

Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 374604777

Report Date: 08/01/2024

Date Signed: 08/01/2024 05:40:51 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: RAMONA SENIOR GARDENS	FACILITY NUMBER: 374604777
ADMINISTRATOR/JAMIL, FAIZAN DIRECTOR:	FACILITY TYPE: 740
ADDRESS: 1240 H STREET	TELEPHONE: (858) 663-9200
CITY: RAMONA	STATE: CA
CAPACITY: 68	ZIP CODE: 92065
TYPE OF VISIT: Prelicensing	CENSUS: 0
	DATE: 08/01/2024
	UNANNOUNCED TIME VISIT/INSPECTION 04:50 PM
MET WITH: Administrator Faizan Jamil and Licensee Harris Jamil	BEGAN: TIME VISIT/INSPECTION 06:00 PM
	COMPLETED:

NARRATIVE	
1	Licensing Program Analyst (LPA) Juliana Barfield conducted an announced Pre-Licensing visit to
2	observe the facility's physical plant for compliance with Title 22, Division 6 of the California Code of
3	Regulations and California Health & Safety Code. LPA was greeted by, identified themselves to, and
4	explained the purpose of the visit to Administrator Faizan Jamil and Licensee Harris Jamil.
5	
6	The facility fire clearance was approved and granted on 02/02/2024 for a secured perimeter. The facility
7	was approved for sixty-eight (68) residents in total, of which 38 maybe non-ambulatory and 30 residents
8	may be bedridden. The submitted facility sketch was consistent with the current layout of the facility.
9	
10	During today's visit, LPA, accompanied by Administrator Faizan Jamil and Licensee Harris Jamil, toured
11	the interior and exterior of the facility and observed the secured perimeter of the facility.
12	
13	
14	
15	
16	The facility exits were observed to be compliant with Title 22, Division 6 of the California Code of
17	Regulations and California Health & Safety Code. Pre-Licensing is complete and this facility has no
18	deficiencies.
19	
20	Administrator Faizan Jamil and Licensee Harris Jamil were advised that the facility's application is
21	pending management final review and approval.
22	
23	An exit interview was conducted with Administrator Faizan Jamil and Licensee Harris Jamil to whom a
24	copy of this report and the Licensee/Appeal Rights (LIC9058 03/22) were provided during the visit.
25	

NAME OF LICENSING PROGRAM MANAGER: Lizzette Tellez

NAME OF LICENSING PROGRAM ANALYST: Juliana Barfield

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 08/01/2024

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 08/01/2024

This report must be available at Child Care and Group Home facilities for public review for 3 years.