

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 565850281
Report Date: 11/13/2025
Date Signed: 11/13/2025 08:30:30 PM

Document Has Been Signed on 11/13/2025 08:30 PM - It Cannot Be Edited

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 21731 VENTURA BLVD. #250 WOODLAND HILLS, CA 91364
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FACILITY NAME: NAVITA RESIDENCES TULL	FACILITY NUMBER: 565850281
ADMINISTRATOR/KARTHIK KANAKARAJ	FACILITY TYPE: 740
DIRECTOR:	TELEPHONE: (805) 494-4121
ADDRESS: 5603 TULL ST	ZIP CODE: 93003
CITY: VENTURA	STATE: CA
CAPACITY: 6	CENSUS: 6
TYPE OF VISIT: Required - 1 Year	DATE: 11/13/2025
	UNANNOUNCED TIME VISIT/INSPECTION 02:20 PM
	BEGAN: TIME VISIT/INSPECTION 03:30 PM
MET WITH: Karthik "Raj" Kanakaraj	COMPLETED:

NARRATIVE

1 Licensing Program Analyst (LPA) Kelly Dulek conducted a required annual visit. LPA was initially met by
2 staff who called the Administrator Karthik "Raj" Kanakaraj, who arrived at the facility shortly after the visit
3 began. Entrance interview conducted.
4

5 Starting at 02:26PM, LPA along with Administrator, conducted a tour of the physical plant. The facility is
6 single-story with six resident bedrooms, three bathrooms and one staff room. The fire extinguisher was
7 purchased 11/05/2025 and appeared fully charged. No hazards were observed.
8

9 **Bedrooms:** The resident bedrooms were properly furnished with clean linens and adequate lighting.
10

11 **Bathrooms:** LPA observed bathrooms were clean, properly supplied and had functional fixtures. The
12 LPA observed grab bars and slip-resistant surfaces in all bathrooms. Residents have sufficient amounts
13 of supplies for personal hygiene. The hot water temperature was measured in a common bathroom at
14 109.6 degrees Fahrenheit, which is within the required limit of 105-120 degrees Fahrenheit.
15

16 **Kitchen:** The kitchen appeared clean and the appliances and fixtures functional. The LPA observed a
17 sufficient amount of perishable and non-perishable food at the facility. Knives are stored in a locked
18 cabinet. Medications are stored in a separate locked cabinet in the kitchen.
19

20 **Common Areas:** These included the living room and dining area. The common areas were checked for
21 cleanliness and furniture was checked for functionality during time of visit. There is a fireplace in the
22 living room, which is covered with a screen. The facility maintained a comfortable temperature.
23

24 *Report continued on LIC809C*
25

NAME OF LICENSING PROGRAM MANAGER: Kristin Heffernan
NAME OF LICENSING PROGRAM ANALYST: Kelly Dulek

LICENSING PROGRAM ANALYST SIGNATURE:


DATE: 11/13/2025

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

FACILITY REPRESENTATIVE SIGNATURE:


DATE: 11/13/2025

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.

<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 CCLD Regional Office, 21731 VENTURA BLVD. #250 WOODLAND HILLS, CA 91364</p>
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FACILITY NUMBER: 565850281

VISIT DATE: 11/13/2025

NARRATIVE	
<p>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32</p>	<p>Garage/Laundry room: The facility has a laundry room where the washer and dryer are held. The laundry room leads to the garage where cleaning supplies and disinfectants are kept, and additional PPE supplies are stored. The Garage remains locked and inaccessible to the residents in care.</p> <p>Surrounding Grounds (Outdoors): There was a shaded area with proper furniture for outdoor use. There are no bodies of water on the premises. All passageways were clear and free from hazard.</p> <p>Interviews: During the facility tour the LPA conducted one (1) resident interview and two (2) staff interviews. No immediate concerns were identified.</p> <p>Records: LPA reviewed five (5) residents' files and five (5) staff files. All files observed were complete and contained all required documents.</p> <p>Medications: Medications review began at 03:15PM. LPA reviewed medications for 2 (two) residents. Medications are centrally stored and locked in a cabinet in the kitchen area. Medications are labeled and checked for expiration dates. Medications are properly documented on the centrally stored medications and destruction record.</p> <p>Emergency Disaster/Infection Control Plan: During today's visit, LPA reviewed the facility's emergency disaster plan, which was complete and updated annually as required. The facility conducts evacuation drills quarterly with staff on all shifts, with the last completed drill on 09/30/2025. The facility's infection control plan was observed to be complete, reviewed and updated as required.</p> <p>No deficiencies were observed. Exit interview conducted and report issued.</p>

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