

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 565801949
Report Date: 11/18/2025
Date Signed: 11/18/2025 01:45:56 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION WOODLAND HILLS N.ASC, 21731 VENTURA BLVD. #250 WOODLAND HILLS, CA 91364
FACILITY EVALUATION REPORT	

FACILITY NAME:	APPLEGATE @ DORADO	FACILITY NUMBER:	565801949
ADMINISTRATOR/EMMA CARMONA		FACILITY TYPE:	740
DIRECTOR:			
ADDRESS:	1630 EL DORADO DRIVE	TELEPHONE:	(805) 379-1055
CITY:	THOUSAND OAKS	STATE: CA	ZIP CODE: 91362
CAPACITY: 6		CENSUS: 5	DATE: 11/18/2025
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCEDTIME VISIT/	INSPECTION 11:03 AM
		BEGAN:	
MET WITH:	Emma Carmona	TIME VISIT/	INSPECTION 02:00 PM
		COMPLETED:	

NARRATIVE	
1	Licensing Program Analyst (LPA) Angela Barutyan arrived at the facility unannounced to conduct a
2	required annual visit at 11:03AM. Upon arrival, LPA met with staff and Administrator Emma Carmona,
3	and Licensee Irma Carmona who arrived at 12:05PM. Entrance interview conducted.
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5	At 11:05AM, the LPA along with the Administrator toured the physical plant areas inside and outside to
6	ensure there are no health and safety hazards and facility is in compliance with Title 22 Regulations.
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8	BEDROOMS: There are six (6) resident bedrooms. The LPA observed the resident bedrooms to be
9	furnished appropriately with clean linens, appropriate furnishings, and sufficient lighting. Bedrooms were
10	equipped with functional auditory exit alarms. There is a staff room on the ground floor that is accessed
11	from outside.
12	
13	RESTROOMS: There are six (6) resident restrooms and one (1) staff/visitor bathroom in the hallway.
14	Each bedroom has an attached restroom. LPA observed bathrooms to be clean, sanitary, and in
15	operating condition with slip-resistant surfaces and grab bars. Hot water temperatures were measured in
16	bathrooms and were between 109.4-113.0 degrees F, which is within the required range.
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18	KITCHEN: The LPA inspected the kitchen/food service area at 11:12AM. Kitchen appliances appeared
19	clean and were in operable condition at the time of the visit. The facility had a sufficient supply of
20	perishable and non-perishable food. Food labels were inspected and checked for expiration dates and
21	dates were clearly marked. Knives and sharps were observed locked and inaccessible in a drawer.
22	
23	(Report Continued on LIC 809C...)
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25	

NAME OF LICENSING PROGRAM MANAGER: Kristin Heffernan
NAME OF LICENSING PROGRAM ANALYST: Angela Barutyan

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 11/18/2025

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 11/18/2025

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.

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FACILITY EVALUATION REPORT (Cont)	

FACILITY NAME: APPLGATE @ DORADO	FACILITY NUMBER: 565801949
	VISIT DATE: 11/18/2025

NARRATIVE	
1	COMMON AREAS: At the time of the visit, living room and dining room furniture were observed to be in good condition. The facility maintained a comfortable temperature. At 11:27AM, smoke detector(s) and carbon monoxide detector were tested and were operational at the time of the visit. The fire extinguisher was observed fully charged and last serviced on 04/03/2025. Auditory exit alarms were functioning at the time of the visit. The washer and dryer are located in a closet next to Bedroom #1. LPA observed detergents and toxins in a locked cabinet above the washer and dryer. The LPA observed a closet with additional cleaning supplies and personal hygiene products locked and inaccessible to residents in care.
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NAME OF LICENSING PROGRAM ANALYST: Angela Barutyan	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 11/18/2025
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 11/18/2025