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Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 435202775
Report Date: 07/22/2025
Date Signed: 07/22/2025 03:57:08 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 CENTRAL COAST CR/RES, 2580 N. FIRST STREET, STE. 350 SAN JOSE, CA 95131

FACILITY NAME:	WATERMARK AT ALMADEN, THE			FACILITY NUMBER:	435202775
ADMINISTRATOR/ DIRECTOR:	COREY MILLER			FACILITY TYPE:	740
ADDRESS:	4610 ALMADEN EXPRESSWAY			TELEPHONE:	(669) 258-4567
CITY:	SAN JOSE	STATE: CA		ZIP CODE:	95118
CAPACITY: 240		CENSUS:		DATE:	07/22/2025
TYPE OF VISIT:	Case Management - Incident	UNANNOUNCED		TIME VISIT/ INSPECTION BEGAN:	11:50 AM
MET WITH:	Interim Executive Director (ED) Brenda Ritter.			TIME VISIT/ INSPECTION COMPLETED:	04:00 PM

NARRATIVE

Program Analyst (LPA) Simi Rai conducted an unannounced Case Management - Incident visit in regards to an Incident Report the Department received on 7/16/2025. LPA met with Interim Executive Director (ED) Brenda Ritter and stated the purpose of the visit.

On 7/16/2025, the Department received an LIC 624 Incident Report stating resident (R1) reported hearing 2 staff yelling at a resident in the hallway. R1 was not able to identify the 2 staff and 1 resident involved.

During today's visit, LPA Rai conducted interviews with 4 staff (S1-S4). Four out of the four staff stated they have not seen or heard staff yell at the residents or R1. Four out of four staff stated other residents have not notified them of staff yelling at residents.

During today's visit, LPA Rai conducted interview with 1 resident (R1). R1 was not able to provide information about when the incident occurred and who was involved, both the staff or residents. R1 was not sure if the 2 "staff" members were individuals that worked at the facility or if they were visitors. R1 was not able to recall if the 2 "staff" members wear a light blue shirt, which would indicate if they were staff working at the facility.

Based on review of R1's Physician Report dated 8/18/2021, R1 does not have neurocognitive disorders and R1 is able to manage own prescription medication and leave the facility unassisted. Based on review of R1's Service Plan dated 7/9/2025, R1 requires minimal assistance at night.

Continuation on LIC 809-C, Page 1 of 2.

NAME OF LICENSING PROGRAM MANAGER: Romeo Manzano

NAME OF LICENSING PROGRAM ANALYST: Simranjit Rai **LICENSING PROGRAM ANALYST SIGNATURE:**	
	**DATE:** 07/22/2025
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	
	**DATE:** 07/22/2025

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 CENTRAL COAST CR/RES, 2580 N. FIRST STREET, STE. 350 SAN JOSE, CA 95131

FACILITY NAME: WATERMARK AT ALMADEN, THE **FACILITY NUMBER:** 435202775

VISIT DATE: 07/22/2025

NARRATIVE

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The Department has completed the investigation. Based on interviews conducted and record reviews, the Department has found that the above allegations were UNFOUNDED, meaning that the allegations were false, could not have happened and/or are without a reasonable basis.

No deficiencies cited from California Code of Regulations, Title 22. Exit interview conducted with Administrator and a copy of the report was provided.

NAME OF LICENSING PROGRAM MANAGER: Romeo Manzano
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