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Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 374604455
Report Date: 08/25/2026
Date Signed: 08/25/2026 05:36:15 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **FACILITY EVALUATION REPORT**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SAN DIEGO RO, 7575 METROPOLITAN DR. #109 SAN DIEGO, CA 92108

FACILITY NAME:	IVY PARK AT OTAY RANCH		FACILITY NUMBER:	374604455
ADMINISTRATOR/ DIRECTOR:	DIANA WEINSTEIN		FACILITY TYPE:	740
ADDRESS:	1290 SANTA ROSE DRIVE		TELEPHONE:	(619) 779-7400
CITY:	CHULA VISTA	STATE: CA	ZIP CODE:	91913
CAPACITY: 137		CENSUS: 117	DATE:	08/25/2026
TYPE OF VISIT:	Case Management - Annual Continuation	UNANNOUNCED	TIME VISIT/ INSPECTION BEGAN:	01:30 PM
MET WITH:	Executive Director Diana Weinstein		TIME VISIT/ INSPECTION COMPLETED:	05:50 PM

NARRATIVE

Licensing Program Analyst (LPA) Jose De La Cruz made an unannounced visit to conduct a Required Annual Inspection. The facility file was reviewed prior to the visit. LPA was welcomed by, identified himself to, and discussed the purpose of the visit with Executive Director Diana Weinstein (ED). The facility's license shows a maximum capacity of one hundred thirty seven (137) non-ambulatory residents .

LPA reviewed staff, residents and facility files. LPA toured the interior and exterior of the facility and inspected eight rooms in the memory care area, two on the first floor and five on the second floor. The facility was clean, sanitary, and in good repair. Pathways were free of obstruction and slip hazards. Client bedrooms contained the required furnishings. Doors, windows screens, toilets, and showers were in working order. Two maintenance issues were found during the visit, which were fixed promptly by staff. Emergency chair was found on the facility stairs. Extra linens and hygiene supplies were present in each residents room and with the laundry, as well as Personal Protective Equipment in different areas around the facility, including kitchen, medications room, and in some residents rooms. The facility had sufficient space and equipment to facilitate dining, laundry, visitation, meetings, and client activities.

The facility contained at least 2 days of perishable food, and at least 7 days non-perishable food, all safely stored. Cooking, dining equipment, and utensils were present. No toxic chemicals or poisons were accessible to clients. LPA checked medications cabinet. Medications were labeled, as required, and stored in a locked mobile station. No pools, bodies of water exist on the premises.

[CONTINUED ON LIC 809-C]

Robyn Clark
Jose DeLaCruz

	**DATE:** 08/25/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

	**DATE:** 08/25/2026

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 **FACILITY EVALUATION REPORT (Cont)**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SAN DIEGO RO, 7575 METROPOLITAN DR. #109 SAN DIEGO, CA 92108

FACILITY NAME: IVY PARK AT OTAY RANCH **FACILITY NUMBER:** 374604455

VISIT DATE: 08/25/2026

NARRATIVE

[CONTINUED FROM LIC809]

Per ED, no firearms or ammunition are kept at the facility. Carbon monoxide detectors, emergency lights, and facility telephone were all in working order. Fire extinguishers were serviced within the last 12 months. First aid kit was complete and readily accessible. Required licensing postings were observed in visible areas of the facility.

A calendar with daily activities was displayed on different areas of the facility. Menus were displayed on the dining room, elevators, and memory care area

Water temperatures were measured around the facility with readings in Fahrenheit degrees between 105 and 119 degrees.

LPA interviewed staff and clients. The interviews mentioned that the facility required more staff due to some wait times and staff missing work (see TV's) , however, the residents felt appreciative of the facility and their staff, and mentioned feeling cared for. LPA reviewed facility, staff and resident records. The files reviewed by LPA contained required documents. Confidential records were stored in locked areas.

No deficiencies were cited per California Code of Regulations. An exit interview was conducted with Executive Director Diana Weinstein, to whom a copy of this report, and the Licensee/Appeal Rights (LIC9058 03/22) were provided during today’s visit.

NAME OF LICENSING PROGRAM MANAGER: Robyn Clark
NAME OF LICENSING PROGRAM ANALYST: Jose DeLaCruz
LICENSING PROGRAM ANALYST SIGNATURE:
DATE: 08/25/2026

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

FACILITY REPRESENTATIVE SIGNATURE:
DATE: 08/25/2026