

Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 079201317

Report Date: 03/27/2024

Date Signed: 03/27/2024 04:53:41 PM

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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: IVY PARK AT WALNUT CREEK	FACILITY NUMBER: 079201317
ADMINISTRATOR: CASTRO, GILBERT	FACILITY TYPE: 740
ADDRESS: 2175 YGNACIO VALLEY ROAD	TELEPHONE: (925) 932-3500
CITY: WALNUT CREEK	STATE: CA
CAPACITY: 86	ZIP CODE: 94598
TYPE OF VISIT: Prelicensing	CENSUS: 62
MET WITH: Executive Director Gilbert Castro	DATE: 03/27/2024
	UNANNOUNCED TIME BEGAN: 01:00 PM
	TIME COMPLETED: 05:00 PM

NARRATIVE	
1	On 3/27/2024, Licensing Program Analyst (LPA) J. Sampair arrived unannounced to conduct a change
2	of ownership prelicensing visit. Upon entry into the facility, the LPA informed Executive Director (ED)
3	Gilbert Castro of the purpose of the visit.
4	
5	LPA toured the facility inside out with the ED. The LPA inspected the kitchen, dining areas, restrooms,
6	community living spaces, bedrooms, bathrooms, trash areas, and the exterior of the facility. The facility
7	was appropriately furnished and well lit. Professional grade equipment was installed and maintained for
8	resident care. Food supplies were checked and observed to be sufficient and new orders come on a
9	regular basis. No swimming pool or other body of water was on the facility grounds. Medications are
10	centrally stored. Bathrooms and showers were observed equipped with grab bars and non-skid mats.
11	Carbon monoxide and smoke detectors operational. First aid kit inspected. Fire extinguishers were
12	serviced 1/31/2024. Facility has emergency lighting. Hot water temperature in one of the common areas
13	was tested and measured at 115.9 degrees Fahrenheit at 3:14 PM. Complaint poster, Ombudsman and
14	Personal Rights posters, Theft and Loss Policy, Rights to Resident Council and Rights to Family Council
15	were observed posted in a prominent place.
16	
17	Facility passed pre-licensing inspection and Component III training provided for ED Castro. Final review
18	of application and license to be granted by Central Applications Bureau analyst.
19	
20	Exit interview conducted and copy of this report provided via email to ED Castro.
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25	

NAME OF LICENSING PROGRAM MANAGER: Harpreet Humpal
NAME OF LICENSING PROGRAM ANALYST: James Sampair

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 03/27/2024

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 03/27/2024

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