

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 445202946
Report Date: 12/11/2024
Date Signed: 12/11/2024 11:22:01 AM

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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 EVALUATION REPORT	

FACILITY NAME: MAPLE HOUSE II	FACILITY NUMBER: 445202946
ADMINISTRATOR/ROXAS, ROSE ANNE DIRECTOR:	FACILITY TYPE: 740
ADDRESS: 2000 BROMMER STREET	TELEPHONE: (831) 476-6366
CITY: SANTA CRUZ	STATE: CA ZIP CODE: 95062
CAPACITY: 40	CENSUS: DATE: 12/11/2024
TYPE OF VISIT: Prelicensing	UNANNOUNCED TIME VISIT/INSPECTION: 10:00 AM
MET WITH: Anshu Gupta	BEGAN: TIME VISIT/INSPECTION: 11:30 AM
	COMPLETED:

NARRATIVE	
1	Licensing Program Analysts (LPAs) Marcella Tarin and David Marrufo arrived unannounced to conduct a
2	pre-licensing visit to follow up on corrections and deficiencies that were observed on 10/22/2024 during
3	a previous pre-licensing visit.
4	
5	On 10/22/2024 during a pre-licensing visit with LPAs Mita Partoza and Marcella Tarin, deficiencies were
6	observed and documented in the Pre-Licensing report. LPAs observed the dishwasher in the kitchen
7	was corroded and 2 parking lot cement stoppers were cracked. The current licensee needed to address
8	that equipment and that the physical plant are in good repair with no breaks, cracks or chips.
9	
10	On 10/23/2024 the facility submitted pictures of the removal of the parking lot cement stoppers. On
11	12/11/2024, LPAs observed there were no broken parking lot cement stoppers in the parking lot. LPAs
12	also observed the dishwasher to be free of corrosion. Applicant states the facility is in the process of
13	replacing the current dishwasher with a new one.
14	
15	LPAs reviewed the Fire Safety Inspection Request dated 11/04/2024, which indicated a capacity for 8
16	bedridden residents. The LIC200 Application for a Community Care Facility or Residential Care Facility
17	for the Elderly License indicated a bedridden capacity for 15. LPAs advised applicant to re-submit the
18	LIC200 to Centralized Application Bureau (CAB) for the bedridden increase request.
19	
20	
21	During visit, LPAs reviewed Component III with Applicant Anshu Gupta.
22	
23	No deficiencies were cited today per California Code of Regulations Title 22. This report was reviewed
24	with Applicant Anshu Gupta and a copy of this report was provided.
25	

NAME OF LICENSING PROGRAM MANAGER: Jin Jackie

NAME OF LICENSING PROGRAM ANALYST: Marcella Tarin

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 12/11/2024

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 12/11/2024

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