

Department of

# SOCIAL SERVICES

*Community Care Licensing*

## *FACILITY EVALUATION REPORT*

Facility Number: 486803285

Report Date: 07/20/2021

Date Signed: 07/20/2021 02:21:47 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, 101 GOLF COURSE DR. STE. A-230 ROHNERT PARK, CA 94928	
<b>FACILITY EVALUATION REPORT</b>			
FACILITY NAME: C & F SENIOR CARE HOME		FACILITY NUMBER:	486803285
ADMINISTRATOR: FOJAS, LINA		FACILITY TYPE:	740
ADDRESS: 1120 SONGWOOD ROAD		TELEPHONE:	(707) 246-0867
CITY: VALLEJO	STATE: CA	ZIP CODE:	94591
CAPACITY: 6	CENSUS: 5	DATE:	07/20/2021
TYPE OF VISIT: Required - 1 Year	UNANNOUNCED	TIME BEGAN:	01:20 PM
MET WITH: Administrator, Lina Fojas		TIME COMPLETED:	02:35 PM
<b>NARRATIVE</b>			
1	Licensing Program Analyst (LPA), Farhaan Sarangi arrived at C & F Senior Care Home for the purpose		
2	of conducting an Required-1 year inspection. LPA met with Administrator, Lina Fojas, and was granted		
3	access into the facility.		
4			
5	LPA toured the facility and the facility was observed to be at a comfortable temperature, free from		
6	obstructions. and was well lit. Extra hygiene products and linens were available and required bath mats		
7	and grab bars were observed. Water temperature in resident's bathrooms measured within acceptable		
8	range of 105 to 120 degrees F. Cleaning products and other toxins are located in the locked garage.		
9	Knives are located in a locked drawer in the kitchen. Perishable and non-perishable foods were		
10	sufficient, with a 2 day supply of perishable foods, and a 7 day supply of non-perishable foods, as		
11	required. Medications were centrally stored and locked. Fire extinguisher located in the kitchen was last		
12	inspected March 2021. Smoke detectors located throughout the facility and carbon monoxide detector		
13	were tested and functional. Exit doors have auditory alert system. The last Disaster Drill was conducted		
14	on July 2021. LPA observed the auditory device on the backdoor leading to the backyard ran out of		
15	battery. LPA educated the Administrator about the importance of ensuring that this auditory device is in		
16	operating condition. Administrator will obtain a new one and/or change the battery on the existing		
17	auditory device.		
18			
19	In addition, LPAs advised facility to contact County Public Health and Community Care Licensing		
20	immediately if symptoms or COVID-19 + in the facility. Disaster Drills conducted on March 2021. Facility		
21	has PPE supply stored in the kitchen cabinet. Staff have had all PPE training.		
22			
23			
24	No deficiencies cited during today's Required 1- Year inspection. Exit interview was conducted and a		
25	copy of this report was emailed to the facility Administrator, Lina Fojas.		
NAME OF LICENSING PROGRAM MANAGER: Hope DeBenedetti			
NAME OF LICENSING PROGRAM ANALYST: Farhaan Sarangi			

**LICENSING PROGRAM ANALYST SIGNATURE:**



**DATE:** 07/20/2021

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

**FACILITY REPRESENTATIVE SIGNATURE:**



**DATE:** 07/20/2021

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