

Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 486803809
Report Date: 08/25/2026
Date Signed: 08/25/2026 02:12:12 PM

Unsubstantiated

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

This is an official report of an unannounced visit/investigation of a complaint received in our office on 08/20/2026 and conducted by Evaluator Ethel Contreras

PUBLIC	COMPLAINT CONTROL NUMBER: 21-AS-20260820130858
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FACILITY NAME:	COGIR OF VACAVILLE	FACILITY NUMBER:	486803809
ADMINISTRATOR:	SAVOIE, DEBORAH	FACILITY TYPE:	740
ADDRESS:	799 YELLOWSTONE DRIVE	TELEPHONE:	(707) 447-7496
CITY:	VACAVILLE	ZIP CODE:	95687
CAPACITY:	49	DATE:	08/25/2026
		UNANNOUNCED TIME BEGAN:	10:10 AM
MET WITH:	Deborah Savoie-Administrator	TIME COMPLETED:	02:20 PM

ALLEGATION(S):

1	Staff did not prevent facility from being in disrepair
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INVESTIGATION FINDINGS:

1	Licensing Program Analyst (LPA) Contreras arrived unannounced to initiate a Complaint Investigation regarding the above allegation and met with Administrator (Admin) Deborah Savoie.
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4	LPA requested documents, made observations, and conducted interview. Reporting Party (RP) alleges that facility staff did not prevent facility from being in dispair. Information provided indicated that facility elevator is not funtioning. LPA did a walk through of facility and observed it to be clean and in good repair. There to be a total of three elevators. One out of the three elevators is out of service. Two out of three elevators are fully functional and all residents have access to both elevators. LPA reviewed correspondance provided between Admin, Maintanence Director and Account Manager which show that facility has requested elevator repair parts since 8/05/2026. Maintenance Director received update on 8/14/2026 of pending repair material and approval for work order from Account Manager. On 8/19/2026 Maintanence Director did another follow up with the reponse that repair parts are still awaiting.
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	Contuned onto 9099-C.....

Unsubstantiated	Estimated Days of Completion:
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SUPERVISORS NAME: Kimberley Mota	
LICENSING EVALUATOR NAME: Ethel Contreras	
LICENSING EVALUATOR SIGNATURE:	DATE: 08/25/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 08/25/2026

This report must be available at Child Care and Group Home facilities for public review for 3 years.
LIC9099 (FAS) - (06/04) Page: 1 of 2
Control Number 21-AS-20260820130858

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COMPLAINT INVESTIGATION REPORT (Cont)	

FACILITY NAME: COGIR OF VACAVILLE	FACILITY NUMBER: 486803809
	VISIT DATE: 08/25/2026

NARRATIVE	
1	continued from 9099...
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3	There are no incidents that have occurred with residents from the out of service elevator. Facility has
4	taken the needed steps and protocol to ensure that elevator gets replaced and are currently still awaiting
5	repair parts. Facility has also ensured that the other two elevators are functioning and accessible to
6	residents. Admin to send update to CCL once the third elevator is fully functional and operational again.
7	Although the allegation may have happened or is valid, there is not a preponderance of evidence to
8	prove the alleged violation did or did not occur, therefore the allegation is UNSUBSTANTIATED.
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10	No Deficiencies Cited during Visit.
11	Signature on form confirms receipt of documents.
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