

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 496803812

Report Date: 12/09/2021

Date Signed: 12/09/2021 12:08:18 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
FACILITY EVALUATION REPORT	

FACILITY NAME:	COGIR OF SONOMA	FACILITY NUMBER:	496803812
ADMINISTRATOR:	MATTHEW HORSTMANN	FACILITY TYPE:	740
ADDRESS:	800 OREGON ST	TELEPHONE:	(707) 996-7101
CITY:	SONOMA	STATE: CA	ZIP CODE: 95476
CAPACITY:	45	CENSUS: 31	DATE: 12/09/2021
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCED TIME BEGAN:	10:00 AM
MET WITH:	Administrator, Matthew Horstmann	TIME COMPLETED:	12:15 PM

NARRATIVE	
1	Licensing Program Analyst (LPA) Erik Gonzalez Campos arrived unannounced to conduct a Required –
2	1 Year inspection at approximately 10:00 AM and was greeted by reception. At front entrance LPA
3	signed in on an Accushield screening device. LPA met with administrator Matthew Horstmann and
4	health/wellness director Norma Alvarez. There are currently 31 residents in assisted living. Facility has
5	no memory care unit.
6	
7	LPA toured facility with administrator and health/wellness director. The facility was found to be clean and
8	a comfortable temperature. Toxins were observed to be locked and inaccessible on housekeeping carts.
9	LPA observed the necessary personal protective equipment (PPE) to support a resident in isolation. All
10	apartments are private therefore residents could isolate in their own apartment if necessary. Resident
11	bathrooms contain necessary grab bars and non-slip floors/mats. Hand sanitizer was observed
12	throughout the facility. Medication is centrally stored in in locked room on first floor of assisted living.
13	Bedrooms are equipped with lighting and proper bedding that is clean and in good repair.
14	
15	Staff were observed to be wearing masks, residents were also observed wearing masks. Staff were N95
16	fit tested as well as given infection control training in July by an outside party, CPR Survival. Facility has
17	a 100 percent vaccination rate for staff/residents in assisted living. Facility is the process of obtaining
18	booster shot and flu shot for staff/residents. Staff are discouraged from coming in to work if they feel ill.
19	Activities include black jack and bingo. LPA observed chairs setup for social distancing in activity
20	room. Current visitation policy is to have visitors screened and sign in at front entrance. Dining room is
21	open for service and allows for social distancing. Visitors can visit in resident apartments although some
22	prefer to visit in the courtyard. Fire extinguishers were last inspected January 22, 2021. LPA requested
23	the following documents: Emergency Disaster Plan and Liability Insurance.
24	
25	Exit interview conducted with administrator. LPA unable to print, will email a copy of the report to the
	administrator. No deficiencies cited during this inspection

NAME OF LICENSING PROGRAM MANAGER: Kimberley Mota

NAME OF LICENSING PROGRAM ANALYST: Erik Gonzalez Campos

LICENSING PROGRAM ANALYST SIGNATURE:**DATE:** 12/09/2021

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

FACILITY REPRESENTATIVE SIGNATURE:**DATE:** 12/09/2021

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