<meta name="robots" content="noindex">

Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 216804010
Report Date: 08/24/2026
Date Signed: 08/24/2026 04:49:01 PM

Document Has Been Signed on 08/24/2026 04:49 PM **- It Cannot Be Edited**

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **FACILITY EVALUATION REPORT**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SANTA ROSA RO, 1450 NEOTOMAS AVENUE, STE. 100 SANTA ROSA, CA 95405

FACILITY NAME:	VINCENT, THE		FACILITY NUMBER:	216804010
ADMINISTRATOR/ DIRECTOR:	CORTES, MARIA		FACILITY TYPE:	740
ADDRESS:	1 LAS GALLINAS AVE		TELEPHONE:	(628) 336-1400
CITY:	SAN RAFAEL	STATE: CA	ZIP CODE:	94903
CAPACITY: 126		CENSUS: 81	DATE:	08/24/2026
TYPE OF VISIT:	Case Management - Legal/Non-compliance	UNANNOUNCED	TIME VISIT/ INSPECTION BEGAN:	09:30 AM
MET WITH:	Executive Director, Maria Cortes		TIME VISIT/ INSPECTION COMPLETED:	05:00 PM

NARRATIVE

At approximately 9:30AM, Licensing Program Analyst (LPA) Felias arrived unannounced to conduct a Case Management - Legal/Non-Compliance visit and met with Administrator/Executive Director, Maria Cortes. The purpose of today's visit is to conduct a Non-Compliance (NCC) inspection.

On 05/13/2026, facility was placed on a Non-Compliance plan for 2 years related to the following areas:

- Observation of a resident
- When to call 911/Emergency Services
- Centrally Stored Medications/Record Keeping
- Medication Administration

LPA requested and reviewed documents for all employees hired from May 2026 - August 2026. Review of documents showed that facility hired 5 individuals during this time frame. Facility has scheduled training for these new employees. Proof of training to be submitted to Community Care Licensing (CCL) by 09/01/2026. LPA conducted a medication audit and reviewed the central storage log for a sample size of 4 residents. It was observed that 3 of 4 residents had documentation errors with expiration date and quantity on the LIC622 (Centrally Stored Medication and Destruction Record).

Deficiencies are cited from the California Code of Regulations (CCRs), and/or the Health and Safety Code. Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

****An Immediate Civil Penalty in the total amount of $250.00 is being assessed today for a repeat violation of Regulation 87465(h). Regulation last cited on 12/12/2025****

	Exit interview conducted. Copy of report, Plan of Corrections, and Appeal Rights provided to Administrator/Executive Director. Signature on form confirms receipt of documents.

Victoria Bertozzi
Caitlynn Felias

DATE: 08/24/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 08/24/2026

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 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.

Document Has Been Signed on 08/24/2026 04:49 PM **- It Cannot Be Edited**

Created By: Caitlynn Felias On 08/24/2026 at 01:03 PM
Link to Parent Document Below:

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **FACILITY EVALUATION REPORT (Cont)**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION , 1450 NEOTOMAS AVENUE, STE. 100 SANTA ROSA, CA 95405

FACILITY NAME: VINCENT, THE **FACILITY NUMBER:** 216804010

DEFICIENCY INFORMATION FOR THIS PAGE: **VISIT DATE:** 08/24/2026

Deficiency Type POC Due Date / Section Number		DEFICIENCIES		PLAN OF CORRECTIONS(POCs)
Type B 09/04/2026 **Section Cited** CCR 87465(h)	1 2 3 4 5 6 7	87465 Incidental Medical and Dental Care (h) The following requirements shall apply to medications which are centrally stored:...This requirement is not met as evidenced by: Based on record review and observations made, Licensee did not comply with the section cited above and did not ensure that	1 2 3 4 5 6 7	Licensee to conduct an In-Service training for all direct care staff that administer medication. Training to include the following: Date, Topic, Job Role, Staff Names and Signatures. Proof of training to be submitted by POC due date of 09/04/2026.
	8 9 10 11 12 13 14	resident medications were accurately recorded on the LIC622 as required. 3 of 4 residents did not have the correct expiration date or quantity of medication listed on the LIC622. This poses a potential health and safety rights risk to residents in care.	8 9 10 11 12 13 14	
	1 2 3 4 5 6 7		1 2 3 4 5 6 7	
	1 2 3 4 5 6 7		1 2 3 4 5 6 7	

Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

Victoria Bertozzi

NAME OF LICENSING PROGRAM MANAGER:

NAME OF LICENSING PROGRAM ANALYST: Caitlynn Felias

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 08/24/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 08/24/2026