

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 015600526

Report Date: 10/19/2021

Date Signed: 10/19/2021 04:31:10 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 1515 CLAY STREET, STE. 310 OAKLAND, CA 94612
FACILITY EVALUATION REPORT	

FACILITY NAME:	ELDERS INN ON WEBSTER	FACILITY NUMBER:	015600526
ADMINISTRATOR:	MARIE ANN LAGASCA	FACILITY TYPE:	740
ADDRESS:	1721 WEBSTER STREET	TELEPHONE:	(510) 521-9200
CITY:	ALAMEDA	STATE: CA	94501
CAPACITY:	60	CENSUS: 31	DATE: 10/19/2021
TYPE OF VISIT:	Case Management - Health Checks	UNANNOUNCED	TIME BEGAN: 02:20 PM
MET WITH:	Stephen Zimmerman	TIME COMPLETED:	03:15 PM

NARRATIVE	
1	On 10/19/2021 starting at 2:20 PM, Licensing Program Analyst (LPA) L. Ibo conducted a health and safety check as a result of department receiving a priority 1 complaint. LPA met with nurse Remy Todd and Administrator Stephen Zimmerman.
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5	During the health and safety check, LPA toured the building with Administrator Stephen Zimmerman including but not limited to common areas, bathrooms, bedrooms and outdoor area. LPA observed smoke detectors and carbon monoxide detector throughout facility.
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9	Residents in care appear to be safe and there are no imminent health/safety concerns on today's date.
10	Facility is maintained at a comfortable temperature for the clients in care.
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12	No deficiencies were cited today.
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NAME OF LICENSING PROGRAM MANAGER: Harpreet Humpal

NAME OF LICENSING PROGRAM ANALYST: Leslie Ibo

LICENSING PROGRAM ANALYST SIGNATURE:**DATE:** 10/19/2021

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

FACILITY REPRESENTATIVE SIGNATURE:**DATE:** 10/19/2021

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