

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 486803984
Report Date: 08/11/2026
Date Signed: 08/11/2026 04:06:47 PM

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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
FACILITY EVALUATION REPORT	

FACILITY NAME:	FIVE ACRES AT LEISURE TOWN NORTH	FACILITY NUMBER:	486803984
ADMINISTRATOR/SIROKMAN, JAMES		FACILITY TYPE:	740
DIRECTOR:			
ADDRESS:	5073 VICTOR LANE	TELEPHONE:	(949) 439-2836
CITY:	VACAVILLE	STATE: CA	ZIP CODE: 95688
CAPACITY: 11		CENSUS: 11	DATE: 08/11/2026
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCEDTIME VISIT/INSPECTION	09:55 AM
		BEGAN:	
MET WITH:	James Sirokman-Administrator	TIME VISIT/INSPECTION	04:15 PM
		COMPLETED:	

NARRATIVE	
1	Licensing Program Analyst (LPA) Contreras arrived unannounced to conduct a required annual inspection and was greeted by administrator James Sirokman. Facility is a Residential Care Facility for the Elderly that has a fire clearance approved for eleven residents. Facility currently has 10 residents.
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5	LPA and staff toured the building and grounds which was found to be clean and in good repair. Facility was clean and at a comfortable temperature. LPA observed all walkways and exits to be unobstructed. All required postings were in a highly visible area. Fire extinguishers were charged and last inspected 6/02/2026. Fire alarms and carbon monoxide detector are hard wired with last inspection completed August 2026. Facility runs on well water with last inspection completed 7/07/2026. Water meets standards per report.
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9	LPA observed at least a 2 day supply of perishable and 7 day supply of non-perishable foods. Facility kitchen, refrigerators and freezers were clean, and food was stored properly with expiration dates noted. LPA had conversation with admin that freezers outdoors should be cleaned (Technical advisory given). Toxins are stored in a locked cabinet and inaccessible to residents. Sharps and knives were locked in kitchen drawer. Emergency water and food supply was stored in garage. Facility had an ample supply of linens, towels and extra hygiene products for residents. All bedrooms were equipped with lighting, a night stand and chest of drawers. All bedrooms were clean and in good repair. Resident bathroom had required bath mat and grab bar. Water temperature measured at faucets accessible to residents is within the allowable range of 105 to 120 degrees F. continued onto 809C.....
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Kimberley Mota
Ethel Contreras

DATE: 08/11/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 08/11/2026

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.

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

FACILITY NAME: FIVE ACRES AT LEISURE TOWN NORTH

FACILITY NUMBER: 486803984

VISIT DATE: 08/11/2026

NARRATIVE	
1	continued from 809....
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3	LPA reviewed 7 resident records. Physician Reports up to date.
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5	LPA reviewed 5 staff records. Four out of five staff S1,S2,S3,S4 did not physical reports LIC503. TB
6	Clearance in file. S1 did not have LIC503 or TB clearance in file.
7	(Deficiency cited, see 809D).
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9	LPA and staff conducted a spot check of medication and medication records. Medication is centrally
10	stored in a locked cart.
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12	Updated copies of the following documents were requested for facility file and are to be
13	submitted to CCL within 30 days of this visit:
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18	LIC500- Personnel Report
19	LIC308- Designation of Responsibility
20	Liability Insurance
21	Well water report collected during visit.
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23	Deficiencies are cited from the California Code of Regulations, Title 22, Division 6 of California
24	Regulation and the Health and Safety Code. Failure to correct the cited deficiency(ies), on or
25	before the Plan of Correction (POC) due date, or repeat violations within a 12-month period, may
26	result in a civil penalty assessment. Appeal rights were provided.
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29	Exit interview conducted and report read with Administrator.
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NAME OF LICENSING PROGRAM MANAGER: Kimberley Mota	
NAME OF LICENSING PROGRAM ANALYST: Ethel Contreras	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 08/11/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 08/11/2026

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FACILITY EVALUATION REPORT (Cont)**FACILITY NAME:** FIVE ACRES AT LEISURE TOWN NORTH**FACILITY NUMBER:** 486803984**DEFICIENCY INFORMATION FOR THIS PAGE:****VISIT DATE:** 08/11/2026**DEFICIENCIES & PLANS OF CORRECTION (POCs)**

	Type B	Section Cited	CCR	87412(a)(11)	
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Personnel Records

(a) The licensee shall ensure that personnel records are maintained on the licensee, administrator and each employee. Each personnel record shall contain the following information: (11) A health screening as specified in Section 87411, Personnel Requirements - General.

This requirement is not met as evidenced by:

	Deficient Practice Statement
1	Based on Licensee and LPA observation and record review , the licensee did not comply with the section cited above in that LIC503 Health Screening was missing in file for S1,S2,S3,S4 which poses a potential health, safety or personal rights risk to persons in care.
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	POC Due Date: 08/18/2026
	Plan of Correction
1	Licensee to send plan on how staff will obtain LIC503 Health Screening for S1,S2,S3 and S4 by Plan of Correction due date 8/18/2026. Licensee to then submit completed LIC503 to CCL.
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		Section Cited			
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	Deficient Practice Statement
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	POC Due Date:
	Plan of Correction
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Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

NAME OF LICENSING PROGRAM MANAGER:	Kimberley Mota
NAME OF LICENSING PROGRAM ANALYST:	Ethel Contreras
LICENSING PROGRAM ANALYST SIGNATURE:	
	DATE: 08/11/2026
I acknowledge receipt of this form and understand my appeal rights as explained and received.	
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	DATE: 08/11/2026