

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 496803998

Report Date: 03/10/2026

Date Signed: 03/10/2026 12:04:29 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: OAKMONT GARDENS	FACILITY NUMBER: 496803998
ADMINISTRATOR/KABADI, SANJAY	FACILITY TYPE: 740
DIRECTOR:	
ADDRESS: 301 WHITE OAK DRIVE	TELEPHONE: (707) 538-1914
CITY: SANTA ROSA	STATE: CA
CAPACITY: 79	ZIP CODE: 95409
TYPE OF VISIT: POC	CENSUS: DATE: 03/10/2026
	UNANNOUNCED TIME VISIT/ INSPECTION: 09:00 AM
	BEGAN: TIME VISIT/ INSPECTION: 12:19 PM
MET WITH: Sanjay Kabadi, Administrator	COMPLETED:

NARRATIVE

1 Licensing Program Analyst (LPA) Christi Coppo arrived unannounced to conduct a POC case
2 management visit and was greeted by concierge. LPA met with Administrator Sanjay Kabadi
3
4 On 2/19/26 facility was issued a citation on substantiated complaint findings of deficiency of Health and
5 Safety Code 1569.269 (complaint # 21-AS-20260109140715). The plan of correction required facility to:
6 Facility to submit plan identifying why response times are delayed and the method of correction facility
7 will implement in order to correct the delays in call button/pendant response time, by plan of correction
8 due date. Additionally, facility to ensure that pendant/call button system is in good repair, fully
9 operational, and staff is sufficient to timely answer pendant/call button calls, by plan of correction due
10 date. Facility to submit paperwork of pendant/call button system implementation and log showing that
11 pendant/call button system is in good repair and fully operational, by plan of correction due date. Plan of
12 correction was due 3/5/26.
13
14 On 3/4/26 LPA received from facility the plan identifying why response times are delayed and the
15 method of correction facility will implement in order to correct the delays in call button/pendant response
16 time. However, as of today, 3/10/26 CCL has not received paperwork of pendant/call button system
17 implementation and log showing that pendant/call button system is in good repair and fully operational.
18 Therefore, a civil penalty is being issued for failure to correct for the period of 3/6/26 through 3/10/26 at
19 **\$100 per day for a total of \$500. The \$100 per day civil penalty will continue to accrue until the**
20 **deficiency is cleared.** Per Administrator, facility has decided the vendor with whom they will purchase
21 the new pendant system but have yet to sign the contract and begin implementation. Administrator will
22 advise LPA once implementation has been completed. Once implementation is complete, facility will
23 immediately train staff on new system and submit log to CCL showing system is fully operational and
24 responses are timely.
25
Continued on 809C...

NAME OF LICENSING PROGRAM MANAGER: Victoria Bertozzi

LICENSING PROGRAM ANALYST SIGNATURE:

[Signature box]

DATE: 03/10/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

[Signature box]

DATE: 03/10/2026

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

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.

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

FACILITY NUMBER: 496803998

VISIT DATE: 03/10/2026

NARRATIVE	
1	Continued from 809...
2	
3	Additionally, LPA conducted a review of facility's transportation policy outlined in facility's Admission
4	Agreement, Plan of Operation, and Emergency Disaster Plan (LIC610E). Page 6 item G in facility
5	Admission Agreement states they will make transportation available to residents "to the nearest
6	appropriate health facilities for medical and dental appointments, social services agencies, shopping,
7	recreational facilities, and religious activities, as outlined in the Resident Handbook."
8	
9	LPA reviewed Resident Handbook. Page 31 of handbook does offer an outline of transportation services
10	and days on which services will be available.
11	
12	LPA reviewed facility's Plan of Operation (POO), section VIII pertaining to transportation. This section
13	specifies in greater detail the times and days on which transportation services will be provided.
14	Additionally, per the Plan of Operation, all Assisted Living (AL) residents can book a ride with Lyft by
15	contacting the concierge. The cost is paid for by the facility, initially, but then charged back to the
16	residents on their monthly statement. LPA discussed with Administrator including in the Admissions
17	Agreement, or the Resident Handbook, the details stated in the POO to provide residents with clarity on
18	services and charges. LPA discussed with Administrator alternative appointment scenarios that could fall
19	outside of the specified days and times and making transportation available.
20	
21	Facility has a van that is operated by staff (S1 and S2) that are licensed with a class B to drive facility
22	van. LPA reviewed training record and driver's license class, both drivers possess class B license.
23	Additionally, facility is in the process of getting a bus licensed for use that will be used in conjunction
24	with the existing van. Upon LPA arrival, LPA observed van in operation. Driver was heading out, enroute
25	to a resident medical appointment.
26	
27	LPA reviewed facility's Emergency Disaster Plan (LIC610E), plan does not state that drills will be
28	conducted with residents. However, residents are provided a Resident Emergency Preparedness Guide
29	along with their Resident Handbook. Topics covered are: Resident Preparedness, In the Event of a Fire,
30	Wildfire, Power Outage, Earthquake, Preparedness checklist, and Contacts. Guide does not state drills
31	will be conducted with residents. On page 6 of guide, under "Community Basics to Know/Staffing," it
32	states that "we conduct fire drills on a monthly basis, elopement drills...on a quarterly basis, and larger
	fire drills on an annual basis.
	Continued on 809C(2)...

<p>NAME OF LICENSING PROGRAM MANAGER: Victoria Bertozzi</p> <p>NAME OF LICENSING PROGRAM ANALYST: Christi Coppo</p> <p>LICENSING PROGRAM ANALYST SIGNATURE:</p>	<p>DATE: 03/10/2026</p>
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I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.

<p>FACILITY REPRESENTATIVE SIGNATURE:</p>	<p>DATE: 03/10/2026</p>
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FACILITY EVALUATION REPORT (Cont)**FACILITY NAME:** OAKMONT GARDENS**FACILITY NUMBER:** 496803998**VISIT DATE:** 03/10/2026**NARRATIVE**1 Continued from 809C...
23 During these drills residents should react as though the situation is real and respond by following the
4 appropriate steps as laid out in this guide." One could infer that residents are to be a part of the drills,
5 but the guide does not expressly state as such. LPA discussed with Admin adding clarification to guide
6 to remove any ambiguity. On page 7 of guide under "Onsite Designated Evacuation Assembly Sites,"
7 the location of evacuation sites are listed.
89 Per Scott Doherty, V.P. Senior District Operations Manager (DOM), facility is currently updating their
10 emergency disaster plan via a consultant. DOM reported to LPA that the consultant is helping the facility
11 organize a community wide evacuation drill. Per DOM, consultant will speak with the residents within the
12 next two weeks. This consultant will also help the on site operations team to update the community
13 emergency procedure manual and the consultant will be helping the operations team to organize a
14 community wide evacuation drill. Per DOM, the community also has scheduled representatives from the
15 local fire department to come to the community to speak with the residents next week. Per LPA review of
16 these documents, LPA finds facility to be following their plan of operation and Admissions Agreement.
17 However, there is room for clarity as discussed with Administrator.
1819 LPA observed Emergency Disaster Plan to need updating as previous Health and Wellness Director and
20 previous Administrator are listed under assignments of duties. Administrator will submit updated plan no
21 later than April 1, 2026.
2223 **Deficiencies cited from the California Code of Regulations, Title 22, Division 6 of California**
24 **Regulation and the Health and Safety Code. Appeal rights given and discussed with**
25 **Administrator. Failure to correct the deficiency and/or repeat deficiencies within a 12 month**
26 **period may result in civil penalties. Exit interview conducted with Administrator and a copy of**
27 **this report was given.**
28
29
30
31
32**NAME OF LICENSING PROGRAM MANAGER:** Victoria Bertozzi**NAME OF LICENSING PROGRAM ANALYST:** Christi Coppo**LICENSING PROGRAM ANALYST SIGNATURE:****DATE:** 03/10/2026**I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.****FACILITY REPRESENTATIVE SIGNATURE:****DATE:** 03/10/2026