VISIT/INSPECTION	BEGAN:	12:45 PM
MET WITH:	Facility Manager Vinny Rathi	TIME VISIT/INSPECTION	02:00 PM
		COMPLETED:	

### NARRATIVE

1 Licensing Program Analyst (LPA) Janet Ngallo conducted an unannounced case management visit to  
2 cite deficiencies observed during a complaint visit. LPA identified herself to, was greeted by, and  
3 explained the purpose of the visit to Facility Manager Vinny Rathi.  
4  
5 During the visit, LPA observed an audio monitoring device located in the common area. Staff reported  
6 that the device has an audio component that is primarily used for audio to pick up sounds in residents  
7 rooms during night shifts.  
8  
9 One deficiency was cited per California Code of Regulations Title 22 for surveillance with an audio  
10 component and noted on the attached LIC809-D page.  
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12 An exit interview was conducted with Facility Manager Vinny Rathi, whose signature below confirms  
13 receipt of a copy of this report, and the Licensee Appeal Rights (LIC9058 3/22).  
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**NAME OF LICENSING PROGRAM MANAGER:** Lizzette Tellez

**NAME OF LICENSING PROGRAM ANALYST:** Janet Ngallo

**LICENSING PROGRAM ANALYST SIGNATURE:****DATE:** 01/23/2026**I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.****FACILITY REPRESENTATIVE SIGNATURE:****DATE:** 01/23/2026**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 III, and Residential Care Facilities for the Elderly are required to provide and maintain an active email address of record with the licensing agency.

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**Created By: Janet Ngallo On 01/23/2026 at 01:11 PM**  
**Link to Parent Document Below:**

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY  <b>FACILITY EVALUATION REPORT (Cont)</b>	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION , 7575 METROPOLITAN DR. #109 SAN DIEGO, CA 92108
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**FACILITY NAME:** SUNSET CLIFFS ELDER CARE  
**DEFICIENCY INFORMATION FOR THIS PAGE:**

**FACILITY NUMBER:** 374604388  
**VISIT DATE:** 01/23/2026

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)	
Type B 01/30/2026 <b>Section Cited</b> CCR 87468.2(a)	1 87468.2 (a) "...residents... shall have 2 all of the following personal rights: (1) 3 To have a reasonable level of personal 4 privacy..." This requirement was not 5 met as evidenced by: 6 7	1 Licensee to remove the camera/audio 2 recording devices from the facility and 3 to provide outside vendor personal 4 rights training for all staff, including the 5 licensee. Documentation of the training 6 will include a sign-in sheet with 7 participant names and the training topic clearly noted. Proof of completion due by 01/30/2026.	
	8 Based on LPA observation and 9 interview, the licensee did not comply 10 with the section cited above in that 11 audio surveillance in the common areas 12 of the facility were observed. This 13 poses a potential personal rights risk to 14 6 of 6 residents in care.		
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**Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.**

<b>NAME OF LICENSING PROGRAM MANAGER:</b>	Lizzette Tellez
<b>NAME OF LICENSING PROGRAM ANALYST:</b>	Janet Ngallo

**LICENSING PROGRAM ANALYST SIGNATURE:**



**DATE:** 01/23/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**



**DATE:** 01/23/2026