

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 415600223

Report Date: 02/12/2026

Date Signed: 02/12/2026 06:19:08 PM

COMPREHENSIVE INSPECTION

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SAN BRUNO RO, 851 TRAEGER AVE., SUITE 360 SAN BRUNO, CA 94066
FACILITY EVALUATION REPORT	

FACILITY NAME: STERLING COURT	FACILITY NUMBER: 415600223
ADMINISTRATOR/CHARLES, SARAH ST. DIRECTOR:	FACILITY TYPE: 740
ADDRESS: 850 NO. EL CAMINO REAL	TELEPHONE: (650) 344-8200
CITY: SAN MATEO STATE: CA	ZIP CODE: 94401
CAPACITY: 24 CENSUS: 21	DATE: 02/12/2026
TYPE OF VISIT: Required - 1 Year	UNANNOUNCED TIME VISIT/INSPECTION: 03:00 PM
MET WITH: Novie	BEGAN: TIME VISIT/INSPECTION: 06:30 PM
	COMPLETED:

NARRATIVE

1 LPA Audrey Jeung toured facility, which consists of 21 assisted living apartments on the ground floor of
2 this four story community, including a designated dining room. All units have private patios and small
3 kitchens with refrigerators and microwaves. Emergency signal system is tested and consists of pull
4 cords in bathrooms, living rooms and bedrooms, which sends audible alert to staff. Operable carbon
5 monoxide detectors are installed in all apartments and tested. There are no accessible bodies of water
6 or fire safety hazards observed. Medications and sharps are stored in locked medication room--
7 inaccessible to clients--a comfortable temperature is maintained, passageways are clear, and lighting is
8 sufficient for comfort and safety. Toilet and bathing facilities are equipped with grab bars and nonskid
9 flooring material and hygiene supplies are maintained. Hot water temperature tested in room 102. Food
10 supply and first-aid kit are inspected. Criminal record clearances or exemptions for facility staff or other
11 individuals who have client contact have been reviewed, as well as staff records, including training.
12 Client files are reviewed. Novie Villafuerte is a certified RCFE administrator (x 1/28) that oversees
13 assisted living operations. Executive director Sarah St. Charles oversees the entire building, which
14 includes the independent units not subject to licensing authority.

15
16 The following information/forms are provided to LPA today:
17 - Emergency Disaster Plan (LIC610E)
18 - Personnel REport (LIC500)
19 - proof of current liability insurance
20 - Designation of Administrative Responsibility (LIC308)
21 - Administrative Organization (LIC309)
22

23 Deficiency of the California Code of Regulations, Title 22 is cited on following page. See also Technical
24 Advisory Notes--2 pages.
25

NAME OF LICENSING PROGRAM MANAGER: April Cowan

LICENSING PROGRAM ANALYST SIGNATURE:

[Signature box]

DATE: 02/12/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

[Signature box]

DATE: 02/12/2026

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

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: Audrey Jeung On 02/12/2026 at 05:46 PM
Link to Parent Document Below:

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY FACILITY EVALUATION REPORT (Cont)	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION , 851 TRAEGER AVE., SUITE 360 SAN BRUNO, CA 94066
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FACILITY NAME: STERLING COURT

FACILITY NUMBER: 415600223

DEFICIENCY INFORMATION FOR THIS PAGE:

VISIT DATE: 02/12/2026

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)	
Type A 02/13/2026 Section Cited CCR 87303(e)(2)	1 MAINTENANCE AND OPERATION 2 ...Hot water temperature controls shall 3 be maintained to automatically regulate 4 the temperature of hot water used by 5 residents to attain a temperature of not 6 less than 105 degree F and not more 7 than 120 degree F. This requirement is not met, as hot water	1 Hot water temperature shall be lowered 2 and maintained between 105 and 120 3 degrees. 4 Proof of correction to be sent to CCLD 5 BY DUE DATE 6 7	
	8 temperature tested in room 134 at 124 9 degrees F. Licensee failed to ensure 10 that hot water twmperature is 11 maintained within range of 105 to 120 12 degrees F, which poses an immediate 13 health, safety or personal rights risk to 14 clients in care.	8 9 10 11 12 13 14	
	1 2 3 4 5 6 7		1 2 3 4 5 6 7
	1 2 3 4 5 6 7		1 2 3 4 5 6 7

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	April Cowan
MANAGER:	
NAME OF LICENSING PROGRAM	Audrey Jeung
ANALYST:	

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 02/12/2026

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 02/12/2026