

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 374604692

Report Date: 03/04/2026

Date Signed: 03/04/2026 01:17:43 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:	WESTMONT OF CARMEL VALLEY	FACILITY NUMBER:	374604692
ADMINISTRATOR/DIRECTOR:	AMY BANAGA	FACILITY TYPE:	740
ADDRESS:	5720 OLD CARMEL ROAD	TELEPHONE:	(858) 465-7356
CITY:	SAN DIEGO	STATE:	CA
CAPACITY:	138	ZIP CODE:	92130
TYPE OF VISIT:	Case Management - Deficiencies	CENSUS:	134
		DATE:	03/04/2026
		UNANNOUNCED TIME VISIT/INSPECTION BEGAN:	12:00 PM
MET WITH:	Executive Director Amy Banaga, Residential Services Director Le Sutton, and Business Office Director Erica Saade	UNANNOUNCED TIME VISIT/INSPECTION COMPLETED:	01:25 PM

NARRATIVE

1 Licensing Program Analyst (LPA) Arian Golbakhsh conducted an unannounced Case Management visit
2 to the facility. LPA was welcomed by, identified themselves to, and discussed the purpose of the visit to
3 Executive Director Amy Banaga, Residential Services Director Le Sutton, and Business Office Director
4 Erica Saade.
5
6 While conducting file review of staff records, LPA noted that five (5) staff members were not included on
7 the facility's association roster. Further review revealed that the three (3) of those staff members were
8 minors who worked part time as kitchen/serving staff, hence no background clearances. The other two
9 (2) staff members (identified as S1 and S2) had eligible background clearances with previously
10 conducted background checks, however their clearances were not transferred over to this facility. Per
11 staff interviews, S1 had been working at the facility for a few months and S2 for a period of a few weeks.
12 S1 and S2 were able to be associated to the facility during the visit.
13
14 One type A Deficiency is being cited per California Code of Regulations, Title 22, Division 6 on the
15 attached LIC 809-D for the two (2) staff working without having their clearances associated to the facility.
16 In addition, Civil Penalties are being assessed for the total amount of \$1,000.00. Details are noted on
17 the attached LIC 421BG form.
18
19 One Deficiency was cited during the visit. An exit interview was conducted with Executive Director
20 Banaga to whom a copy of this report, the LIC 421BG, and the Licensee/Appeal Rights (LIC 9058) were
21 provided. Their signature below confirms receipt of these documents.
22
23
24
25

NAME OF LICENSING PROGRAM MANAGER: Sabel Martinez

NAME OF LICENSING PROGRAM ANALYST: Arian Golbakhsh

LICENSING PROGRAM ANALYST SIGNATURE:


DATE: 03/04/2026

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

FACILITY REPRESENTATIVE SIGNATURE:


DATE: 03/04/2026

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.

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Created By: Arian Golbakhsh On 03/04/2026 at 12:33 PM
Link to Parent Document Below:

<p>STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY</p> <p>FACILITY EVALUATION REPORT (Cont)</p>	<p>CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION , 7575 METROPOLITAN DR. #109 SAN DIEGO, CA 92108</p>
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FACILITY NAME: WESTMONT OF CARMEL VALLEY

FACILITY NUMBER: 374604692

DEFICIENCY INFORMATION FOR THIS PAGE:

VISIT DATE: 03/04/2026

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
Type A 03/11/2026 Section Cited CCR 87355(e)(3)	1 87355(e)(2) "All individuals subject to a 2 criminal record review [...] shall prior to 3 working, residing or volunteering in a 4 licensed facility: (3) Request a transfer 5 of a criminal record clearance as 6 specified in Section 87355(c)" 7 This requirement is not met as evidenced by:	1 Licensee was able to associate the two 2 (2) staff members during the visit, 3 eliminating immediate risk. Licensee 4 will review the facility association roster 5 to ensure it is up-to-date. Additionally, 6 Licensee will conduct review of 7 regulation 87355 and submit proof to LPA by POC due date.
	8 Based on LPA file review and interview, 9 the licensee did not comply with the 10 section cited above in ensuring that 2 11 staff members had their clearances 12 transferred prior to working at the facility, 13 which poses an immediate health, 14 safety, and personal rights risk to 134 out of 134 persons in care.	

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 MANAGER:	Sabel Martinez
NAME OF LICENSING PROGRAM ANALYST:	Arian Golbakhsh

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 03/04/2026

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 03/04/2026