

Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 392700640

Report Date: 07/07/2021

Date Signed: 07/07/2021 02:53:56 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, 2525 NATOMAS PARK DR. STE.270 SACRAMENTO, CA 95833	
FACILITY EVALUATION REPORT			
FACILITY NAME: COURTYARD AT RIO LAS PALMAS, THE		FACILITY NUMBER: 392700640	
ADMINISTRATOR: GUERRERO, LIZETH		FACILITY TYPE: 740	
ADDRESS: 877 EAST MARCH LANE		TELEPHONE: (209) 957-4711	
CITY: STOCKTON		STATE: CA ZIP CODE: 95207	
CAPACITY: 80		CENSUS: 63 DATE: 07/07/2021	
TYPE OF VISIT: Required - 1 Year		UNANNOUNCED TIME BEGAN: 09:45 AM	
MET WITH: Llzeth Guerrero		TIME COMPLETED: 12:00 PM	
NARRATIVE			
1	On 07/7/2021 at 8:45am, Licensing Program Analyst (LPA) Ashley Boothe spoke with Administrator		
2	Lizeth Gurrero regarding facility risk assessment questions who confirmed no staff or clients have		
3	experienced symptoms within the last 10 days. At 9:45am, LPA arrived unannounced to conduct a		
4	required 1-year Annual inspection. LPA met with Administrator and explained the purpose of today's		
5	inspection. LPA was allowed entry into the facility that is licensed to serve a total capacity of 80 non		
6	ambulatory residnets, today's census is 63, 9 hospice residents in compliance with licensure and fire		
7	clearance. 6 of 6 staff observed cleared and associated in Licensing Information System. Administrator		
8	certificate expires on 6/19/2022.		
9			
10	LPA interacted with a random number of residents during this visit and observed residents engaging in		
11	communal dining and activities. The physical plant was toured inside and outside to ensure the safety of		
12	the residents. LPA observed resident rooms, restrooms, medications room, dining room, communal		
13	areas, patio, kitchen, staff offices, and common restrooms. LPA observed facility last conducted disaster		
14	drill on 6/30/2021. The temperature inside the facility was measured at 76°F is within the required range		
15	of 68°F and 85°F, or in areas of extreme heat the maximum shall be 30 °F less than the outside		
16	temperature. The hot water was measured at 118°F which is not less than 105°F and not more than 120		
17	°F. LPA observed the centrally stored medications area to be locked and inaccessible to residents. LPA		
18	reviewed two MAR's to document medications administered per physicians order. The first aid kit was		
19	found in compliance containing: a current edition of a first aid manual, sterile first aid dressings,		
20	bandages or roller bandages, adhesive tape, scissors, tweezers, thermometers, and Antiseptic solution.		
21			
22			
23			
24	Continued from 809.		
25			
NAME OF LICENSING PROGRAM MANAGER: Liza King			
NAME OF LICENSING PROGRAM ANALYST: Ashley Boothe			

LICENSING PROGRAM ANALYST SIGNATURE:**DATE:** 07/07/2021**I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.****FACILITY REPRESENTATIVE SIGNATURE:****DATE:** 07/07/2021**This report must be available at Child Care and Group Home facilities for public review for 3 years.**

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

FACILITY EVALUATION REPORT (Cont)CALIFORNIA DEPARTMENT OF SOCIAL
SERVICES
COMMUNITY CARE LICENSING DIVISION
CCLD Regional Office, 2525 NATOMAS PARK DR.
STE.270
SACRAMENTO, CA 95833**FACILITY NAME:** COURTYARD AT RIO LAS PALMAS, THE**FACILITY NUMBER:** 392700640**VISIT DATE:** 07/07/2021**NARRATIVE**

- 1 LPA observed a pull alarm system, fire extinguisher inspected on 9/11/2020, smoke and carbon
- 2 monoxide detectors, central heating and air in the facility, fixed fire suppression system last biannual
- 3 inspection conducted on 3/12/2021. LPA observed elevator last annual inspection conducted on
- 4 10/21/2020. LPA observed emergency evacuation chair lift in stairwell. LPA observed food supplies of
- 5 staple nonperishable foods for a minimum of one week and fresh perishable foods for a minimum of two
- 6 days which shall be maintained on the premises at all times. LPA observed knives and toxins
- 7 inaccessible to residents.
- 8
- 9 LPA observed COVID precautions and PPE available and stored for facility staff.
- 10
- 11 Upon a file review the following items were discussed to be submitted with any changes annually to be
- 12 submitted by 7/30/2021.
- 13
- 14 Administrative Organization LIC309
- 15 Designation of Administrative Responsibility LIC308
- 16 Personnel Report LIC500
- 17 Administrator Certificate expires on 6/19/2022.
- 18 Emergency Disaster Plan LIC610E
- 19 First aid/CPR certificate
- 20
- 21 Per the California Code of Regulations, Title 22, Division 6, Chapter 8, no deficiencies observed or cited.
- 22 Exit interview held, a signature on this form acknowledges receipt of these documents and a copy of
- 23 report was given.
- 24
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NAME OF LICENSING PROGRAM MANAGER: Liza King**NAME OF LICENSING PROGRAM ANALYST:** Ashley Boothe**LICENSING PROGRAM ANALYST SIGNATURE:****DATE:** 07/07/2021**I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.****FACILITY REPRESENTATIVE SIGNATURE:****DATE:** 07/07/2021

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