

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 361880964
Report Date: 02/08/2021
Date Signed: 02/08/2021 02:40:14 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, 1650 SPRUCE ST STE 200 MS29-26 RIVERSIDE, CA 92507
FACILITY EVALUATION REPORT	

FACILITY NAME: CADENCE AT RANCHO CUCAMONGA	FACILITY NUMBER: 361880964
ADMINISTRATOR: PEREZ, ALEXIS	FACILITY TYPE: 740
ADDRESS: 10459 CHURCH STREET	TELEPHONE: (480) 664-6500
CITY: RANCHO CUCAMONGA	STATE: CA
CAPACITY: 117	ZIP CODE: 91730
TYPE OF VISIT: Prelicensing	CENSUS: 0
MET WITH: Alexis Perez, Director	DATE: 02/08/2021
	UNANNOUNCED TIME BEGAN: 01:15 PM
	TIME COMPLETED: 02:15 PM

NARRATIVE	
1	On 2/8/2021 Licensing Program Analyst (LPA) Shaunte Henry conducted an announced pre-licensing
2	video conference inspection to the facility due to COVID-19. LPA met with director Alexis Perez. The
3	application is for a 117 bed, Residential Care Facility for the Elderly (RCFE) for 117 non-ambulatory
4	residents of, which 5 can be bedridden. The community consists of two neighborhoods: one for assisted
5	living (AL) and one for memory care (MC).
6	
7	The LPA observed the screening procedures which takes place at the concierge in the main lobby. The
8	LPA observed one apartment in the AL unit and one apartment in the memory care unit. The apartments
9	includes a kitchen with a dishwasher, living room, eating area, and bathroom. The MC apartments are
10	equipped with stackable washing machine/dryer combos. The LPA observed two on-site restaurants,
11	activity areas, living room areas, two salons, a fitness center a wellness center and a locked medication
12	room. LPA observed a sufficient supply of PPE equipment and disinfectants/cleaning supplies, which will
13	be will be locked and kept inaccessible to residents. Fire extinguishers are present throughout the
14	community. First aid kits are available throughout the community. There is a fountain located on the
15	property. A 12 passenger vehicle was observed and appeared to be safe for transportation. There are
16	two courtyards enclosed by the building structure. The fire inspection was conducted and approved.
17	
18	The facility was evaluated in accordance with California Code of Regulations (CCR) Title 22. The facility
19	appears to be ready for licensure.
20	
21	An exit interview was conducted, and a copy of this report was reviewed and provided to Alexis Perez
22	via email to obtain signature.
23	
24	
25	

NAME OF LICENSING PROGRAM MANAGER: Edna Musoke
NAME OF LICENSING PROGRAM ANALYST: Shaunte Henry

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 02/08/2021

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 02/08/2021

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