

# Department of SOCIAL SERVICES

Community Care Licensing

## FACILITY EVALUATION REPORT

Facility Number: 415601126  
Report Date: 03/24/2022  
Date Signed: 03/24/2022 06:53:46 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 851 TRAEGER AVE., SUITE 360 SAN BRUNO, CA 94066
<b>FACILITY EVALUATION REPORT</b>	

FACILITY NAME: PACIFICA SENIOR LIVING BURLINGAME	FACILITY NUMBER: 415601126
ADMINISTRATOR: SUMABAT, JEFF	FACILITY TYPE: 740
ADDRESS: 250 MYRTLE ROAD	TELEPHONE: (650) 343-2747
CITY: BURLINGAME STATE: CA	ZIP CODE: 94010
CAPACITY: 90 CENSUS: 36	DATE: 03/24/2022
TYPE OF VISIT: Case Management - Deficiencies UNANNOUNCED	TIME BEGAN: 02:15 PM
MET WITH: Rowena Cancino and Amanda Dominguez North	TIME COMPLETED: 07:00 PM

NARRATIVE	
1	During complaint investigation to this facility, licensed as Atria Burlingame #415600184, LPA Jeung observed deficiency of the California Code of Regulations, Title 22, which is cited on a following page.  RCFE licensure has not yet been approved nor granted, yet Pacifica Senior Living Burlingame has been doing business as, and advertising itself as a licensed RCFE.
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NAME OF LICENSING PROGRAM MANAGER: Julio Montes
NAME OF LICENSING PROGRAM ANALYST: Audrey Jeung

**LICENSING PROGRAM ANALYST SIGNATURE:**



**DATE:** 03/24/2022

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

**FACILITY REPRESENTATIVE SIGNATURE:**



**DATE:** 03/24/2022

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

LIC809 (FAS) - (06/04)

Page: 1 of 2

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**Created By: Audrey Jeung On 03/24/2022 at 11:52 AM**

**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 , 851 TRAEGER AVE., SUITE 360 SAN BRUNO, CA 94066
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**FACILITY NAME:** PACIFICA SENIOR LIVING BURLINGAME

**FACILITY NUMBER:** 415601126

**DEFICIENCY INFORMATION FOR THIS PAGE:**

**VISIT DATE:** 03/24/2022

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)	
Type B 03/31/2022 Section Cited	ADVERTISEMENTS & LICENSE NUMBER 1 In accordance with Health and Safety 2 Code Sections 1569.68 and 3 1569.681, licensees shall reveal each 4 facility license number in all public 5 advertisements, including Internet, or 6 correspondence. 7 This requirement is not met, as facility is doing business as, and advertising as "Pacifica		
	8 Senior Living Burlingame," but 9 without a valid RCFE license. 10 Applicant has failed to operate 11 consistent with licensure as ATRIA 12 BURLINGAME, which poses a 13 potential health, safety, or personal 14 rights risk to clients in care.		
	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.**

**SUPERVISOR'S NAME:**

Julio Montes

LICENSING EVALUATOR NAME: Audrey Jeung

LICENSING EVALUATOR SIGNATURE:



DATE: 03/24/2022

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 03/24/2022