

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 486804161
Report Date: 08/25/2025
Date Signed: 08/25/2025 03:16:02 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
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FACILITY NAME: VISTA PRADO	FACILITY NUMBER: 486804161
ADMINISTRATOR/CHO, LINDA	FACILITY TYPE: 740
DIRECTOR:	TELEPHONE: (707) 343-9352
ADDRESS: 105 POWER DRIVE	ZIP CODE: 94589
CITY: VALLEJO	STATE: CA
CAPACITY: 68	CENSUS: 36
TYPE OF VISIT: Required - 1 Year	DATE: 08/25/2025
	UNANNOUNCED TIME VISIT/INSPECTION: 10:30 AM
	BEGAN: TIME VISIT/INSPECTION: 03:20 PM
MET WITH: Veronica de Leon-Tan, Assisted Living Director	COMPLETED:

NARRATIVE

1 At approximately 10:30 AM, Licensing Program Analyst (LPA) Elias Magdaleno arrived unannounced to
2 conduct a required 1-year annual inspection and was greeted by Veronica de Leon-Tan, Assisted Living
3 Director (ALD). Facility is a Residential Care Facility for the Elderly (RCFE) with thirty-six (36) residents
4 in care.
5
6 At approximately 10:50 AM, LPA initiated a tour of the facility with ALD and observed the following:
7 Facility consists of one (1) story, was a comfortable temperature, and passageways were free from
8 obstructions. Fire extinguishers were last inspected 9/2024. Smoke detectors are hardwired and last
9 serviced by third party vendor 8/25. Carbon Monoxide detectors were tested and operational during this
10 inspection. Water temperature measured within the allowable range of 105 to 120 degrees F per Title 22
11 regulations. LPA observed a supply of clean linens, hygiene, incontinent care, and paper products
12 available for residents. Residents' bedrooms were inspected and observed to have all the appropriate
13 furnishings as outlined in Title 22 regulations. Cabinets containing cleaning supplies and other items that
14 could pose a risk were locked.
15
16 LPA observed at least a two (2) day supply of perishable and seven (7) day supply of non-perishable
17 food, as well as an emergency water supply. Food was found to be stored in a safe manner with open
18 items covered. Temperatures for freezer and walk-in refrigerator were with the allowable range per Title
19 22 regulations. Facility telephone was observed operational during today's inspection. LPA observed all
20 required postings were placed in prominent and visible areas.
21
22 Continued LIC809C...

NAME OF LICENSING PROGRAM MANAGER: Victoria Bertozzi
NAME OF LICENSING PROGRAM ANALYST: Elias Magdaleno



DATE: 08/25/2025

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

FACILITY REPRESENTATIVE SIGNATURE:


DATE: 08/25/2025

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 FACILITY EVALUATION REPORT (Cont)	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SANTA ROSA RO, 1450 NEOTOMAS AVENUE, STE. 100 SANTA ROSA, CA 95405
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FACILITY NAME: VISTA PRADO

FACILITY NUMBER: 486804161

VISIT DATE: 08/25/2025

NARRATIVE	
1	Continued from LIC809...
2	
3	There is a shaded seating area in the yard with outdoor space for activities. LPA observed a closet
4	containing board games, equipment for outdoor activities, and season decorations. During this
5	inspection LPA observed constant staff led activities and was informed activities occur daily from 9:00
6	AM to 4:30 PM or as long as there is resident interest. Throughout visit LPA observed activities director
7	to regularly take items out of the activities closet to ensure there were activities that fit all resident
8	preferences. Facility conducts quarterly disaster drills, and the most recent drill was conducted 5/25.
9	LPA observed facility's infection control plan and emergency disaster plan which was last updated 5/25.
10	LPA observed a supply of PPE, emergency supplies, a first aid kit, and flashlights.
11	
12	
13	
14	At approximately 11:40 AM LPA conducted a review of six (6) resident records. All required
15	documentation present.
16	
17	At approximately 1:00 PM LPA conducted review of five (5) staff records. All required documentation
18	present.
19	
20	At approximately 2:00 PM LPA and Health Services Director conducted a spot check of medication and
21	medication records. Medication is centrally stored and locked.
22	
23	Linda Cho Administrator Certificate 7000882740 expires 4/18/27.
24	
25	
26	
27	Updated copies of the following documents shall be submitted to CCL by 9/24/2025:
28	Liability Insurance
29	LIC308 - Designation of Responsibility
30	LIC400 - Affidavit Regarding Client Cash Resources
31	
32	No deficiencies cited. Exit interview conducted with Assisted Living Director, whose signature on form confirms receipt.

NAME OF LICENSING PROGRAM MANAGER: Victoria Bertozzi
NAME OF LICENSING PROGRAM ANALYST: Elias Magdaleno
LICENSING PROGRAM ANALYST SIGNATURE: _____
DATE: 08/25/2025

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

FACILITY REPRESENTATIVE SIGNATURE: _____
DATE: 08/25/2025