

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 079201196
Report Date: 03/26/2025
Date Signed: 03/26/2025 11:41:16 AM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION OAKLAND ASC, 1515 CLAY STREET, STE. 310 OAKLAND, CA 94612
FACILITY EVALUATION REPORT	

FACILITY NAME: COGIR OF BRENTWOOD	FACILITY NUMBER: 079201196
ADMINISTRATOR/FREETH, JEFFREY DIRECTOR:	FACILITY TYPE: 740
ADDRESS: 150 CORTONA WAY	TELEPHONE: (925) 308-9040
CITY: BRENTWOOD	STATE: CA ZIP CODE: 94513
CAPACITY: 150	CENSUS: 127 DATE: 03/26/2025
TYPE OF VISIT: Case Management - Incident	UNANNOUNCED TIME VISIT/INSPECTION: 10:05 AM
MET WITH: Cayia Peevy, Executive Director	BEGAN: TIME VISIT/INSPECTION: 11:55 AM
	COMPLETED:

NARRATIVE	
1	On 03/26/2025 at 10:00AM, Licensing Program Analyst (LPA) T. Syess-Gibson arrived unannounced to
2	conduct a case management visit in regard to an incident report. LPA met with Executive Director (ED),
3	Cayia Peevy and Health and Wellness Director, Kuldip Singh. LPA explained the purpose of visit.
4	
5	Based on the incident report dated 03/21/2025, at around 5:30AM on 03/16/2025 staff responded to the
6	emergency pull cord. Resident (R1) had an unwitnessed fall. R1 reported to staff that the fall happened
7	in the living room of his apartment, he was able to get himself up and walk into his office and called for
8	help, when R1 started to feel pain in right hip. Staff called 911 and R1 was transported to the hospital.
9	
10	During visit, LPA interviewed staff and reviewed R1's file including physician's report and incident report.
11	R1's physician's report stated that R1 does not need assistance with transporting or ambulating.
12	Interview with staff revealed that R1 sustained a broken right hip as a result of the fall and after right hip
13	surgery R1 was admitted to skilled nursing facility on 03/19/2025. Staff also stated R1 was independent
14	prior to fall and required no assistance with ambulating or ADLs, R1 is back in the community and has
15	been very social, participating in activities and comes down for meals daily.
16	
17	No deficiencies sited during visit.
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19	Exit interview conducted and a copy of this report provided.
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23	
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25	

NAME OF LICENSING PROGRAM MANAGER: Harpreet Humpal

NAME OF LICENSING PROGRAM ANALYST: Tonica Syess-Gibson

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 03/26/2025

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 03/26/2025

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.