

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 445202625
Report Date: 02/04/2026
Date Signed: 02/04/2026 01:16:16 PM

Document Has Been Signed on 02/04/2026 01:16 PM - It Cannot Be Edited

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	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:	ALEXANDRIA VICTORIA 2	FACILITY NUMBER:	445202625
ADMINISTRATOR/DIRECTOR:	GRYSPOS JR, JOHN	FACILITY TYPE:	740
ADDRESS:	228 MORRISSEY BLVD	TELEPHONE:	(831) 429-9137
CITY:	SANTA CRUZ	STATE:	CA
CAPACITY:	8	ZIP CODE:	95062
TYPE OF VISIT:	Required - 1 Year	CENSUS:	6
		DATE:	02/04/2026
		UNANNOUNCED TIME VISIT/INSPECTION:	11:30 AM
		BEGAN:	
MET WITH:	Administrator John Gryspos Jr.	TIME VISIT/INSPECTION:	01:30 PM
		COMPLETED:	

NARRATIVE	
1	Licensing Program Analyst (LPA) Marcella Tarin arrived unannounced to conduct the facility's Required
2	1-Year inspection. LPA met with Administrator (ADM) John Gryspos Jr. LPA stated the purpose of the
3	visit.
4	
5	LPA toured the interior and exterior of the facility with ADM to include the kitchen, resident rooms, dining
6	room, bathrooms, back and front of the facility. All exit and passageways were free and clear of
7	obstruction.
8	
9	LPA toured the kitchen area and observed a perishable food supply of at least two days and a non-
10	perishable food supply of at least seven days. LPA observed the refrigerator temperature at 35 F and
11	Freezer at 0 F.
12	
13	LPA observed the medication storage area, knives storage area, and cleaning product storage area as
14	locked and inaccessible to residents in care.
15	
16	
17	The facility was equipped with smoke and carbon monoxide detectors. All smoke detectors functioned
18	properly when tested by ADM. Fire extinguishers were purchased on 8/8/2024 and observed to be fully
19	charged. The facility drill log was not available for review during inspection. ADM stated he would
20	provide a copy of drills for 2025 to the CCL by 2/5/2026. ADM conducted an emergency drill with staff
21	during the visit.
22	
23	LPA toured 6 residents rooms. All 6 resident rooms have a bed, functioning lights, and space for
24	personal belongings.
25	
Page 1 of 2	

NAME OF LICENSING PROGRAM MANAGER: Christine Kabariti

LICENSING PROGRAM ANALYST SIGNATURE:

[Signature box]

DATE: 02/04/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

[Signature box]

DATE: 02/04/2026

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

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.

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

FACILITY NAME: ALEXANDRIA VICTORIA 2 **FACILITY NUMBER:** 445202625
VISIT DATE: 02/04/2026

NARRATIVE	
1	LPA measured water temperature in 6 resident bathrooms with a range from 106.8 F to 111 F.
2	
3	LPA reviewed 4 resident files and 2 residents CSMDRs.
4	
5	LPA reviewed 4 staff files. LPA observed there were no staff training documents. ADM stated he was
6	working on updating staff files and the training documents were not at the facility. ADM stated he would
7	submit staff training documents to CCL by 2/5/2026. A Technical Violation was issued.
8	
9	LPA observed facility doors to have an auditory signal which alarmed in the facility kitchen dining area.
10	LPA observed resident's sliding glass doors (located in resident rooms) did not alarm when opened by
11	ADM. ADM stated he would have a third party vendor inspect the alarm system. A Technical Violation
12	was issued.
13	
14	No deficiencies were issues during today's visit per California Code of Regulations, Title 22. A Technical
15	Violation was issued. An exit interview was conducted with ADM and signed copy of this report was
16	provided.
17	
18	
19	Page 2 of 2
20	END OF REPORT
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	
32	

<p>NAME OF LICENSING PROGRAM MANAGER: Christine Kabariti NAME OF LICENSING PROGRAM ANALYST: Marcella Tarin LICENSING PROGRAM ANALYST SIGNATURE:</p>	<p>DATE: 02/04/2026</p>
--	--------------------------------

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

<p>FACILITY REPRESENTATIVE SIGNATURE:</p>	<p>DATE: 02/04/2026</p>
--	--------------------------------