

## **Detterman, Mark, Env. Health**

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**From:** Coleman, Heather <HColeman@sanleandro.org>  
**Sent:** Tuesday, October 30, 2018 1:24 PM  
**To:** Detterman, Mark, Env. Health; Khatri, Paresh, Env. Health  
**Cc:** Mogensen, Andrew  
**Subject:** Operation plans for Cozy Nest adult day care  
**Attachments:** REVISED-ADHC-REVIEW SET - DRAFT 10-14-2018.pdf; PLN18-0080 Application cover letter transportation and operation plans.pdf

Hi, Mark and Paresh. Thank you for attending the meeting today to discuss Cozy Nest's proposal for an adult day care center at 2125 Williams St.

Attached please find:

- The plan set
- The other application materials submitted, including a program plan that describes the proposed services and operations.

See pp. 9-10 of the .pdf (pp. 4 – 5 of Cozy Nest ADHC Portfolio), for a list of the services they intend to provide.

On p. 20 of the .pdf (p. 15 of the Cozy Nest ADHC Portfolio), they say they provide services to each participant for at least four hours per day, but "extended hours may be offered to meet participant and/or caregiver needs." They say they will operate from 8a to 3p M – F, with services provided from 8a to 2p M – F.

*Heather*

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**Heather Coleman**, Planner I

(510) 577-3325 main | (510) 577-3387 direct

My hours: Mon. 8a – 4p, Tues. 8a – 4p, Weds. 8a – 12p

*For general zoning information, please call (510) 577-3325 or email [planner@sanleandro.org](mailto:planner@sanleandro.org).*

### **City of San Leandro**

Planning Services, Community Development Department

835 East 14th Street, San Leandro, CA 94577

[www.sanleandro.org](http://www.sanleandro.org) | [Zoning](#) | [Projects](#)

## hb+a Architects

City of San Leandro,

835 East 14<sup>th</sup> Street, San Leandro, CA. 94577

Ref: Administrative Review & Exception for 2125 Williams Street

Included with this letter please find the following:

1. A letter about shared usage of Parking by different tenants on the parcel by the property owner.
2. Operations' Plan by the (N) tenant for the proposed Adult Day Care.
3. Cozy Nest ADHC's Portfolio and company information.

Per 4-1708 the proposed use complies with all 4 conditions as noted below for Reduced Parking:

- a. The Parking demand will be less than the requirements, (see included here a letter from the new tenant about their operations), other than parking usage by staff members, all users will be dropped off and picked up in Cozy Nest's vans.
- b. The building design isn't changing and long term occupancy will not generate additional parking usage.
- c. 2125 is being converted to a new use, most all other tenants are either manufacturing or warehouses.
- d. See included property owner's letter about parking usage by all tenants on the entire parcel.

Proposed use complies, and is compatible with the surroundings, the tenants are not proposing any design features that will alter the outside appearance of the building or hinder the neighboring operations. The proposed Adult Day Care will not cause any hardship or damage to any property in the vicinity and a similar use has been granted to Center for Elder Independence PACE Program located on 1850 Fairway drive.

Please don't hesitate to contact me at 510-830-4797 with further questions.

Hafsa Burt, AIA | hb+a Architects-



Donald L. Jones Company  
 Jones Partners LLC  
 640 Hegenberger-Heinz  
 2101 Williams Associates  
 American Metal Properties  
 American Standard Properties  
 ASP/RWM Properties  
 Bypass 93 Properties  
 Cottonmill Properties LLC  
 Dow-Pac Properties  
 Durkee Properties LLC  
 Grand/Grove Partnership  
 Highway 4 Investors LLC  
 Jones Group I  
 National Court Properties  
 North Crossroads Business Park  
 Papermill Properties  
 PlyProperties  
 Prudential Properties  
 Williams Properties  
 White Oak Investors

To Whom It May Concern:

Please find enclosed the site plans for Parcel #s 77A-645-5-1, -5-2, -6-1, and -6-2. These Properties share common driveways and parking lots. At this location, there are currently provided 440 parking spaces that are shared by tenants of both parcels. In the below table, you will see a full schedule of tenants, use type within their premises, and area dedicated to each use.

Tenant Name	Total SF	Office	1:300	Warehouse	1:1,000	Manufacturing SF	1:500	Total Parking
<b>PARCEL #s 77A-645-5-1, -6-1</b>								
*Subject Space	15,500							
DirectTV	16,700	2,400	8	13,700	14		-	22
King's Asian Gourmet	31,990	500	2	21,890	22	9,600	19	43
Bay Cities Produce	41,070	4,000	13	19,070	19	18,000	36	68
Moore Newton Hardwoods	41,810	2,000	7	39,810	40		-	46
Suddenlink	42,570	4,500	15	38,070	38		-	53
McNely Family Investors	6,000	-	-	6,000	6		-	6
<b>PARCEL #s 77A-645-5-2, -6-2</b>								
Robert Cardellino	2,483	300	1	2,183	2		-	3
Wonder Ice Cream	3,359	1,500	5	1,859	2		-	7
Metropolis Iron Works	6,200	600	2	1,000	1	4,600	9	12
Old Republic Title	4,225	425	1	3,800	4		-	5
CustomEDM	5,789	600	2	1,189	1	4,000	8	11
Vacant Office	1,031	1,031	3				-	3
Firelight Glass Co	5,100	1,200	4			3,900	8	12
Kwan	550	550	2				-	2
Total Parking Required								294

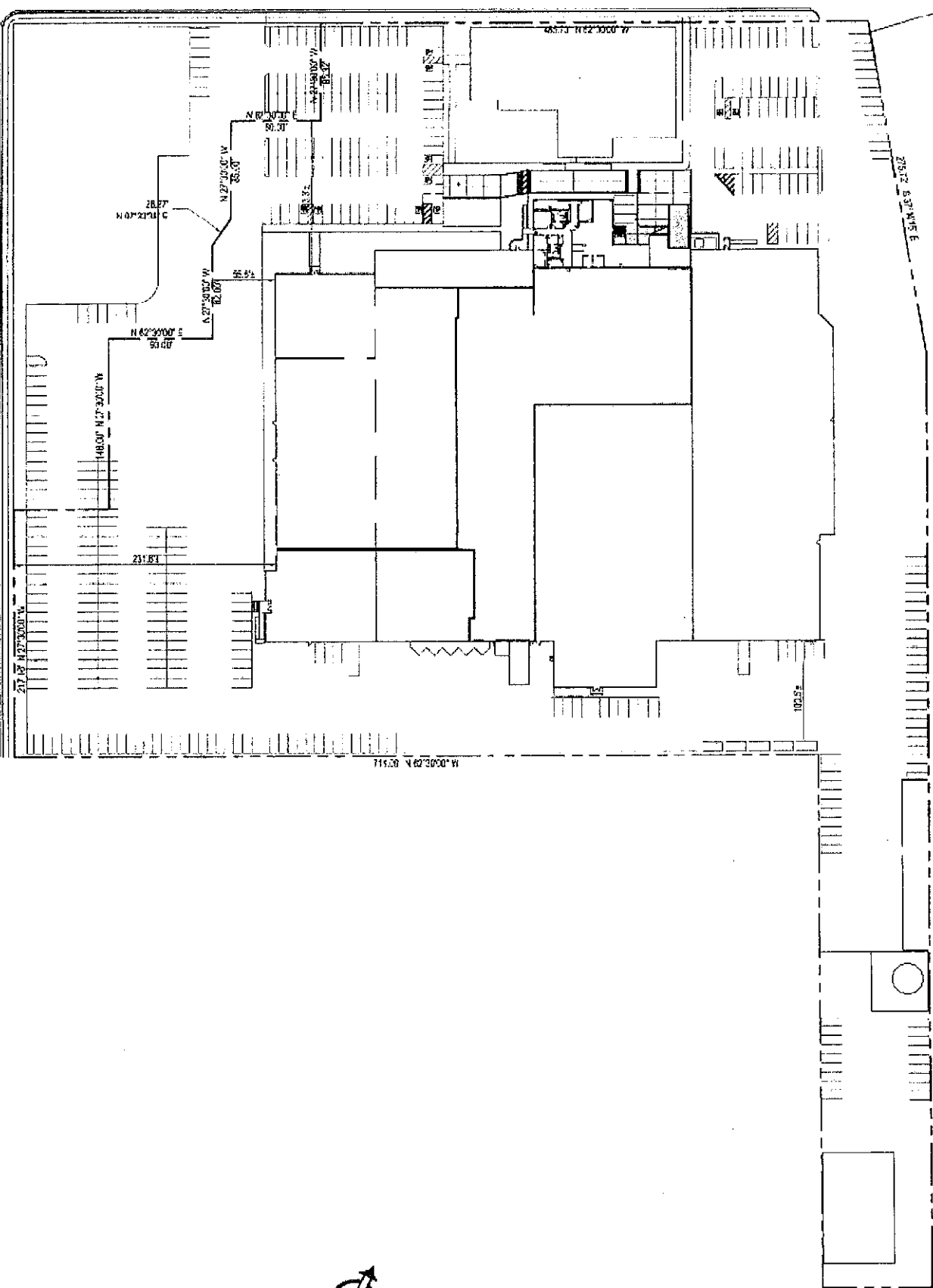
The code for use types indicates a parking ratio of 1:300 sf for offices, 1:500 sf for manufacturing, and 1:1,000 sf for warehouses. Cumulatively, this indicates a parking requirement of 294 spaces for the non-Cozy Nest ADHC tenants in the facility compared to the 440 total parking spaces currently provided

The parking requirements for Cozy Nest ADHC are \*\*TBA\*\*.

Sincerely

October 12, 2018

400  
R-11  
L-1B



SITE PLAN

To Whom It May Concern:

Enclosed Operational letter for your review.

## Transportation Operations

- 10 center vehicles.
- 20 employees daily.
- 5 employee vehicles (Center vehicles provide transportation for employees).
- Morning:
  - Time pick up participants from home: 7:30AM
  - Time drop off participants at center: 8:00AM-10:00AM
- Afternoon:
  - Time take participants home: 1:00PM-2:30PM
- Trips per day:
  - Morning: each center bus/van: 2 trips
  - Afternoon: each bus/van: 2 trips
- 15 buses/vans per day including outreach.

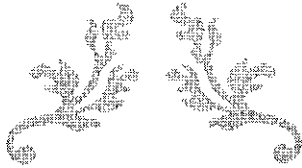
Cozy Nest ADHC will maintain a fleet of 10 vehicles to be used as shuttles. The center will have 20 full-time employees, with only 5 of them bringing their own vehicles (the shuttles will provide transportation to the remaining employees). The drivers arrive at 7am for the daily vehicle safety check and to learn of the day's schedule and route. Participants are picked up starting at 7:30am and drop-offs continue from 8-10am. In the afternoon, participants are shuttled home from 1-2:30pm. Each shuttle vehicle will make two trips in the morning and two trips in the afternoon. Including outreach vehicles that some participants may use, there will be a total of 15 buses/vans at the center each day.

Sincerely,  
Hanh Giang



Administrator  
Cozy Nest ADHC  
2125 Williams St  
San Leandro CA 94577  
USA

10/12/2018



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# COZY NEST ADHC PORTFOLIO

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Cozy Nest ADHC  
2125 Williams St, San Leandro, CA

Hanh Giang  
Cozy Nest ADHC  
2125 Williams St, San Leandro, CA

July 22, 2018

Dear Mayor,

I am writing to kindly ask you to support our Cozy Nest ADHC, LLC to open at 2125 Williams St, San Leandro, CA this location.

Adult Day Health Care (ADHC) is a necessary and growing industry in the Bay Area and throughout the country. Our center, Cozy Nest ADHC, LLC is a for-profit, limited liability corporation that is designed for elderly who are lonely, isolated, and hopeless and no longer manage independently. We provide the frail elderly with full range of health care, social and rehabilitative services, nutritious meals and transportation. Our participants will spend quality time with peers of similar background and culture and participate in designed social and therapeutic recreational activities that to help maintain and increase their functioning and independence.

The owners, Sisley Wong and Hanh Giang have experience with working with disabilities and the elderly. Sisley Wong is running an assisted living facility in Sacramento and Hanh Giang is currently a Program Director at Prestige ADHC. We found there are no existing facilities in San Leandro, and there are only four ADHC centers in all of Alameda County. But almost 30% of these areas are Asian population; therefore, Cozy Nest ADHC can fill in this gap. we empathy for those who require support in order to remain living in the community, so we want to help Alameda County elderly to have independent and healthy lifestyle, also giving them opportunity to get out of the house and receive both mental and social stimulation. California Department of Aging, Community-Based Adult Services Branch, Jill Sparrow, Chief already in May 2018 approved our Cozy Nest ADHC's Program Plan and allowed Cozy Nest ADHC to open ADHC center at San Leandro City.

We are submitting our center floor plan to the City of Alameda County for approval to open the center at this building. Cozy Nest ADHC, LLC has discussed this location with the City of San Leandro. The City has verbally approved this location for an elderly day care facility and asked Cozy Nest to submit the completed written floor plan for written approval. We kindly ask if we could get the supporting letter from you to attach along with our floor plan to the City. I believe this will effectively and successfully help us to get City's approval. We sincerely want to help improve Alameda County seniors' overall health through our integrated person-centered program and provide them comfortable, and stimulating environment in which our participants can thrive and their caregivers will experience less stress as they will not only have a few hours of caregiving relief, but will be comfortable that their loved one is receiving good care.

Thank you so much indeed to taking your time to read this letter. I am looking forward to hearing from you.

Sincerely,  
Hanh Giang  
Administrator  
Cozy Nest ADHC





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# Cozy Nest Adult Day Health Care Center

## I. Health Care Services

- Monitoring health status, Medication management, medical assistance, blood pressure checks, and skilled nursing care, including wound care.
- Occupational, physical and speech therapy.
- Nutritional counseling/education, food security and daily nutritionally balanced hot culturally meal and snack.
- Assist with activities of daily living, personal care includes assisting to toilet, changing and feeding.
- Social work services and care coordination.

## **Behavioral Health Program and Management**

Provide supportive setting, group sessions and professional training/education in dealing with behaviors with wandering, inappropriate behavior, hallucination, speech difficulties, incontinence, anxiety, depression, and other mental illnesses to help them with problem solving, activities of daily living and relaxation.

## **Social Work Services**

- One-on-one counseling
- Family counseling
- Psychosocial assessment
- Support social services, such as access to public services, make referral to outside resources, and supportive care in their home

## **Special Diet Management Program & Diabetes Management Program**

Provide health monitoring and dietary educational programs for participants who are on special diet, focusing on peer/staff support and meal planning, and help with insulin shots and blood sugar checks.

## **Lifelong Learning Opportunities**

- Crafts & drawing & coloring
- English class & music class

- Health education
- Brain fitness
- Performing arts & dancing

## **Social Recreation Activities**

- Majong
- Bingo games
- Black jack games
- Balloon toss & Ring toss
- Dominos
- Puzzles
- Chinese chess
- Chinese calligraphy
- Ping pong
- Toss dice
- Golf
- Karaoke

## **II. Facility Design**

- PT/OT room with professional therapy equipment: parallel bar, treadmill, leg extension machine, restorator, therapy ball/band.
- Private suite for massage.
- Women quiet room & Men quiet room for resting and napping.
- Spacious library with calm and relaxing music.
- Large and comfortable dining areas for AM healthy snacks and balanced meals.
- Karaoke room.
- Many recreational areas for brain fitness, group exercises, socialization and educational classes.
- Private suites for treatment, health screening and participant family's meetings/phone call.

## **III. Participant Capacity**

200-250 participants per day

## **IV. Participant Ethnic Backgrounds**

Primarily Chinese, Vietnamese, Korean

## **V. Transportation Services**

Safe door-to-door transportation of Alameda County.

## **VI. The Program Cost**

Covered by Medical, Managed Health Plan, VA, LTC Insurances and private pay.

Accept Medicare Advantage Plans (HMO) in 2020

## **VII. Our Team**

All employees are licensed with Physician, Registered Nurses, Physical therapist, Occupational Therapist, Speech Therapist, Pharmacist, Dietician, Activity Coordinator, Social Workers, Program Aids, Drivers and others on staff providing any necessary care needed throughout the day. There are an administrator, a program director and a Board of Directors providing input to ensure a successful experience for each senior.

## **VIII. Our Mission**

Is to assist the elderly and mentally or physically disabled adults to remain in their homes as long as possible, to avoid emergency visits, hospitalizations, or other institutionalization. Maintain deterioration of their medical, cognitive or mental health condition, and to increase their functioning and independence, while at the same time, relieving the caregivers of their duties during the day.

## **VX. Values/ Philosophy**

We treat everyone equally, with respect, dignity and compassion; we are open, trustworthy and honest with shareholders, colleagues, participants, providers and our community; we satisfy our participants with innovative technology and high quality, premium value and service; we believe that people of any age are capable of making progress with encouragement and motivation; we develop relationships and ways to make a positive difference in our participant's lives, we believe in maintaining quality service as the foundation of the long-term success of our program, we believe in continuous ongoing effort to improve participant services and increase staff's productivity, knowledge and skills.

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## **Contact Us**

408-300-2367

cozynest.adhc@yahoo.com

## **Location**

2125 Williams St

San Leandro, CA 94577

## **Hours of Operation**

Monday to Friday 8:00AM-3:00PM

# Hanh Giang's Research

## National Median Monthly Cost Per Person in 2016

Adult Day Health Care: \$1,473

Home Maker: \$3,813

Home Health Aide: \$3,861

Assisted Living: \$3,628

Nursing homes: \$7,698

*The government has realized the significance of the ADHCs, as being proof from their surveys and researches that elderly who attended ADHC have decreased hospitalization and ER visits. At mean time, they can maintain deterioration of their medical, cognitive or mental health condition. As Alameda County Social Services Agency has created an Elders and Disabled Adults project to plan to help elderly to improve their quality of lives, including supporting elderly to attend Adult Day services. Not only Alameda County, even National Adult Day services Association (NADSA) announced that ADHC can bill Medicare Advantage Plans (HMO) in 2020. The reason why the government that support ADHC, because attending ADHC is the cheapest cost to insurance companies.*

# Hanh Giang's Experience in ADHC

ADHC is very significant and essential to elderly. Myself as a provider of ADHC, we have an inherent understanding of the benefits; we are with participants daily, seeing the stroke victim taking her first steps in two years, experiencing the deep gratitude of the caregivers of those suffering with Alzheimer's disease and dementia, watching the participant who stated she hadn't smiled in 5 months, suffering from depression, smiling and laughing again with her peers while at center. We also realized our participants utilize the emergency rooms less, fall fewer times, maintain their blood sugars better and take fewer anti-depressants than they would have if they didn't attend the center.

Among those over the age of 65, falls are the leading cause of injury and death. Falls in the elderly are costly, both from a quality of life and financial perspective, and preventable. We have a participant with a history of hospitalizations, due to falls, suffering from depression, diabetes, pain, unsafe home environment and gait problems. Although he may receive some benefit from nursing or physical therapy interventions, these alone will not provide maximum reduction of risk.

**To achieve this, all appropriate members of the team must be involved and on a continuous basis:**

1. Dietician to educate regarding diet and assess adherence
2. RN to address the participant's medication regimen and provide education
3. Physical therapist to address the participant's gait impairment and pain
4. Social worker to provide case management to improve the home's safety and the psychological consultant to address the participant's mood
5. During the program day, the team will continue to observe him, providing reinforcement and support of interventions and education. They will also observe if treatments are working in the "real world" and provide adjustments – further refining treatments to provide optimal results.

# Cozy Nest ADHC Program Plan Components

## A Introduction - Organization Background and Center Overview

- A.1. Describe your organization, its core business, history, mission, values/philosophy, objectives, and population served. Indicate if your organization has licensed health or social services facilities or is an approved Medi-Cal provider. (Identify if the organization is non-profit or for-profit)
- a. **Description of Organization:** Cozy Nest ADHC, LLC is a for-profit, limited liability corporation. It was formed specifically to start and run adult day health care services to support the frail elderly and those with disabilities in Alameda County, specifically Chinese-Americans. The owners, Hanh Giang and Sisley Wong have a passion for working with those with disabilities and the elderly, and empathy for those who require support in order to remain living in the community, and supporting them to remain or become healthier, cognitively, emotionally and physically. Ms. Giang has a Bachelor's degree in Sociology and over four years' experience working in an adult day health care center, in progressively responsible roles (SW Asst., PD asst. PD). She feels very passionate about the industry and serving the Chinese-American Population. She is fluent in four languages, Vietnamese, English, Mandarin and Cantonese, and is bi-cultural Chinese American. Ms. Wong has a bachelor's degree in Business Administration in Finance, is a real estate agent, restaurant owner, and is in the process of purchasing an assisted living facility. Ms. Wong is also bi-cultural Chinese-American, and believes that her business acumen, Ms. Giang's experience, and their combined passion for this population will support the success of their organization. (Please also see question A2, for more information on why this organization wants to open an ADHC/CBAS center).
  - b. **Core business:** ADHC/CBAS/ADP
  - c. **History (Date founded):** 2/18/18
  - d. **Mission:** The Mission of Cozy Nest is to assist the elderly and mentally or physically disabled adults to remain in their homes as long as possible, supporting their identified goals, while at the same time, relieving the caregivers of their duties during the day.
  - e. **Values/philosophy:** We treat everyone equally, with respect, dignity and compassion; we are open, trustworthy and honest with shareholders, colleagues, participants, providers and our community; we satisfy our participants with innovative technology and high quality, premium value and service; we believe that people of any age are capable of making progress with encouragement and motivation; we develop relationships and ways to make a positive difference in our participant's lives, we believe in maintaining quality service as the foundation of the long-term success of our program, we believe in continuous ongoing effort to improve participant services and increase staff's productivity, knowledge and skills.
  - f. **Objectives:** Significantly improve participants' overall health through an integrated person-centered program that addresses their psychological, cognitive, social and physical health needs. To provide a comfortable and stimulating environment in which our participants can thrive and their caregivers will feel happy that they are safe. And caregivers will experience less stress as they will not only have a few hours of caregiving relief, but will be comfortable that their loved one is receiving good care.
  - g. **Population served :**
  - h. **Organization is currently a Medi-Cal provider and/or operates a licensed facility: Yes or No. If 'Yes,' specify: NO**





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A.2.	<p>Briefly explain why your organization wants to develop a new ADHC/CBAS center and how developing and operating an ADHC/CBAS center fits with your organization's core business(es), mission, values/philosophy, objectives and population(s) served.</p> <p>Ms. Giang has worked in ADHC (Prestige ADHC) for over four years. She has seen first-hand the benefit the ADHC program brings to participants. She has wanted to open a center for a few years and is now able to do so. She has researched Alameda County and found that there are only four centers in the entire county. She feels that when the elderly are left home alone, they can become depressed, lonely useless and weak, and she is correct.</p> <p><a href="https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/1188033">https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/1188033</a> Loneliness is associated with poor health outcomes. The Chinese elderly are further susceptible to loneliness due to being disenfranchised due to language and cultural barriers. Ms. Giang feels a great deal of empathy for those who do not have access to an ADHC/CBAS program that will fit their needs and has decided to develop an ADHC/CBAS/ADP center to fit these needs and support this population.</p>
A.3.	<p>Briefly identify the population(s) you plan to serve at the ADHC/CBAS center such as age groups, cultural/ethnic backgrounds, languages spoken, primary medical and mental health conditions, socioeconomic needs, and any additional information that describes the target population's special needs/conditions. (More detail about the proposed target population is requested in Section D).</p> <p>a. Age groups: 18+</p> <p>b. Cultural/ethnic backgrounds: Primarily Chinese, Vietnamese, Korean</p> <p>c. Languages spoken: English, Mandarin, Cantonese, Vietnamese, Korean</p> <p>d. Primary medical and mental health conditions: We expect that the primary medical and mental health conditions will be consistent with those of the Chinese-American population and include; COPD, heart disease, stroke, diabetes. We expect that dementia will be one of the primary diagnosis for those served in the ADHC/CBAS program. We expect that many of our participants may suffer from depression and or anxiety that has not been treated due to fear and stigma attached in going to a mental health care provider, or speaking of their feelings to their physician.</p> <p>e. Socioeconomic needs: Participants attending utilizing the CBAS benefit will be, by definition, low income and may have multiple socioeconomic needs. Some of these needs may include accessing needed health care and supports, low income housing, food stamps/food banks, lowering their utility bills, free to low-cost legal aid, IHSS hours and support etc.</p> <p>f. Additional information about special needs/conditions: We will be screening all participants for depression, as we recognize that mental health concerns are very prevalent, but seldom detected in this population. This may have tragic results, as Chinese-American women have 3x the suicide rate of white females and this rate goes up to 7x the suicide rate for Chinese-American women over the age of 75. We are unable to complete question A1G as there was no text box included, the answer to A1G is; The Chinese elderly and disabled population, although we will be open to serving all populations. We will not discriminate based on race.</p>

A.4.	<p>Indicate the approximate number of participants you plan to serve at your center (less than 60; 60-100; 100+) and whether you plan to contract with third-party payers (e.g., Regional Centers, Veterans Administration for private pay participants) and/or solely Medi-Cal Managed Care Plans (for Medi-Cal reimbursement).</p> <p>a. # Served: <input type="checkbox"/> &lt;60    <input type="checkbox"/> 60-100    <input checked="" type="checkbox"/> 100+</p> <p>b. Payers (specify): Medi-Cal managed care plans, private pay, Veteran's Administration primarily</p>
A.5.	<p>Briefly describe how you plan to build your center's census with the target population you plan to serve. For example, what community organizations and individuals do you plan to partner with to generate referrals?</p> <p>Ms. Giang and Ms. Wang plan to build relationships with the churches and places of worship in the community that serve the Chinese population. They will visit physician's offices in the area who serve the geriatric Chinese population to provide education. They will do the same with skilled nursing facilities and discuss how their center can support any Chinese elderly resident discharged from the SNF make the transition back into the community. They will attend senior fairs and expos, and begin to build relationships with the managed care organizations to educate them to the support and help that they can provide to their members. Depending on the community need, they may open their center to provide community education programs in health related topics specially targeted to the elderly, their caregivers and loved ones.</p>
A.6.	<p>Indicate the geographic location where you plan to develop and operate your ADHC/CBAS center (e.g., county, city, specific community.)</p> <p>San Leandro/Castro Valley Area</p>

A.7.	<p>Briefly explain the need for a CBAS center in the proposed geographic location for the proposed target population to be served. Provide supporting data, which could include data that identify problems with access to CBAS services, high rates of hospital admissions/readmissions, nursing home admissions, etc. List other adult day health care centers in the area and include utilization rates to explain the need for a new CBAS center in the proposed location.</p> <p>There are no CBAS centers in the city of San Leandro or Castro Valley. There are only four centers in all of Alameda county. The closest center to San Leandro and Castro Valley is the Alzheimer's Services of the East Bay- Hayward, which is 7.2 miles from San Leandro and 2.5 from Castro Valley. This center has an 83% utilization rate, and a center capacity of ONLY 20 participants. The next closest centers are the Hong Fook Centers in Oakland. Hong Fook Harrison St. has a utilization rate of 99.85% Hong Fook has a first shift utilization rate of 85.30% and Hong Fook has a second shift with a utilization rate of 57.70% These centers are 9.3 miles from San Leandro and 14 miles from Castro Valley. The city of San Leandro has a population of 11, 683 over the age of 65. Using the Weiler model, which predicts that 1.5% of the people over the age of 55 are likely to choose adult day services, this gives us 248 potential participants just from the city of San Leandro. The city of Castro Valley is adjacent to San Leandro, and has a population of 3,357 persons over the age of 65, which gives us a Weiler score of 50 persons likely to choose adult day services. If we also include the city of Hayward, which is adjacent to Castro Valley, and only 7.2 miles from San Leandro, there are 14,642 persons over the age of 65, giving us a Weiler score of 220 persons likely to choose Adult Day Services. Almost 30% of these areas are Asian population, and there are no centers in San Leandro or Castro Valley, and only one very small center in Hayward to serve the aging population. Because of this, we believe that there is a great need for and ADHC/CBAS/ADP center in this area.</p>
A.8.	<p>Indicate if you have already identified a facility for your center. If so, please provide details such as specific location, size, whether your organization will own or lease, anticipated licensed capacity, and need for renovations to meet licensing requirements and program needs.</p> <p>We are currently looking for an appropriate site for our center. We plan to lease a facility that is approximately 6,000-10,000 square feet. We will renovate the center as needed to ensure that the center meets all licensing, city and state regulations. Some of the renovations we anticipate include adding more toilets, including at least one unisex individual restroom. We will make sure that there is a large enough space so that all participants can eat a meal together or be involved in a large group activity. We may need to create office space for the nursing and social work departments, treatment areas for PT and OT, a quiet space for private interviews and/or private treatment space, and a quiet room for resting and/or isolation. All participant services will occur on the first floor. Assuming we find a building that is 6,000-10,000 square feet, we will be requesting a capacity of approximately 130-175 participants (depending on the size of the building). This assumes a ratio of 1:15 toilets and square footage of over 40 square feet per participant.</p>
A.9.	<p>Share any additional information not requested that you think is relevant to your organization's plans for developing and operating an ADHC/CBAS center.</p> <p>N/A</p>

Item	Program Plan Components
<b>B</b>	<b>Facility</b>
B.1.	<p>Identify the anticipated hours that the center will be open (Hours of Operation) and providing services (Hours of Service).</p> <p>For example, the center may be open from 8am to 5pm but provide services to participants from 9am to 3pm. Please note: The center is required to provide a minimum of four hours of service to each Medi-Cal participant for payment purposes. Extended hours may be offered to meet participant and/or caregiver needs.</p> <p>The center's hours of operation will be 8:00 am to 3:00 pm, Monday through Friday. Our program hours of services will be 8:00 am to 2:00 pm, Monday through Friday.</p>
B.2.	<p>Briefly describe how your center will meet the "facility" standards for ADHC licensure and CBAS programming, including creating and ensuring a safe and therapeutic environment/milieu for your center's participants.</p> <p>Our center will have toilets in the ratio of 1 toilet per 15 participants and will have at least 40 square feet per participant. The center will have a combination of artificial and natural light, all rugs and floor coverings will be secured to the floor to eliminate tripping hazards. Furniture in the center shall be clean, safe and in good repair. The center shall have at least one chair for each participant served per day and adequate table space for all participants. The space will conform to all local and state building requirements and be maintained in conformity with the regulations adopted by the State Fire Marshal. The center will have an outdoor area so participants can enjoy and benefit from being outside. Shade will be provided by umbrellas and/or a canopy, which will also keep participants protected from the rain. There will be storage space to meet the needs of the participants and the operations of the center. We will have a food preparation area, and office space for administrative work, and a reception area.</p>
B.3.	<p>Briefly describe the facility design and space needs that will be required for the specialized populations to be served.</p> <p>We will provide a home-like environment for the participants. We will have lots of plants to cheer up the participants. We will provide an outdoor space that is beautiful and calming for our participants. The furniture will be lovely and sturdy. We will avoid any feeling of an institution, so participants will not be reminded of their medical conditions. All rooms will be labeled with the name of the room in Chinese and English, as well as a picture of what the room is used for those who are unable to read or comprehend.</p>

Item	Program Plan Components
C	Center Administration

C.1. Indicate if you have identified the center's administrator, program director and medical director/staff physician and provide information about their qualifications and a description of their responsibilities. If you have not identified these staff, describe the qualifications and skills you will be recruiting for and a description of their responsibilities.

**Administrator:**

**Qualifications (education, experience, personal characteristics):** Ms. Hanh Giang will serve as the center's administrator. Ms. Giang has a Bachelor's degree in Sociology from UC Berkely. She has over four years' experience in ADHC, and served as an intern at the Barbara Lee Senior Center as an Administrative Coordinator. She has held progressively more responsible positions at the ADHC center (she is currently the center's Program Director), that includes more than three years successful experience in supervising employees, managing and being responsible for her department(s). Ms. Giang has knowledge of supervision and care appropriate to the participants being served; ability and experience in conforming to applicable laws, regulations and policies and procedures; experience in directing the work of others; effective leadership and communication skills; and is of a good character and personal integrity.

**Responsibilities:** The administrator will administer the center in accordance with all applicable laws, regulations, policy, procedures and budget, he or she will report to the licensee concerning the operation of the center and interpreting recognized standards of care and supervision to the licensee, he or she will develop an administrative plan and procedures to ensure clearly defined lines of responsibility, equitable workloads and adequate supervision, he or she will be involved in recruiting, employing and training qualified employees and terminating the employment of employees who perform in an unsatisfactory manner. He or she will implement and monitor appropriate center policies, Implementing and monitoring appropriate center policies, procedures, programs and budgets. He or she will maintain billing and accounting systems utilizing accepted principles and practices. He or she will develop and conduct marketing and public relations activities, he or she will coordinate with all applicable government and regulatory agencies and establish collaborative relationships with other health and social service providers and related agencies in the City, County and State. The administrator shall serve as the center's HIPAA compliance Privacy Officer.

**Anticipated # of days per week and hours per day onsite at the center (include if the administrator will be full-time during hours of service or part-time):** Our administrator will be part-time and will be at the center at least 1x/week for 4-8 hours.

**Program Director:**

**Qualifications (education, experience, personal characteristics):** The program director shall have one of the following backgrounds; Bachelor's degree and a minimum of two years' experience in a management, supervisory or administrative position; a person with a master's degree and a minimum of one year of experience in a management, supervisory or administrative position or a registered nurse with a minimum of two years' experience in a management supervisory or administrative position. The Program director shall have appropriate skills, knowledge and abilities related to the health and mental, cognitive and social needs of the participant group being served by the ADHC/CBAS program. The program director shall be knowledgeable of the laws, regulations, CBAS certification standards, standards of participation and policies and procedures within a licensed health facility. We have not yet identified a person for this position, but we will be looking for someone with the above qualifications.

**Responsibilities:** The program director shall develop the program in accordance with the needs of the participants served. Implement and coordinate the elements of the program assigned by the administrator. Continuously evaluate the participant's changing needs and make necessary recommendations for program adjustments. Supervise employees, contract staff, and volunteers. Provide for in-service education. Serve as a member of the Utilization Review Committee. Oversee and approve final copy of Individual Plans of Care prior to

being sent to the Medi-Cal Managed Care Organizations. Serve as chair of MDT meetings. Serve as the center's non-discrimination compliance officer.

If Program Director is absent, how will the position be covered? When the program director is absent, another adult on the staff will be assigned to be the acting program director. This person shall be the center's Administrator.

**Medical Director/Staff Physician**

**Qualifications (education, experience, personal characteristics):** The staff physician will be a medical doctor, currently licensed by the Medical Board of California. He or she will have appropriate skills, knowledge and abilities related to the health and mental, cognitive and social needs of the participants we will be serving.

**Responsibilities:** Consultation to center staff and participant's personal physicians when needed. The staff physician may provide the initial health assessment, reviewing and authoring the participant's initial individual plan of care and each revision of the plan of care, emergency care or provision for emergency care as needed, periodic physical examination as part of the assessment process as needed, minor incidental or occasional treatment, the development of the medical component of the participant's plan of care, except when this component is developed by the participant's physician who retains primary responsibility for all medical care provided to the participant; and signing the authorization request and IPC if needed and documentation of services as provided.

**Anticipated # of days per week and hours per day onsite at the center:** We anticipate that our physician will be at the center between 4-10 hours per month.



Item	Program Plan Components
C.2.	<p>Provide a <u>Staff In-Service Orientation Training Plan</u> for orienting all staff within the first six months of employment on ADHC/CBAS licensing and certification requirements, center policies and procedures, and their roles and responsibilities. Please use the table below.</p> <p style="text-align: center;"><b>Staff Orientation Training Plan</b></p> <p><b>MonthTopics</b></p> <p>1 Familiarization with center’s history, philosophy and organizational structure, Health, safety, disaster and emergency plans, HIPAA &amp; Confidentiality, Use of Restraints, Elopement policy, In-depth review of job description, Elder abuse, Standard Precautions &amp; Blood Borne Pathogens, grievance procedure, Civil rights of participants, housekeeping and sanitation principals. The center will ensure that all staff are either certified in first-aid and CPR or that staff receive first-aid/CPR training within the first six-months of employment.</p> <p>2 Care-giver role strain</p> <p>3 Emotional burnout, supporting and protecting yourself</p> <p>4 Dementia and mood</p> <p>5 Communication with those with dementia</p> <p>6 Use of restraints</p>
C.3.	<p>Provide a six-month <u>Staff In-Service Training Plan</u> that addresses the ongoing training needs of staff to develop competencies in delivering services in the CBAS setting and meeting the medical, personal care, social, activity and other needs of the population served.</p> <p style="text-align: center;"><b>Staff In-Service Training Plan</b></p> <p><b>MonthTopic Staff to Attend (e.g., all, nursing, social services, etc.)</b></p> <p>1 Person-Centered Care All  Enter text Enter text  Enter text Enter text</p> <p>2 Recognizing pain in those who are non-verbal All  Enter text Enter text  Enter text Enter text</p> <p>3 Professional Communication All  Enter text Enter text  Enter text Enter text</p> <p>4 Cognitive Optimization®All  Enter text Enter text  Enter text Enter text</p> <p>5 Person-Centered Care Communication All  Enter text Enter text  Enter text Enter text</p> <p>6 Advance Directives All  Enter text Enter text  Enter text Enter text</p>

Item	Program Plan Components
C.4.	<p>Briefly describe how the center will protect the confidentiality, security and unauthorized disclosure of protected health information (PHI) at the center and in transmission to other outside agencies.</p> <p>Cozy Nest, LLC will have extensive HIPAA policies and procedures in place and will provide ongoing training and supervision to staff in both maintaining PHI within the center, ePHI for PHI transmissions and participant confidentiality. The center shall perform risk analysis, as required by the Administrative Safeguard provisions in the Security rule. For our transmission systems (fax and e-transmissions) to determine the level of security needed to ensure PHI is protected, per the Health Information Privacy requirements. Names and other Protected Health Information (PHI) collected by our center are confidential and will be protected from unauthorized disclosure (Section 10850, California Welfare and Institution's Code.) Release of any information pertaining to adult day health care participants shall be made in accordance with provisions of section 51009, Title 22, California Administrative Code). All information, records, data and data elements collected and maintained for the operation of the center and pertaining to participants shall be protected from unauthorized disclosure in accordance with all laws and regulations. Above and beyond the HIPAA requirements, keeping the personal and medical information of our participants' security is very important and will be taken seriously at all times.</p>
C.5.	<p>Briefly describe how participants will be transported to and from the center, e.g., center-owned van(s), paratransit, family, other?</p> <p>The center will provide transportation primarily through the use of center provided vans.</p>

Item	Program Plan Components
<b>D</b>	<b>Target Population</b>
D.1.	<p>Identify the characteristics of the participants the center plans to serve:</p> <p>a. <u>Ethnicity</u> (check all that applies):</p> <p><input type="checkbox"/> American-Indian   <input checked="" type="checkbox"/> Asian   <input type="checkbox"/> Black   <input type="checkbox"/> Latino   <input type="checkbox"/> Caucasian</p> <p><input type="checkbox"/> Diverse Mix   <input checked="" type="checkbox"/> Other (describe): Chinese</p> <p>b. <u>Language</u> (check all that apply):</p> <p><input type="checkbox"/> Arabic   <input type="checkbox"/> Armenian   <input checked="" type="checkbox"/> Chinese   <input type="checkbox"/> Hmong   <input type="checkbox"/> Farsi</p> <p><input type="checkbox"/> Tagalog   <input type="checkbox"/> Japanese   <input type="checkbox"/> Korean   <input type="checkbox"/> Russian   <input type="checkbox"/> Spanish</p> <p><input type="checkbox"/> Vietnamese   <input type="checkbox"/> Khmer   Other: Mandarin &amp; Cantonese</p> <p>c. <u>Specialized Populations</u> (check all that apply):</p> <p><input checked="" type="checkbox"/> Frail/Elderly   <input type="checkbox"/> Intellectually /Developmentally Disabled (ID/DD)</p> <p><input checked="" type="checkbox"/> Alzheimer's/Dementia   <input type="checkbox"/> Behavioral Health</p> <p><input type="checkbox"/> Traumatic Brain Injury (TBI)   <input type="checkbox"/> Other (describe): Enter text</p>
D.2.	<p>Provide a general description of the anticipated medical, mental health, social, personal care, activity and problems/conditions/needs of your center's target population(s).</p> <p>a. <b>Medical:</b> COPD, heart disease, stroke, diabetes, dementias</p> <p>b. <b>Mental Health:</b> Primarily depression and anxiety</p> <p>c. <b>Social (include family/caregiver issues):</b> Caregiver role-strain, cultural integration, housing concerns, financial concerns.</p> <p>d. <b>Personal Care:</b> Supervision and assistance with ambulating, involvement in center activities, supervision and assistance in using the restroom, grooming and hygiene.</p> <p>e. <b>Activities:</b> Socialization, support and assistance in center activities, communication support, exercise.</p> <p>f. <b>Other:</b> Physical and occupational support/exercise to maintain physical strength and endurance, and to support cognitive function and mood.</p>

<b>Item</b>	<b>Program Plan Components</b>
<b>E</b>	<b>Center Services</b>

E.1. Program Elements

Under each required service area briefly describe the specific programs and services that will address the medical, social and other needs of the participants the center proposes to serve and how they will support the principles of person-centered care. These services should address the conditions/problems/needs, preferences, and personal goals of your proposed center's target population(s). For example, specify any evidence-based practices, interventions, services, and programs for specialized populations that the center will offer. See the CBAS Resource Guide for information about evidence-based practices.

- a. **Nursing Services:** The center's nurse will provide initial assessments, reassessments and ongoing evaluation of the participants' specific nursing needs. The nurse will also work collaboratively with the participant, eliciting his or her goals, needs and preferences, collaboratively developing the participant's plan of care. The services provided by the nursing department will include observation, evaluation of symptoms, education and encouragement to support them to become a partner in their healthcare, and provide the care and treatment needed. For example, vital signs, blood glucose monitoring, wound care, medication management support etc., providing health education and counseling to the participant and family when indicated by IPC and as needed, providing assistance in obtaining medical services from providers as needed who are accessible to the participant/family in terms of language and transportation proximity. Communicating with participant's MD as needed and required, providing updates, notification and follow-up information including any significant change in the participant's condition. Supervision of personal care given by program aides. Maintenance of participant's health record (including: quarterly progress notes, records of medications and treatments administered, quarterly narrative nursing note) and emergency care (including arrangements for transportation).
- b. **Personal Care:** Program aides will provide self-care training and services oriented toward activities of daily living and personal hygiene, such as toileting, bathing and grooming, incontinency and the probable benefit from continence retraining. Program aides will assist the participants with toileting, hygiene, eating, dressing, grooming or any ADLs if and when needed. Staff will ensure that the participants are provided with the least support needed to complete self-care, in order to provide the participants with a sense of mastery, self-competence and worth.
- c. **Social Services (Individual and Group):** The center will provide social services to the participants utilizing knowledge, either through bi-cultural experience or education to ensure that the participants' goals to experience quality of life are identified and met. The social work staff will provide counseling to help with personal, family and adjustment problems that interfere with the achievement of meeting participant/family goals. The social work staff will develop and lead caregiving support groups and provide referrals and emotional support to caregivers who are experiencing caregiver role strain. Social workers may educate, facilitate and assist the participant and their family prepare advance directives. Will counsel to alleviate or lessen family conflicts if needed. The social work staff may work with the participants in a group setting depending on the needs of the participants this may include a women or men's group, coping group, etc. The social work staff will screen referrals to ensure appropriateness of the prospective participant for admission and full assessment. The social work staff will meet with the participant and representative (if needed) initially, to describe the person-planning process, support and collaborate with the participant to identify his or her global goals or needs and to determine those supports the participant would like to have involved in his or her care planning process, if any. The social work staff will provide referrals to appropriate community resources to support participant to continue to remain living in the community for as long as possible and to help support participant's goals.
- d. **Activities:** The activity department will provide activities targeted to meet the cognitive, spiritual, physical and emotional needs of the center's participants. Activities will be tailored to meet the abilities and interests of the participants. These activities will focus on the participant's sense of purpose, cognitive, emotional and physical health. Activities will be offered in the languages of the participants attending the center to ensure that

all participants feel included. The activity program will assess the participants initially, every six-months and quarterly to determine their needs and desires for activity programs. The Activity program will provide modifications to activities as needed as well to ensure that all participants have the same access to all activities. Modifications may include alterations to activities, offering program aide support, providing oversized printed materials or materials that are tactile and modifications to the activity tools, such as larger writing utensils etc. as needed. The activity department will oversee the community integration/outing/field trip activities. These will vary and meet the social, emotional and integrative needs of our participants.

e. **Occupational Therapy:** OT services shall provide equipment a supplies for creative skills, cognitive enhancements and stimulation, as well as exercises and activities to support fine motor control and shoulder, arm hand and finger strength and coordination for participants who will benefit from these services.

f. **Physical Therapy:** The physical therapy department shall provide muscle, nerve, joint and functional ability services to relieve pain, develop or restore function, provide assistance to achieve and maintain maximum performance using physical means such as exercise, massage, heat, sound, water, light or electricity. Physical therapy will utilize at a minimum the following equipment; overhead pulley, weights, training stairs, etc.

g. **Speech Therapy:** Speech therapy shall provide services aimed at improving a participant's speech, comprehension and/or assessment for swallowing concerns or disorders that may lead or contribute to choking disorders.

h. **Nutrition:** The center will provide a diet that meets the National Research Council's recommended Dietary Allowance as outlined below (Section "j: Meals"). Therapeutic diets as prescribed by participant's physician (orders to be reviewed every 90 days) will be offered to the participants. The meals and menus will also meet the participant's cultural and religious needs, desires and preferences. We plan to have menu choices that will appeal to our participant's cultural backgrounds.

i. **Mental Health:** Mental health services will support those participants who may be experiencing emotional concerns, such as depression and anxiety, and also the needs/preferences and desired outcomes of those suffering from more severe mental health concerns, such as schizophrenia and bipolar conditions. The MH provider may provide support to the participant who is dealing with acculturation and/or family issues, grief and multiple losses, anxiety and fear through case consultation to the social work and nursing staff, direct counseling with the participants and the provision of group work. The MH provider will also provide three hours of consultation to staff per month. This consultation may include case consultation, general mental health consultation and in-service training programs to staff.

j. **Meals:** A participant who is in the center for four hours or more shall be served a meal that will supply at least one-third of the National Research Councils' recommended Dietary Allowances. A participant who is in the center for eight hours shall be served a meal and between meal nourishments that will supply at least one-half of the National Research Council's Recommended Dietary Allowances.

k. **Transportation:** We will be purchasing or leasing vans, at least one will be ADA accessible to support participants' transportation needs.

Item	Program Plan Components														
E.2.	<p data-bbox="196 268 1071 304"><u>Strategies and Interventions to Address Behavioral Symptoms</u></p> <p data-bbox="196 342 1539 527">Briefly describe the therapeutic interventions/strategies/programs that may be used in working with center participants who exhibit behaviors that negatively impact their ability to participate in the center's activities/programs and/or that may pose harm to self or others. These behaviors may be due to the participant having a dementia, a mental illness, intellectual/developmental disability, traumatic brain injury or other condition.</p> <p data-bbox="196 564 1520 667"><i>For example, Applied Behavior Analysis (ABA), previously known as behavior modification, systematically utilizes interventions based on the principles of learning theory to change certain behaviors. This technique and others may be useful in addressing certain behaviors.</i></p> <p data-bbox="196 705 737 741">Provide information in the table below.</p> <table border="1" data-bbox="196 772 1542 1339"> <thead> <tr> <th data-bbox="430 772 747 808">Behavioral Symptom</th> <th data-bbox="808 772 1312 808">Types of Interventions/Strategies</th> </tr> </thead> <tbody> <tr> <td data-bbox="196 808 552 951">Aggression/Anxiety/Agitation</td> <td data-bbox="576 808 1542 951">Listen to the participant's complaints, remain calm, remove the participant from the object of aggression/anxiety/agitation, check to see if the participant is in any pain, identify the triggers of the behavioral communication, consult with the participant's family to determine if they have any thoughts or suggestions to help the participant be more comfortable in the center.</td> </tr> <tr> <td data-bbox="196 951 552 1199">Exploring, walking, engaging in movement that may appear to be random (previously referred to as wandering).</td> <td data-bbox="576 951 1542 1199">Provide a safe environment in which the participant can explore in the center. Determine if the participant tends to explore when he or she is feeling an unpleasant emotion, such as pain, anxiety, frustration and fear, which triggers the exploring behavior. Allow the participant to explore safely at his or her leisure. The center will contact the participant's family and/or caregiver to determine if the participant is engaging in this type of behavioral communication at home, what seems to work at home and if the center staff can assist the family/caregiver in addressing any walking/ exploring issues that occur in the home.</td> </tr> <tr> <td data-bbox="196 1199 332 1234">Enter text</td> <td data-bbox="386 1199 519 1234">Enter text</td> </tr> <tr> <td data-bbox="196 1234 332 1270">Enter text</td> <td data-bbox="386 1234 519 1270">Enter text</td> </tr> <tr> <td data-bbox="196 1270 332 1306">Enter text</td> <td data-bbox="386 1270 519 1306">Enter text</td> </tr> <tr> <td data-bbox="196 1306 332 1339">Enter text</td> <td data-bbox="386 1306 519 1339">Enter text</td> </tr> </tbody> </table>	Behavioral Symptom	Types of Interventions/Strategies	Aggression/Anxiety/Agitation	Listen to the participant's complaints, remain calm, remove the participant from the object of aggression/anxiety/agitation, check to see if the participant is in any pain, identify the triggers of the behavioral communication, consult with the participant's family to determine if they have any thoughts or suggestions to help the participant be more comfortable in the center.	Exploring, walking, engaging in movement that may appear to be random (previously referred to as wandering).	Provide a safe environment in which the participant can explore in the center. Determine if the participant tends to explore when he or she is feeling an unpleasant emotion, such as pain, anxiety, frustration and fear, which triggers the exploring behavior. Allow the participant to explore safely at his or her leisure. The center will contact the participant's family and/or caregiver to determine if the participant is engaging in this type of behavioral communication at home, what seems to work at home and if the center staff can assist the family/caregiver in addressing any walking/ exploring issues that occur in the home.	Enter text	Enter text	Enter text	Enter text	Enter text	Enter text	Enter text	Enter text
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<b>Item</b>	<b>Program Plan Components</b>
<b>F</b>	<b>Center Staff</b>



F.1. Briefly describe the responsibilities of the specialized professional and that will provide the center's services described in E.1 above. The staffing structure and responsibilities must demonstrate that the center is organized and staffed to carry out the requirements of the program and to meet the needs and preferences, including cultural/language preferences, of the participants.

**Position Responsibilities**

**Registered Nurse:** The RN's responsibilities will include: Assessing each participant initially and providing subsequent reassessments to determine needs for nursing, personal care and assistance in activities of daily living such as bathing, grooming, toileting and eating. These needs shall be included in the plan of care. The RN shall supervise the provision of these services. The RN shall develop the plan of care in collaboration with the participant's identified goals and/or concerns. The RN's Responsibilities include: attending and participating in all the multidisciplinary team (MDT) meetings, administering medications to participants and monitoring these medications, or providing training and monitoring any participants who are administering their own medications, providing all nursing care specified in the participant plans of care, providing observation and monitoring of the participants' health status, providing health education and counseling to the participants and their families, when indicated in their plans of care. Supervising the personal care services provided to the participants by the program aides. Supervising any maintenance program(s) designated to be under the supervision of the RN. Completing the quarterly and six-month assessments/reassessments, which includes evaluating and reviewing the progress made towards the participant's identified goal(s) collaboratively with participant, and updating the plan of care as needed or desired by the participant and the collaborative process. Assisting participants in obtaining medical services from providers other than the adult day health center staff. Acting as a liaison to the participants' personal physicians and notifying them of any marked changes in the participants' conditions. Providing emergency care, including arrangements for transportation when necessary. The RN may serve as a member of the Utilization Review Committee. Providing dietary counseling and nutrition education to participants who are not on a therapeutic/special diet. Maintaining the nursing component of the participant health records, which includes: Documentation of all nursing care provided, including the participant's reaction to treatment, on the day the service(s) is (are) given. Maintenance and supervision of all drug supplies and medications stored at the center and recording all these medications. The RN will report to the Program Director.

**Licensed Vocational Nurse:** The LVN will provide nursing teaching and disease management and administration of medication as well as treatment provided to participants under supervision of RN. The LVN will act as a liaison between the center and the participant's primary care physician, will assist with obtaining current or updated health related documentations, such as the H&P and medication list from the pharmacy or MD office. The LVN will assist in monitoring and taking vital signs when participants attend the center and assist the RN when participants are not feeling well.

**Social Worker:** The Social Worker in our center shall interview and screen all referrals to determine the general appropriateness of the prospective participant for the full assessment process and ADHC participation. Develop the plan of care in collaboration with the participant's identified goals/concerns. Complete the quarterly and six-month assessments/reassessments which includes evaluating and reviewing the progress made towards the participant's identified goal(s) collaboratively with participant and updating the plan of care as needed or desired by the participant and the collaborative process. Act as a liaison with the participant's family and home, with other community resources. Provide an assessment of each participant's home environment. Provide a treatment program which may include counseling and group discussion to address identified concerns and to help participant to reach his or her goals. Provide referrals to available community resources. The social worker will report to the program director

**Social Work Assistant:** The SWA shall perform assignments as trained and directed by social worker. Provide treatment to participants under the guidance of the Social Worker, and the collaboratively developed Social Work care plan. Lead participants in problem oriented discussion groups and task-oriented committees. Document all social services provided by the assistant social worker (under the supervision of the Social Worker). Perform other duties as required by the administrator, program director or Social Worker. Social Work Assistant reports to the social worker.

**Activity Coordinator:** The Activity coordinator is responsible to develop the plan of care in collaboration with the participant's identified goals and/or concerns. Completing quarterly and six-month assessments/reassessments



<b>G</b>	<b>Additional Information</b>
	<p>Provide any additional information not requested that you think is relevant to your organization's plans for developing and operating an ADHC/CBAS center and that demonstrates your organization's understanding of program requirements and the current long-term services and supports (LTSS) environment.</p> <p>Enter text</p>
	<b>This completes your program plan</b>
	<p>Submit your completed CBAS Program Plan along with all of your CBAS Pre-Screening forms (Pre-Screening Package) to CDA at <a href="mailto:cbascda@aging.ca.gov">cbascda@aging.ca.gov</a>.</p> <p>If questions, please contact the CBAS Branch: (916) 419-7545.</p>

# ABBREVIATIONS

ABC	AGGREGATE BASE COURSE	MAS.	MASONRY
A.B.	ANCHOR BOLT	MECH.	MECHANICAL
A/C	AIR CONDITIONING	MED.	MEDIUM
A.C.	ASPHALTIC CONCRETE	MET.	METAL
ACC	ACCESSIBLE	MFG.	MANUFACTURER
ACT	ACOUSTIC CEILING TILE	MFR.	MANUFACTURER
ADA	AMERICANS WITH DISABILITIES	M.H.	MANHOLE
ACT		MIN.	MINIMUM
A.F.F.	ABOVE FINISHED FLOOR	MISC.	MISCELLANEOUS
A.H.	AIR HANDLER	M.O.	MASONRY OPENING
ALT.	ALTERNATE	MOD.	MODULAR
ALUM.	ALUMINUM	M.R.	MOISTURE-RESISTANT
ANOD.	ANODIZED	MTL.	METAL
ARCH.	ARCHITECTURAL	N	NORTH
BD.	BOARD	N/A	NOT APPLICABLE
BIM	BUILDING INFORMATION MODEL (ING)	NAT.	NATURAL
BLK.	BLOCKING	N.I.C.	NOT IN CONTRACT
BLDG.	BUILDING	NOM.	NOMINAL
BLKG.	BLOCKING	NO.	NUMBER
BM.	BEAM	OC	ON CENTER
BOH	BACK OF HOUSE	O.D.	OUTSIDE DIAMETER
BOT.	BOTTOM	OH.	OVERHEAD
BRG.	BEARING	OPG.	OPENING
BRZ.	BRONZE	OPP.	OPPOSITE
B.U.	BUT-UP	O.R.D	OVERFLOW ROOF DRAIN
CAB.	CABINET	OSCI	OWNER-SUPPLIED
CAT 5	CATEGORY 5 CABLE	PTAC	PRECAST/INSTALLED
C.F.	CUBIC FOOT PER MINUTE	PTAC	PACKAGE TERMINAL
CFM	CUBIC FEET PER MINUTE	PAR.	PARALLEL
C.I.P.	CAST IRON	PBD.	PARTICLE BOARD
C.I.P.	CAST-IN PLACE	PC	PRE-CAST
CIR.	CIRCLE	PCF	POUNDS PER CUBIC FOOT
CIRC.	CIRCUMFERENCE	PL	PLATE
CLG.	CEILING	PL	PROPERTY LINE
C.J.	CONCRETE JOINT	PLBG.	PLUMBING
CLF.	CLEARANCE	PLF	POUNDS PER LINEAL FOOT
CMU	CONCRETE MASONRY UNIT	PLYWD.	PLYWOOD
C.O.	CLEAN OUT	PR	PAIR
COL.	COLUMN	PRFAB	PREFABRICATED
COND.	CONDENSER (CONDENSATE)	PRV	PRESSURE-REDUCING VALVE
CONT.	CONTINUOUS	PSF	POUNDS PER SQUARE FOOT
CONST.	CONSTRUCTION	PSI	POUNDS PER SQUARE INCH
CONTR.	CONTRACTOR	PT	POINT (PRESSURE-TREATED)
CORR.	CORRUGATED	PTD	PAINTED
CTR.	CENTER	P.T.D.	PAPER TOWEL DISPENSER
C.W.	COLD WATER	P.T.R.	PAPER TOWEL RECEPTACLE
C.Y.	CUBIC YARD	P.V.M.T.	PAVEMENT
DET.	DETAIL	PVC	POLYVINYL CHLORIDE
DIA	DIAMETER	R	RADIUS
DIFF.	DIFFUSER	RA	RETURN AIR
DIM.	DIMENSION	RAD.	RADIUS
D.L.	DEAD LOAD	RAG	RETURN AIR GRILLE
DN.	DOWN	R.B.	RUBBER BASE
DPR.	DRAIN	R.D.	ROOF DRAIN
D.S.	DOWNSPOUT	REF.	REFERENCE
DWG.	DRAWING	REG.	REGISTERED
E	EAST	REINF.	REINFORCING (REINFORCED)
EA.	EACH	REQD.	REQUIRED
EDF.	ELECTRIC DRINKING FOUNTAIN	REV.	REVISED (REVISION)
EIFS	EXTERIOR INSULATION & FINISH SYSTEM	RFG.	ROOFING
		RM.	ROOM
		R.O.	ROUGH OPENING
		R.O.W.	RIGHT OF WAY
E.J.	EXPANSION JOINT	R.S.	ROUGH SAWN
ELEC.	ELECTRICAL	S	SELECTED BY OWNER
ELEV.	ELEVATION (ELEVATOR)	SBO	SOLID CORE
EM.	EMERGENCY	SC	STORM DRAIN
EMERG.	EMERGENCY	SEC.	SECTION
ENGR.	ENGINEER	S.F.	SQUARE FEET
ENCL.	ENCLOSURE	SHR.	SHOWER
EQ.	EQUAL	SHWR.	SHOWER
EWC	ELECTRIC WATER COOLER	SHT.	SHEET
EXH.	EXHAUST	SIM.	SIMILAR
EXP.	EXPOSURE	SPEC(S)	SPECIFICATION(S)
EXT.	EXTERIOR	SS	STAINLESS STEEL
FBD	FIBERBOARD	STAT	STAIR
F.B.O.	FURNISHED BY OTHERS	STDR.	STANDARD
FD	FLOOR DRAIN (FIRE DAMPER)	STRUC.	STRUCTURE, STRUCTURAL
FE	FIRE EXTINGUISHER	SUP.	SUPPLY
FEC	FIRE EXTINGUISHER CABINET	SUS.	SUSPENDED
FIN.	FINISH(ED)	SW.	SWITCH
FF	FINISH FLOOR ELEVATION	SYM.	SYMMETRICAL
FFE	FURNITURE, FIXTURES & EQUIPMENT	SYS.	SYSTEM
FLR.	FLOOR	T & B	TOP AND BOTTOM
FND.	FOUNDATION	T & B	TONGUE-AND-GROOVE
FOF	FACE OF FINISH	T.B.	TOP OF BEAM
FOM	FACE OF MASONRY	TBAR	TOWEL BAR
FOS	FACE OF STUDS	T.C.	TOP OF CURB
F.S	FACE OF SHEATHING	T.D.	TELECOMMUNICATIONS FOR THE DEAF
FT.	FOOT (FEET)	TEL	TELEPHONE
FTG.	FOOTING	THK	THICKNESS (THICK)
GA.	GAUGE (GAGE)	THR	THREAD
GALV.	GALVANIZED	T.L.	TOP OF LINTEL
G.B.	GYPSUM BOARD	T.O.	TOP OF
G.C.	GENERAL CONTRACTOR	T.O.P.	TOP OF PLATE
GLB	GLUE LAMINATED BEAM	T. SL.	TOP OF SLAB
GPM	GALLONS PER MINUTE	T. STL.	TOP OF STEEL
GSN	GENERAL STRUCTURAL NOTES	TTY	TELECOMMUNICATIONS FOR THE DEAF
GWB	GYPSUM WALL BOARD	H.C.	HOLLOW CORE
GYP. BD.	GYPSUM BOARD	HDR.	HEADER
H.B.	HOSE BIBB	HDW	HARDWARE
H.C.	HOLLOW CORE	HM	HOLLOW METAL
HDR.	HEADER	HOR.	HORIZONTAL
HDW	HARDWARE	HP	HORIZONTAL
HM	HOLLOW METAL	HR.	HOUR
HOR.	HORIZONTAL	HTG.	HEATING
HP	HORIZONTAL	HVAC	HEATING / VENTILATION / AIR CONDITIONING
HR.	HOUR		
HTG.	HEATING		
HVAC	HEATING / VENTILATION / AIR CONDITIONING		
HW	HOT WATER		
HWD.	HARDWOOD		
HYD.	HYDRANT		
ID	INTERIOR DESIGN(ER)		
I.D.	INSIDE DIAMETER		
IN.	INCH		
INSUL.	INSULATION		
INT.	INTERIOR		
JBOX	JUNCTION BOX		
JT.	JOINT		
KO	KNOCK OUT		
LAB.	LABORATORY		
LAM.	LAMINATED		
LAV.	LAVATORY		
LBS.	POUNDS		
LL	LEFT HAND		
LLV	LONG LEG VERTICAL		
LLH	LONG LEG HORIZONTAL		
LTL	LONG LEG VERTICAL		
LW	LIGHTWEIGHT		

# OWNERS REVIEW

THE CONSTRUCTION CONTRACT FOR THIS PROJECT IS TO BE DIRECTLY NEGOTIATED BETWEEN THE OWNER AND THE CONTRACTOR, AND THEY WILL ACT IN UNISON TO PROPERLY EXECUTE THE INTENT OF THESE AND OTHER DESIGN AND CONTRACT DOCUMENTS.

THIS SET OF DOCUMENTS (SHEETS LISTED IN DRAWING INDEX) COVERS GENERAL CONSTRUCTION ITEMS AND EXCLUDES ANY DESIGN OF SITE, MECHANICAL, ELECTRICAL, PLUMBING, SPRINKLERS, LOCAL CODES, OR FIRE PROTECTION WORK. ALSO EXCLUDES ANY EQUIPMENT ITEMS. SUCH EXCLUSIONS ARE COVERED UNDER SEPARATE WORK BY DESIGNERS AND CONSULTANTS WORKING INDEPENDENTLY FOR THE CONTRACTOR AND/OR OWNER.

BY USE OF THESE DOCUMENTS, THE OWNER AND THE CONTRACTOR CERTIFY THAT THEY HAVE REVIEWED THEM AND ARE IN AGREEMENT WITH THEIR CONTENT; FURTHERMORE, THE OWNER RECOGNIZES THAT IF ANY CHANGES ARE REQUIRED THEY WILL BE DONE IN ACCORDANCE WITH ALL APPLICABLE CODES AND UNDER THE CONTRACTOR'S OR OWNERS SUPERVISION.

THE CONTRACTOR ASSUMES RESPONSIBILITY FOR COORDINATING THE ALL WORK AND PERMITS UNDER SEPARATE PROJECTS WITH THESE DESIGN DOCUMENTS TO ASSURE CODE COMPLIANCE AND CORRECTNESS OF WORK. THE CONTRACTOR IS ALSO RESPONSIBLE FOR OBTAINING FINAL COMMENTS AND APPROVAL FROM ALL GOVERNING AGENCIES.

# CODE

2016 California Building Standards Code  
 2016 California Building Code (T24, Part 2).  
 2016 California Residential Code (T24, Part 2.5).  
 2016 California Electrical Code (T24, Part 3).  
 2016 California Mechanical Code (T24, Part 4).  
 2016 California Plumbing Code (T24, Part 5).  
 2016 California Energy Code (T24, Part 6).  
 2016 California Historical Code (T24, Part 8).  
 2016 California Fire Code (T24, Part 9).  
 2016 California Existing Building Code (T24, Part 10).  
 2016 California Green Building Code (T24, Part 11).  
 The Adoption and Amendments of California Building Standards Code.  
 2016 International Existing Building Code (IEBC)  
 2015 International Building Code (IBC)  
 2010 ADA Standards For Accessible Design

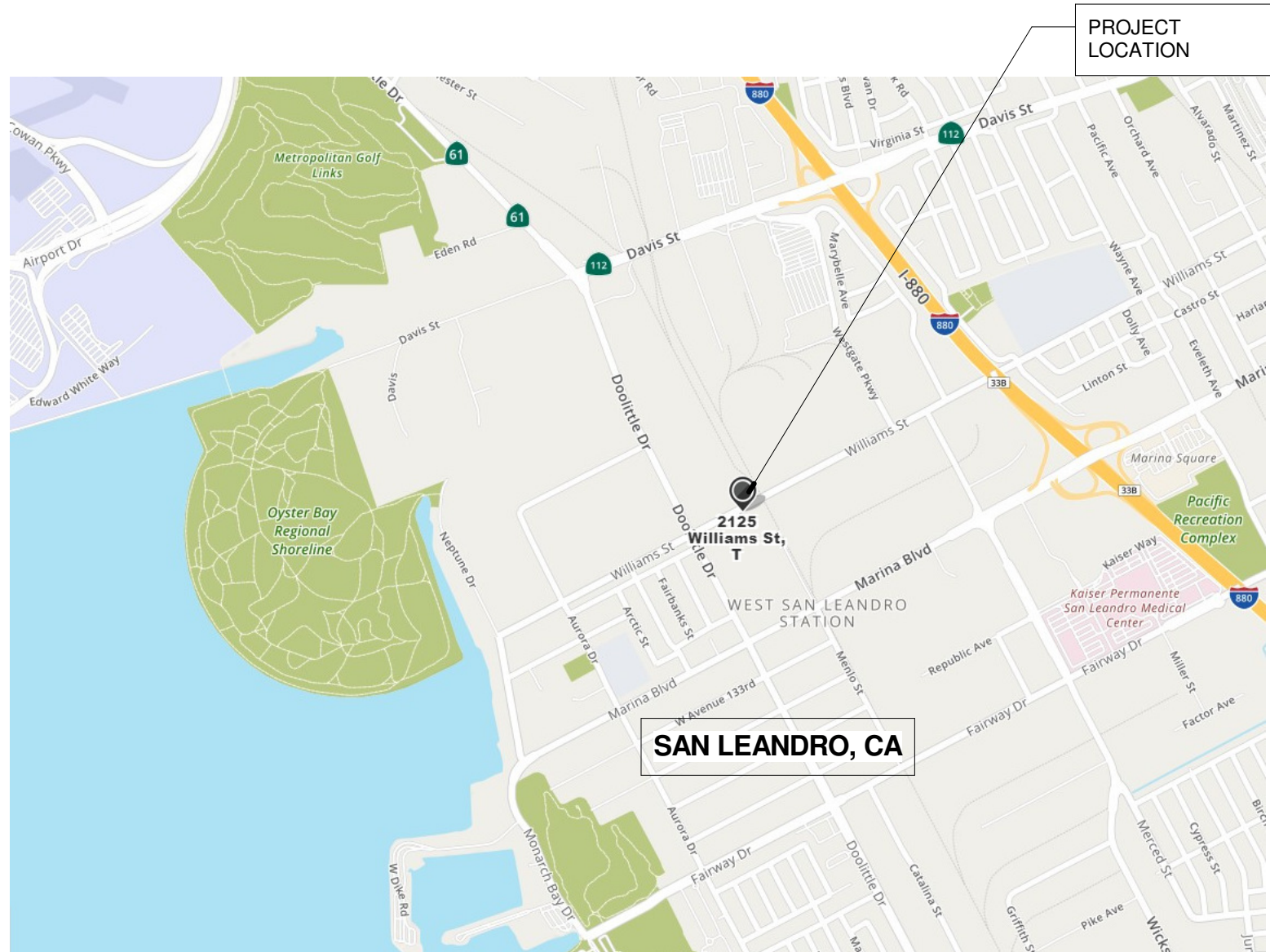
# SAN LEANDRO DIRECTORY

City of San Leandro: (www.sanleandro.org)  
 Building & Safety Services -- (510) 577-3405  
 Building Inspections Requests -- (510) 577-3426  
 Office of Business Development/Redevelopment -- (510) 577-3311  
 Planning Services -- (510) 577-3325  
 Housing Division -- (510) 577-6004  
 Engineering / Transportation -- (510) 577-3428  
 Environmental Services -- (510) 577-3401  
 A/C Fire Department -- (510) 618-3468  
 Hazardous Material Coordinator -- (510) 577-3331  
 Police Department -- (510) 577-3253  
 Refuse Services -- (510) 577-3452  
 San Leandro Unified School District -- (510) 667-3500 (www.sanleandro.k12.ca.us)  
 San Lorenzo Unified School District -- (510) 317-4600 (www.stzUSD.org)

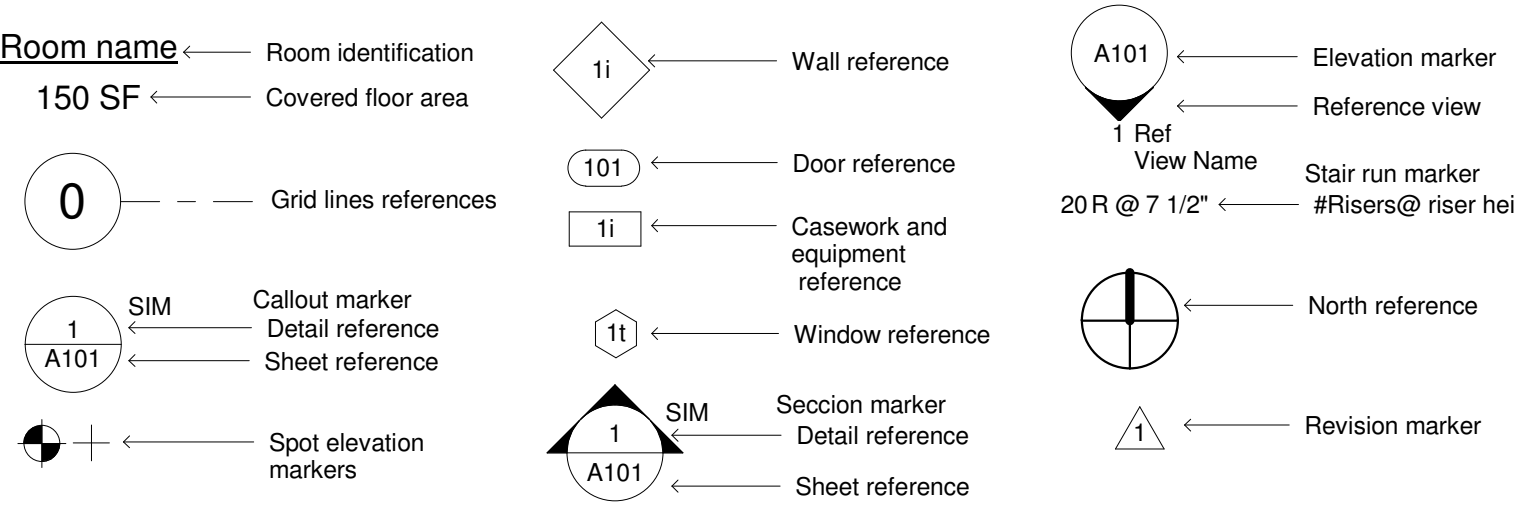
830.6 Institutional Group I-4, day care facilities. This group shall include buildings and structures occupied by more than six clients of any age who receive custodial care for fewer than 24 hours per day by persons other than parent/guardians, relatives by blood, marriage or adoption, and in a place other than the home of the clients cared for. This group shall include, but not be limited to, the following:

**Adult day care\*\***  
 Child day care

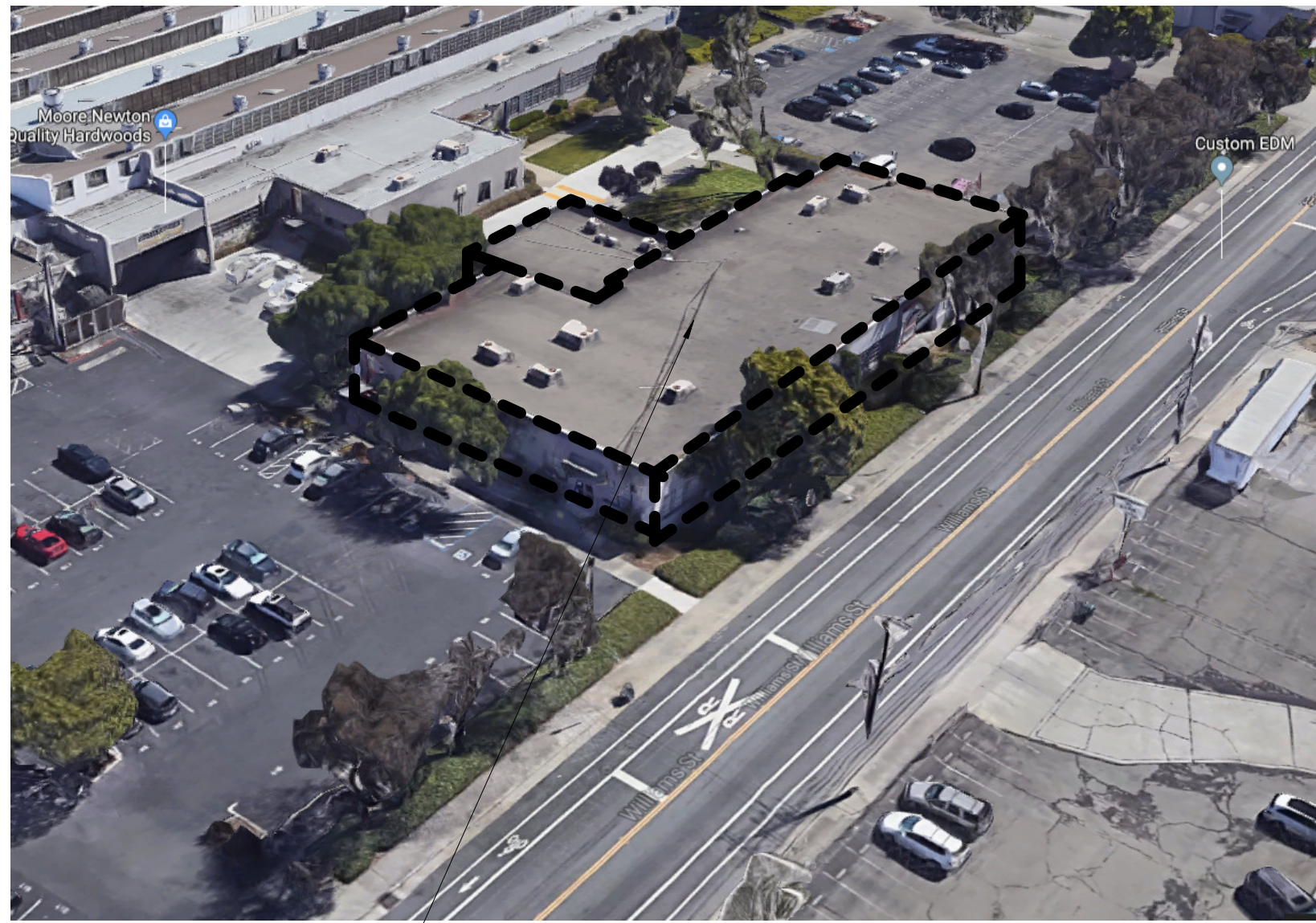
\*\*As defined by CBC: Adult care facilities that provide accommodations for six or fewer clients of any age for less than 24 hours. Licensing categories that may use this classification include adult day care programs



# LOCATION MAP



# SYMBOLGY



EXTERIOR BUILDING VIEW  
 AREA OF WORK

# SCOPE OF WORK

THE PROJECT IS TENANT IMPROVEMENTS AND CONSIST OF AN OFFICE RENOVATION OF AN EXISTING BUILDING LOCATED AT 2101 WILLIAMS STREET, SAN LEANDRO, CALIFORNIA, 94577

MINOR DEMOLITION WILL INCLUDE INTERIOR WALLS AND DOORS, FLOORING AND CEILINGS.

MINOR RENOVATION WILL INCLUDE THE CONSTRUCTION OF NEW PARTITION WALLS, INSTALLATION OF NEW INTERIOR DOORS, THE RENOVATION OF A EXISTING KITCHEN, AND THE CONSTRUCTION OF NEW ACCESSIBLE RESTROOMS

PLUMBING, MECHANICAL AND ELECTRICAL PROJECTS UNDER SEPARATE APPROVAL AND PERMIT.

THE EXISTING BUILDING ENVELOPE / SHELL IS TO REMAIN AS EXISTING.

THIS RENOVATION PROJECT WILL PROVIDE A FULLY ACCESSIBLE OFFICE SPACE TO CONFORM UNDER COMPLIANCE AND LICENCE OF LOCAL/STATE AUTHORITIES HAVING JURISDICTION

# BUILDING DATA

ADDRESS: 2101 WILLIAM ST, SAN LEANDRO, CALIFORNIA, 94577

COUNTY: SAN LEANDRO, CALIFORNIA

PROPERTY AREA: 364,324 SF APROX

APN: 0077A-0645-005-01

ZONING CLASSIFICATION: IG INDUSTRIAL GENERAL

EXISTING OCCUPANCY GROUP: B-

PROPOSED OCCUPANCY GROUP I-4 ADULT DAY CARE

NUMBER OF STORIES: (1) SINGLE STORY

EXISTING BUILDING AREA: 15,500 SF APPROX (GROSS)

TYPE OF CONSTRUCTION: TYPE V - B 1HR

PARKING: EXISTING

SPRINKLERED: DEFERRED APPROVAL

# PROJECT DIRECTORY

## OWNER

COZY NEST ADULT DAY HEALTH CARE, LLC  
 527 POMONA ST  
 SAN LORENZO, CA. 94580

## ARCHITECT

HB+A ARCHITECTS  
 2811 CASTRO VALLEY BLVD, SUITE 109,  
 CASTRO VALLEY, CA. 94546  
 510-830-4797 OFF

ENGINEERING (PLUMBING -MECHANICAL - ELECTRICAL)  
 TBD

# REVIEW SET FOR TENANT IMPROVEMENT

# ADULT DAY HEALTH CARE CENTER

2101 WILLIAM STREET,  
 SAN LEANDRO, CALIFORNIA, 94577

## SHEET LIST

SHEET NUMBER	SHEET NAME	DISCIPLINE
A000	COVER SHEET	ARCHITECTURE
A001	GENERAL NOTES	ARCHITECTURE
A010	CAL GREEN NON-RESIDENTIAL 01	ARCHITECTURE
A020	CAL GREEN NON-RESIDENTIAL 02	ARCHITECTURE
A030	CAL GREEN NON-RESIDENTIAL 03	ARCHITECTURE
A090	EXISTING SITE PLAN / PARCEL PLAN	ARCHITECTURE
A095	SITE PLAN (PROPOSED UPGRADES)	ARCHITECTURE
A100	EXISTING/DEMO PLAN	ARCHITECTURE
A300	PROPOSED PLAN	ARCHITECTURE
A310	SAFETY AND ACCESSIBILITY PLAN	ARCHITECTURE
A400	EXISTING / DEMO REFLECTED CEILING PLAN	ARCHITECTURE
A410	PROPOSED REFLECTED CEILING PLAN	ARCHITECTURE
A550	PROPOSED RESTROOMS ENLARGED PLAN AND ELEVATIONS	ARCHITECTURE
A600	FINISH AND ACCESSORY SCHEDULE	ARCHITECTURE
A700	ACCESSIBILITY DETAILS (FOR REFERENCE ONLY)	ARCHITECTURE
A710	SITE DETAILS	ARCHITECTURE
A720	STANDARD SITE DETAILS ( FOR REFERENCE ONLY)	ARCHITECTURE
A800	WALL TYPES, CEILING DETAILS, MOUNTING DETAILS	ARCHITECTURE
ENL.1	T-24 COMPLIANCE	ARCHITECTURE

## AREA OCCUPANCY CALCULATION

Level	RM	NAME	AREA	FUNCTION SPACE	OCC/LOAD FACTOR	OCC/LOAD	EXIT WIDTH
Level 1	212AA	PROGRAM MANAGER	246 SF	BUSINESS AREAS	100 GROSS	3	0.6
Level 1	212BB	LOBBY	414 SF	BUSINESS AREAS	100 GROSS	5	1.0
Level 1	212CC	ADMIN OFFICE	250 SF	BUSINESS AREAS	100 GROSS	3	0.6
Level 1	212D	KAREOKE ROOM	611 SF	ASSEMBLY W/O FIXED SEATS UNCONCENTRATED (TABLES AND CHAIRS)	15 NET	41	8.2
Level 1	212DD	OFFICE MANAGER	150 SF	BUSINESS AREAS	100 GROSS	2	0.4
Level 1	212E	OFFICE	152 SF	BUSINESS AREAS	100 GROSS	2	0.4
Level 1	212EE	MAHONG ROOM	874 SF	ASSEMBLY W/O FIXED SEATS UNCONCENTRATED (TABLES AND CHAIRS)	15 NET	59	11.8
Level 1	212F	SOCIAL WORKERS	287 SF	BUSINESS AREAS	100 GROSS	3	0.6
Level 1	212FF	KITCHEN	442 SF	KITCHENS, COMMERCIAL	200 GROSS	3	0.6
Level 1	212GG	CORRIDOR	1,124 SF	(none)			
Level 1	212H	RN ROOM	429 SF	BUSINESS AREAS	100 GROSS	5	1.0
Level 1	212I	OFFICE	333 SF	BUSINESS AREAS	100 GROSS	4	0.8
Level 1	212J	CORRIDOR	136 SF	(none)			
Level 1	212K	WOMEN RESTROOM	212 SF	(none)			
Level 1	212L	MEN RESTROOM	180 SF	(none)			
Level 1	212M	JANITOR	26 SF	ACCESSORY STORAGE AREAS, MECHANICAL EQUIPMENT ROOM	300 GROSS	1	0.2
Level 1	212N	EMPLOYEE ROOM	201 SF	ASSEMBLY W/O FIXED SEATS UNCONCENTRATED (TABLES AND CHAIRS)	15 NET	14	2.8
Level 1	212O	QUIET ROOM	121 SF	BUSINESS AREAS	100 GROSS	2	0.4
Level 1	212P	LAUNDRY	114 SF	ACCESSORY STORAGE AREAS, MECHANICAL EQUIPMENT ROOM	300 GROSS	1	0.2
Level 1	212Q	NEW MEN RESTROOM	154 SF	(none)			
Level 1	212R	NEW WOMEN RESTROOM	267 SF	(none)			
Level 1	212S	QUIET ROOM	136 SF	BOWLING CENTERS, ALLOW 5 PERSON FOR EACH LANE INCLUDING 15 FEET RUN WAY AND ADDITIONAL AREAS	7 NET	20	4.0
Level 1	212T	CORRIDOR	745 SF	(none)			
Level 1	212U	ACTIVITY ROOM	1,316 SF	ASSEMBLY W/O FIXED SEATS UNCONCENTRATED (TABLES AND CHAIRS)	15 NET	88	17.6
Level 1	212V	PT/OT ROOM	1,434 SF	BUSINESS AREAS	100 GROSS	15	3.0
Level 1	212W	DINING AND ACTIVITY AREA	4,146 SF	ASSEMBLY W/O FIXED SEATS UNCONCENTRATED (TABLES AND CHAIRS)	15 NET	277	55.4
Level 1	212X	STORAGE	148 SF	ACCESSORY STORAGE AREAS, MECHANICAL EQUIPMENT ROOM	300 GROSS	1	0.2
Level 1	212Z	CONFERENCE ROOM	260 SF	ASSEMBLY W/O FIXED SEATS UNCONCENTRATED (TABLES AND CHAIRS)	15 NET	18	3.6
TOTAL			14,907 SF			567	113.4


## PLUMBING FIXTURES CALCULATIONS

PERSONS	WC		URINALS	LAVATORY		DRINKING FOUNTAIN	OTHER
---------	----	--	---------	----------	--	-------------------	-------

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
A																	
B																	
C																	
D																	
E																	
F																	
G																	
H																	
I																	
J																	
K																	

**GENERAL CONSTRUCTION NOTES**

ARCHITECT.  
 HB+A Architects  
 2811 CASTRO VALLEY BLVD,  
 SUITE 109,  
 CASTRO VALLEY, CA. 94546  
 510-830-4797 OFF



NO.	REVISION DESCRIPTION	BY:	DATE	APPR:	DATE
	REVIEW SET		OCT-2018		

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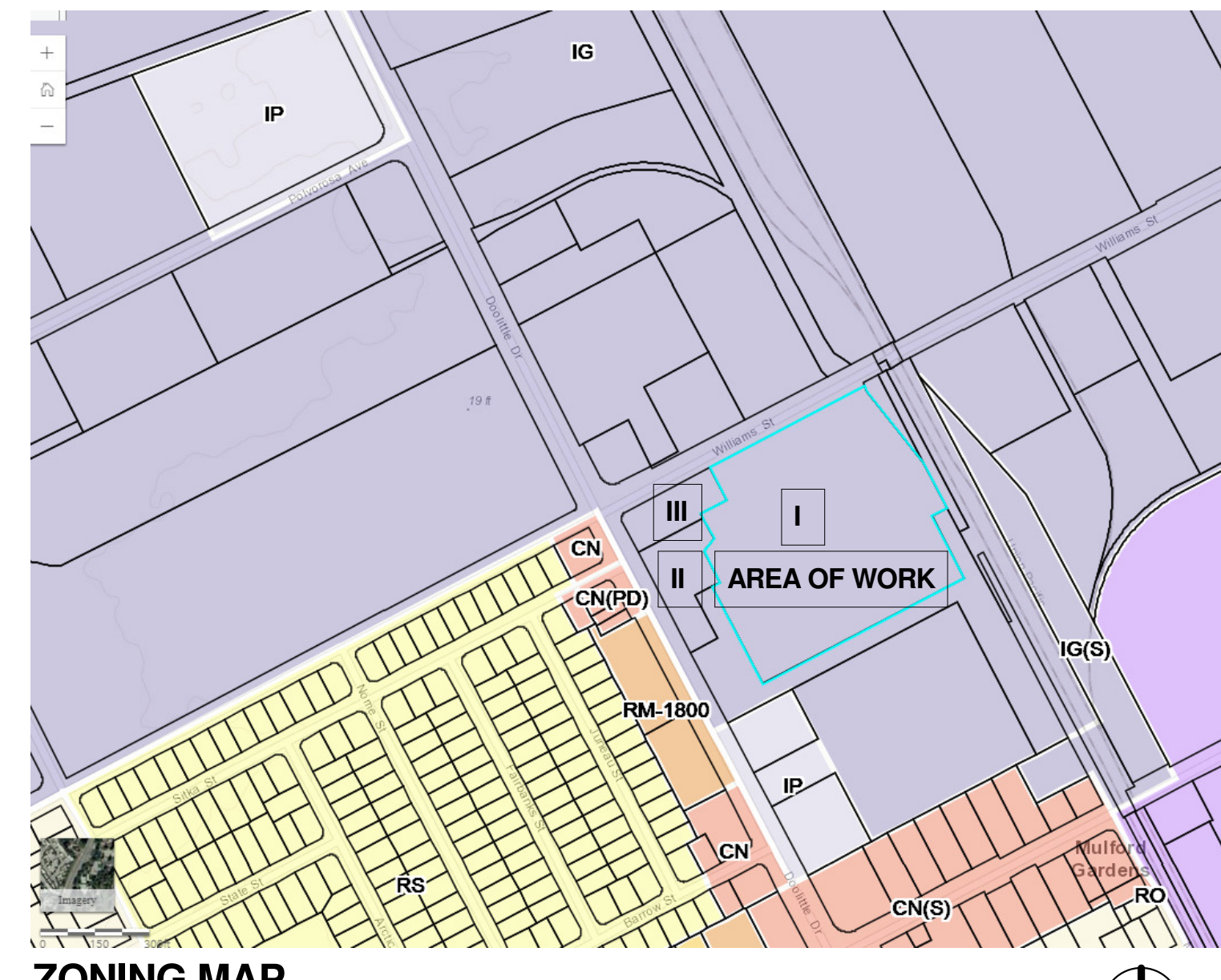
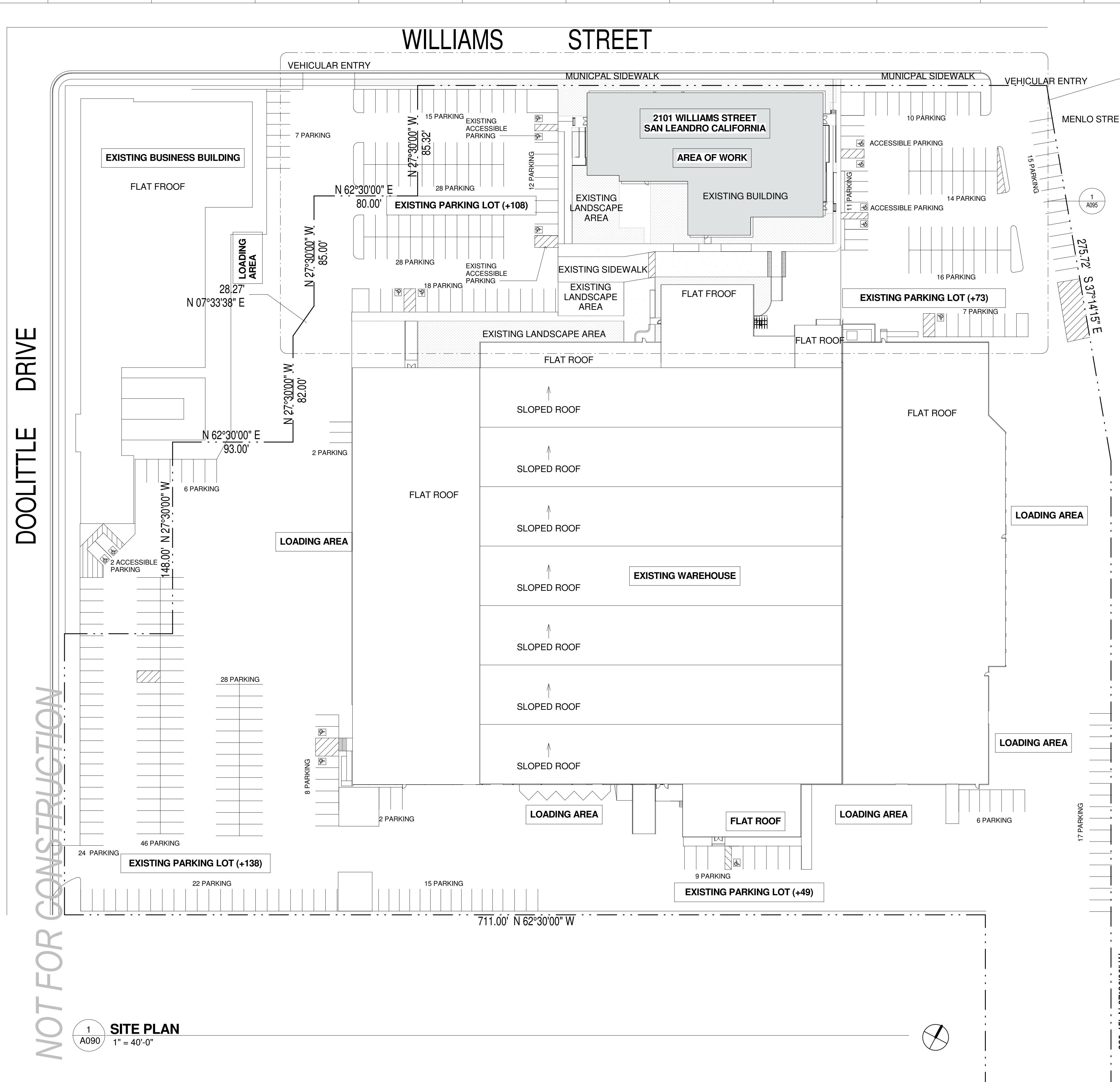
**A001**

GENERAL NOTES

TITLE REVIEW SET FOR TENANT IMPROVEMENT

**ADULT DAY HEALTH CARE CENTER**

ADDRESS 2101 WILLIAM STREET,  
 SAN LEANDRO, CALIFORNIA, 94577  
 CLIENT COZY NEST ADULT DAY HEALTH CARE, LLC



<b>PARCEL I</b>	<b>AREA OF WORK</b>
Address 2101 WILLIAMS ST	
APN 77A-645-5-1	
Lot Size 364,324 sq ft	
Zoning IG	
Zoning Description Industrial General	
<b>PARCEL II</b>	<b>AREA OF WORK</b>
Address 2199 WILLIAMS ST	
APN 77A-645-6-2	
Lot Size 45,623 sq ft	
Zoning IG	
Zoning Description Industrial General	
<b>PARCEL III</b>	<b>AREA OF WORK</b>
Address 2199 WILLIAMS ST	
APN 77A-645-5-2	
Lot Size 24,667 sq ft	
Zoning IG	
Zoning Description Industrial General	

ZONING MAP

EXISTING BUILDING	PARCEL #s	TOTAL SF	OFFICE	1/300	WAREHOUSE	1/1000	MANUFACTURING	1/500	TOTAL PARKING
	77a-645-5-1,-6-1								
A	AREA OF WORK	15,500	15,500	52	0	0	0	0	52
B	DIRECTV KINGS	16,700	2,400	8	13,700	14	0	0	22
	ASIAN GOURMET	31,990	500	2	21,990	22	8,200	16	40
	BAY CITIES PRODUCE	41,070	4,000	13	20,000	20	12,000	24	57
	MOORE NEWTON HARDWOODS	41,810	2,000	7	39,810	40	0	0	46
	SUDDENLINK	42,570	4,500	15	38,070	38	0	0	53
	<b>TOTAL SF</b>	<b>189,640</b>							
	<b>TOTAL PARKING</b>			<b>96</b>		<b>134</b>		<b>40</b>	<b>270</b>
	77a-645-5-2,-6-2								
C	ROBERT CARDELLINO WONDER ICE CREAM	2,483	300	1	2,183	2	0	0	3
	METROPOLIS IRON WORKS	3,359	1,500	5	1,859	2	0	0	7
	OLD REPUBLIC TITLE	6,200	600	2	2,100	2	3,500	7	11
	CUSTOMER EDM VACANT OFFICE	4,225	425	1	3,800	4	0	0	5
	FIRELIGHT GLASS CO	5,789	600	2	2,789	3	2,400	5	10
	KWAN	1,031	1,031	3	0	0	0	0	3
	<b>TOTAL SF</b>	<b>5,100</b>	<b>1,200</b>	<b>4</b>	<b>500</b>	<b>1</b>	<b>3,400</b>	<b>7</b>	<b>11</b>
	<b>TOTAL PARKING</b>	<b>550</b>	<b>550</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>
	<b>TOTAL SF</b>	<b>28,737</b>							
	<b>TOTAL PARKING</b>			<b>21</b>		<b>13</b>		<b>19</b>	<b>53</b>
	77a-645-5-1,-6-1	<b>TOTAL PARKING</b>							<b>270</b>
	77a-645-5-2,-6-2	<b>TOTAL PARKING</b>							<b>53</b>
	<b>TOTAL SHARED PARKING SPACES</b>								<b>323</b>

NOTE: PARKING CALCULATION ARE FOR SHARED PARKING ON BOTH PARCELS

**323 REQUIRED ( SHARED) PARKING SPACES**  
**368 EXISTING PARKING SPACES ON SITE**

**8 REQUIRED ACCESSIBLE (SHARED) PARKING SPACES**  
**15 EXISTING ACCESSIBLE (SHARED) PARKING SPACES**

- 52 EXISTING PARKING SPACES WILL BE DESIGNATED FOR ADULT DAY HEALTH CARE INCLUDING 20 EXISTING PARKING SPACES WILL BE DESIGNATED FOR STAFF ONLY

NOTE PARKING UPGRADES PER CITY OF SAN LEANDRO ACCESSIBILITY REQUIREMENTS. SEE PROPOSED SITE PLAN SHEET A095

\*\*MINIMUM ACCESSIBLE PARKING SPACES PER PER TABLE 208.2 ADA STANDARDS OF ACCESSIBLE DESIGN 2010

208.2 Minimum Number. Parking spaces complying with 502 shall be provided in accordance with Table 208.2 except as required by 208.2.1, 208.2.2, and 208.2.3. Where more than one parking facility is provided on a site, the number of accessible spaces provided on the site shall be calculated according to the number of spaces required for each parking facility.

Total Number of Parking Spaces Provided in Parking Facility	Minimum Number of Required Accessible Parking Spaces
1 to 25	1
26 to 50	2
51 to 75	3
76 to 100	4
101 to 150	5
151 to 200	6
201 to 300	7
301 to 400	8
401 to 500	9
501 to 1000	2 percent of total
1001 and over	20, plus 1 for each 100, or fraction thereof, over 1000

1 A090 SITE PLAN 1" = 40'-0"

ARCHITECT.  
 HB+A Architects  
 2811 CASTRO VALLEY BLVD,  
 SUITE 109,  
 CASTRO VALLEY, CA. 94546  
 510-830-4797 OFF

**hb+a Architects**

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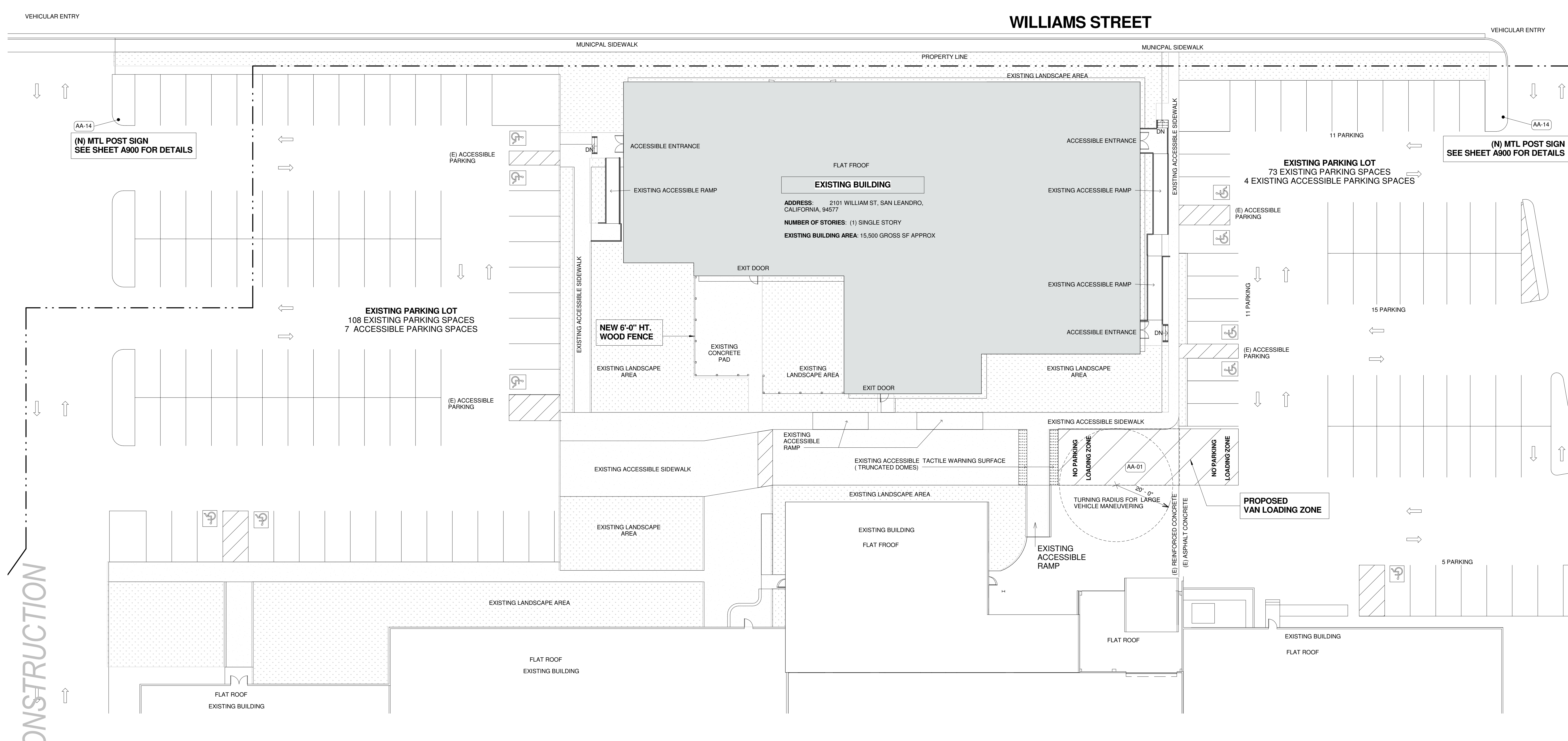
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**A090**  
 EXISTING SITE PLAN / PARCEL PLAN

TITLE REVIEW SET FOR TENANT IMPROVEMENT  
**ADULT DAY HEALTH CARE CENTER**  
 ADDRESS 2101 WILLIAM STREET,  
 SAN LEANDRO, CALIFORNIA, 94577  
 CLIENT COZY NEST ADULT DAY HEALTH CARE, LLC

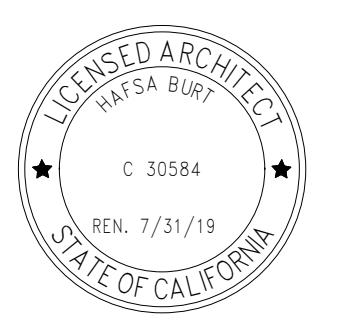
WILLIAMS STREET



1  
A095  
**PROPOSED SITE PLAN**  
1/16" = 1'-0"

1. CONTRACTOR TO INVESTIGATE FIELD CONDITIONS AND ASCERTAIN THAT WORK IS FEASIBLE AS SHOWN.
2. CONTRACTOR SHALL VERIFY ALL FIELD DIMENSIONS AND CONDITIONS AND REPORT ANY DISCREPANCIES TO THE ARCHITECT.
3. SEE SHEET A001 FOR GENERAL NOTES
4. SEE SHEET A720 FOR PARKING DETAILS

NOT FOR CONSTRUCTION



ARCHITECT.  
HB+A Architects  
2811 CASTRO VALLEY BLVD,  
SUITE 109,  
CASTRO VALLEY, CA. 94546  
510-830-4797 OFF

**hb+a Architects**

NO.	REVISION DESCRIPTION	BY:	DATE	APPR:	DATE
1	REVIEW SET		OCT-2018		

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SCALE:	1/16" = 1'-0"	DATE	
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APPR. BY:			
APPR. BY:			

**A095**  
SITE PLAN  
(PROPOSED  
UPGRADES)

TITLE REVIEW SET FOR TENANT IMPROVEMENT  
**ADULT DAY HEALTH CARE CENTER**

ADDRESS 2101 WILLIAM STREET,  
SAN LEANDRO, CALIFORNIA, 94577  
CLIENT COZY NEST ADULT DAY HEALTH CARE, LLC

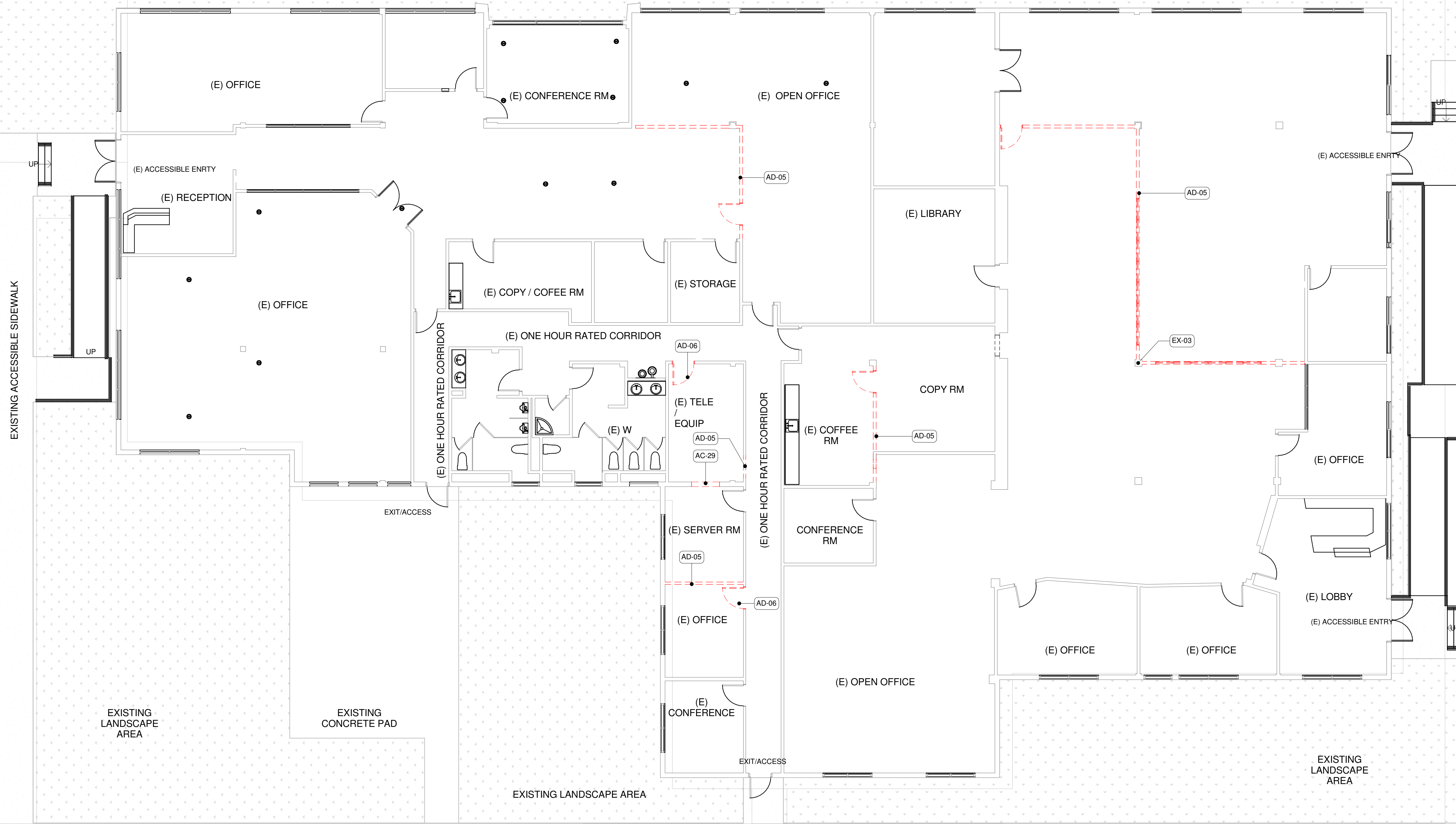
WILLIAMS STREET

MUNICIPAL SIDEWALK

MUNICIPAL SIDEWALK

PROPERTY LINE

EXISTING LANDSCAPE AREA



NOT FOR CONSTRUCTION

**1**  
A100  
**EXISTING / DEMO PLAN**  
1/8" = 1'-0"

1. CONTRACTOR TO INVESTIGATE FIELD CONDITIONS AND ASCERTAIN THAT WORK IS FEASIBLE AS SHOWN.
2. CONTRACTOR SHALL VERIFY ALL FIELD DIMENSIONS AND CONDITIONS AND REPORT ANY DISCREPANCIES TO THE ARCHITECT.
3. SEE SHEET A001 FOR GENERAL NOTES
4. SEE SHEET A-001 FOR PROJECT KEYNOTES

ARCHITECT.  
 HB+A Architects  
 2811 CASTRO VALLEY BLVD,  
 SUITE 109,  
 CASTRO VALLEY, CA. 94546  
 510-830-4797 OFF

**hb+a Architects**

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SCALE: 1/8" = 1'-0"	DATE
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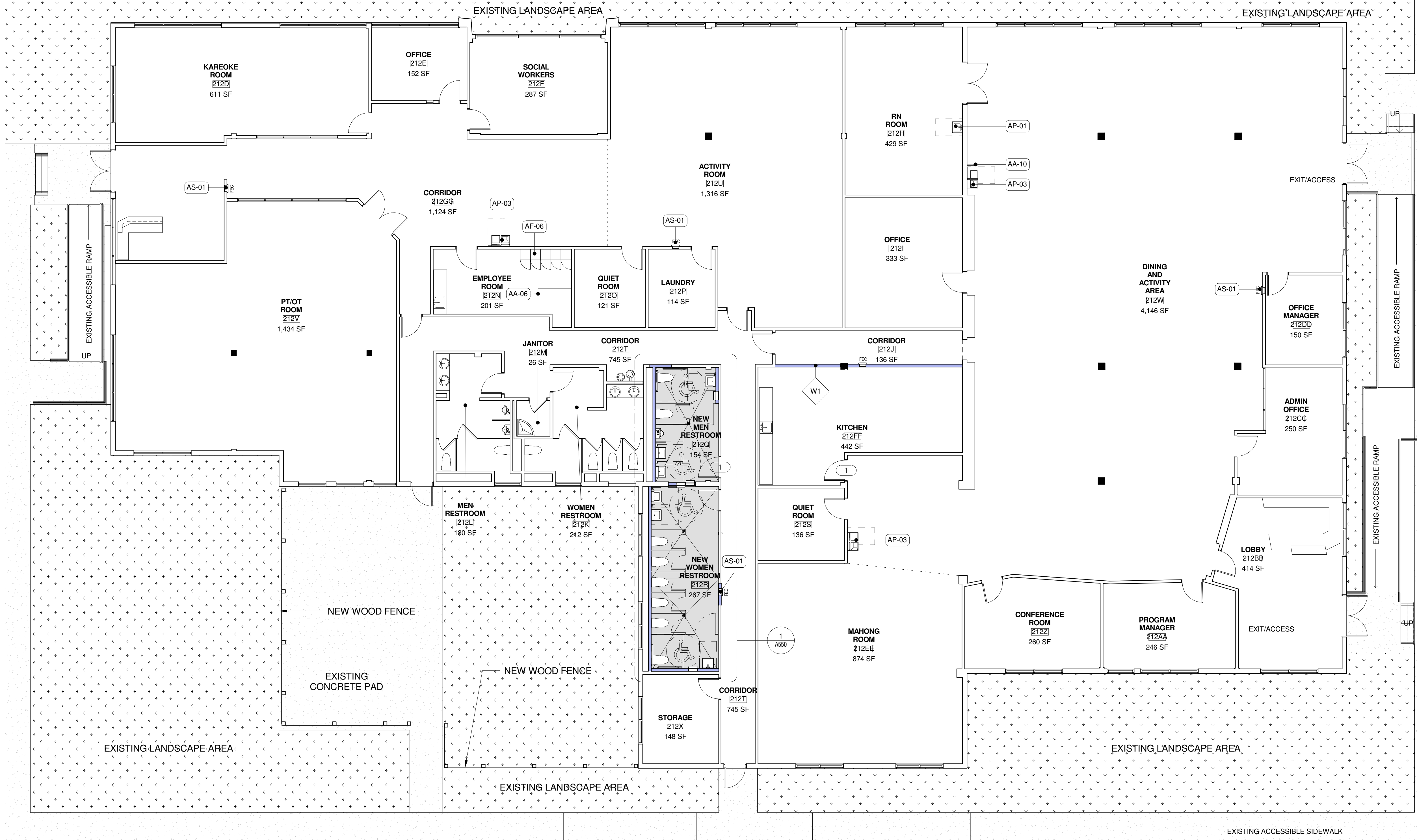
**A100**  
EXISTING/DEMO PLAN

TITLE REVIEW SET FOR TENANT IMPROVEMENT  
**ADULT DAY HEALTH CARE CENTER**  
 ADDRESS 2101 WILLIAM STREET,  
 SAN LEANDRO, CALIFORNIA, 94577  
 CLIENT COZY NEST ADULT DAY HEALTH CARE, LLC

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SHEET NOTES	
KEY	NOTE
AA-06	NEW ACCESSIBLE BENCH TO COMPLY WITH CBC 11B.903
AA-10	DRINKING FOUNTAIN GRAB BAR. THE PROTECTED AREA WITHIN WHICH A DRINKING FOUNTAIN IS LOCATED SHALL BE 32 INCHES WIDE MINIMUM AND 18 INCHES DEEP MINIMUM, AND SHALL COMPLY WITH SECTION 11B-305.7. WHEN USED, WING WALLS OR BARRIERS SHALL PROJECT HORIZONTALLY AT LEAST AS FAR AS THE DRINKING FOUNTAIN AND TO WITHIN 6 INCHES VERTICALLY FROM THE FLOOR OR GROUND SURFACE
AE-02	NEW EMERGENCY EXIT LIGHT. SEE REFLECTED CEILING PLAN FOR DETAILS
AF-06	NEW LOCKERS WITH ACCESSIBLE UNIT(S) PER CBC 11 B-222.1
AP-01	NEW ACCESSIBLE LAVATORY, WALL MOUNTED. SEE SCHEDULE FOR DETAILS
AP-03	NEW BI-LEVEL ACCESSIBLE DRINKING FOUNTAIN WITH WATER BOTTLE REFILL STATION
AS-01	F E 2A 10B:C RATED FIRE EXTINGUISHER IN WEATHERPROOF CABINET. MAX. 4" PROJECTION



GENERAL NOTES	
1.	PATCH & MATCH WALLS AS REQUIRED FOR NEW FINISH.
2.	SEE CEILING, ELECTRICAL AND MECHANICAL PROJECTS FOR GRILLE, LIGHT, AND RECEPTACLE LOCATIONS.
3.	CONTRACTOR TO COORDINATE ALL WORK WITH OWNER'S REPRESENTATIVE.
4.	ALL DOOR HARDWARE TO BE LEVER HANDLES. SEE SHEET A-500 FOR DOOR SCHEDULE.

**EMERGENCY EXIT SIGN**  
 ABOVE ENTRY DOOR PROVIDE EMERGENCY ILLUMINATED EXIT SIGN, WALL / CEILING MOUNTED W/ BATTERY BACK UP. (EXIT DOOR)

**SMOKE DETECTOR**  
 ALL ROOMS TO BE PROVIDED WITH SMOKE DETECTORS UL LISTED

SHEET LEGEND	
<b>ROOM NAME</b>	
101	ROOM NUMBER
150 SF	ROOM AREA SEE COVER SHEET FOR ROOM OCCUPANCY AND EXIT CALCULATIONS
A	EQUIP/ FIXTURE / LUMINAIRE SEE SHEET A-600 FOR EQUIPMENT AND ACCESSORY DETAILS
101	DOOR TYPE. SEE SHEET A-600 FOR DOOR SCHEDULE AND DETAILS
11	WINDOW TYPE. (NOT APPLICABLE)
11	WALL TYPE. SEE SHEET A-800 FOR PROPOSED WALL TYPES
XX-00	MATERIAL TYPE. SEE SHEET A-600 FOR FINISH SCHEDULE AND DETAILS
AA-00	PROJECT KEYNOTES (SEE SHEET A-001 FOR GENERAL & ADDITIONAL CONTRACTOR NOTES)

NOT FOR CONSTRUCTION

**1**  
**A300**  
**PROPOSED PLAN**  
 1/8" = 1'-0"

- CONTRACTOR TO INVESTIGATE FIELD CONDITIONS AND ASCERTAIN THAT WORK IS FEASIBLE AS SHOWN.
- CONTRACTOR SHALL VERIFY ALL FIELD DIMENSIONS AND CONDITIONS AND REPORT ANY DISCREPANCIES TO THE ARCHITECT.
- SEE SHEET A001 FOR GENERAL NOTES

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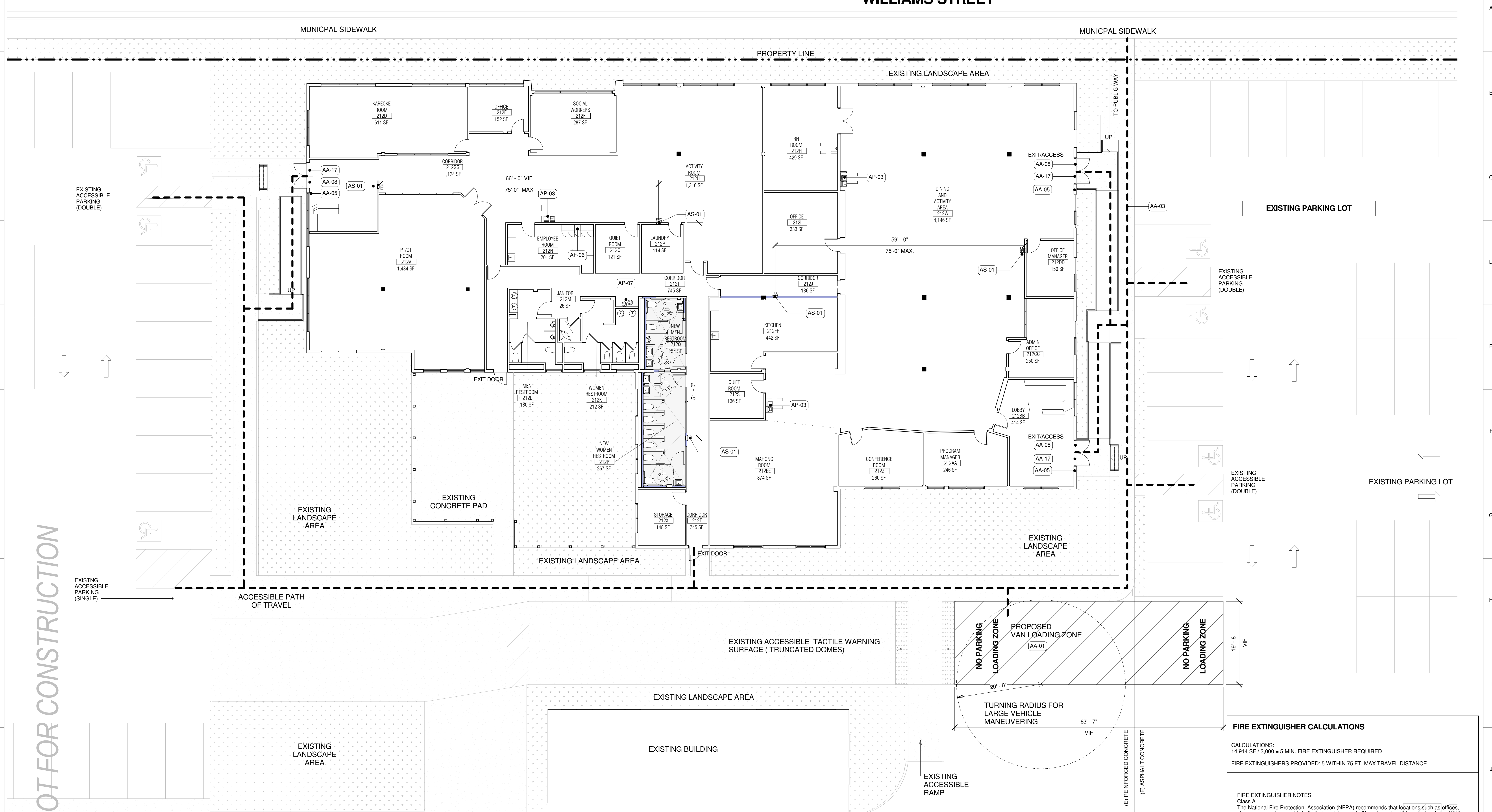
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APPR. BY:			

**A300**  
**PROPOSED PLAN**

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**ADULT DAY HEALTH CARE CENTER**

ADDRESS 2101 WILLIAM STREET,  
 SAN LEANDRO, CALIFORNIA, 94577  
 CLIENT COZY NEST ADULT DAY HEALTH CARE, LLC

WILLIAMS STREET



1 EGRESS AND ACCESSIBILITY PLAN  
A310 1" = 10'-0"

SEE SHEET A-001 FOR PROJECT KEYNOTES

**FIRE EXTINGUISHER CALCULATIONS**

CALCULATIONS:  
14,914 SF / 3,000 = 5 MIN. FIRE EXTINGUISHER REQUIRED  
FIRE EXTINGUISHERS PROVIDED: 5 WITHIN 75 FT. MAX TRAVEL DISTANCE

**FIRE EXTINGUISHER NOTES**  
Class A  
The National Fire Protection Association (NFPA) recommends that locations such as offices, classrooms, and assembly halls that contain mainly Class A combustible materials have (1) 2-A extinguisher for every 3,000 square feet. (Standard for Portable Fire Extinguishers (NFPA 10 (2010), Table 6.2.1.1, Fire Extinguisher Size and Placement for Class A Hazards)).  
OSHA requires that all employees have access to an extinguisher within 75 feet travel-distance [OSHA 29 CFR 1910.157(d)(2)].

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**A310**

SAFETY AND ACCESSIBILITY PLAN

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NOT FOR CONSTRUCTION



**1**  
A400  
**EXISTING CEILING PLAN**  
1/8" = 1'-0"

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3. SEE SHEET A001 FOR GENERAL NOTES
4. SEE SHEET A-001 FOR PROJECT KEYNOTES

**LEGEND**

- (E) 24"x48" T8 CELL PARABOLIC LIGHT FIXTURE
- (E) WALL MOUNTED INDUSTRIAL FLUORESCENT
- (E) INDIRECT LIGHT FIXTURE MOUNTED 21 INCH BELOW CEILING 3 LAMP T8 ROUNDED CHANNEL
- (E) DOWNLIGHT
- DEMOLISH / REMOVE / RELOCATE
- (D) DEMOLISH / REMOVE
- (E) EXISTING
- RE RELOCATE
- (N) NEW

**E/E**  
**EMERGENCY EXIT SIGN**  
ABOVE ENTRY DOOR PROVIDE EMERGENCY ILLUMINATED EXIT SIGN, WALL / CEILING MOUNTED W/ BATTERY BACK UP. (EXIT DOOR)

LITHONIA LRP  
Precise® Edge-Lit Exits with LED Lamps

- ILLUMINATED EXIT SIGN, WALL / CEILING MOUNTED W/ BATTERY BACK UP. (EXIT DOOR)
- ILLUMINATED EXIT SIGN, WALL / CEILING MOUNTED W/ BATTERY BACK UP. (DIRECTION OF TRAVEL)
- SMOKE DETECTOR  
ALL ROOMS TO BE PROVIDED WITH SMOKE DETECTORS

**NOTES:**

- MAXIMUM EXIT SIGNS MUST BE NOT MORE THAN 100 FT APART
- PROVIDE ALL CABINETS (NOT SHOWN) WITH LED UNDERCABINET LIGHT (LENGTH PER WALL CABINET)
- REPLACE EXISTING FLUORESCENT FIXTURE WITH LED 3000 K (OR UNDER)

EMERGENCY ILLUMINATION SHALL BE PROVIDED FOR NOT LESS THAN 1 HOUR IN THE EVENT OF FAILURE OF NORMAL LIGHTING. LIGHTING SHALL BE ARRANGED TO PROVIDE AN INITIAL ILLUMINATION THAT IS NOT LESS THAN AVERAGE OF 1 FT-CANDLE (10.8 LUX) AND, AT ANY POINT, NOT LESS THAN 0.1 FT-CANDLE (1.1 LUX) MEASURED ALONG THE PATH OF EGRESS AT ANY LEVEL. (NFPA-101:7.9.2)

**SHEET LEGEND**

**ROOM NAME**

101 ROOM NUMBER

150 SF ROOM AREA SEE COVER SHEET FOR ROOM OCCUPANCY AND EXIT CALCULATIONS

**A** EQUIP/ FIXTURE / LUMINAIRE . SEE SHEET A-600 FOR EQUIPMENT AND ACCESSORY DETAILS

(101) DOOR TYPE. SEE SHEET A-600 FOR DOOR SCHEDULE AND DETAILS

(11) WINDOW TYPE. (NOT APPLICABLE)

(1) WALL TYPE. SEE SHEET A-800 FOR PROPOSED WALL TYPES

XX-00 MATERIAL TYPE. SEE SHEET A-600 FOR FINISH SCHEDULE AND DETAILS

AA-00 PROJECT KEYNOTES (SEE SHEET A-001 FOR GENERAL & ADDITIONAL CONTRACTOR NOTES)

ARCHITECT.

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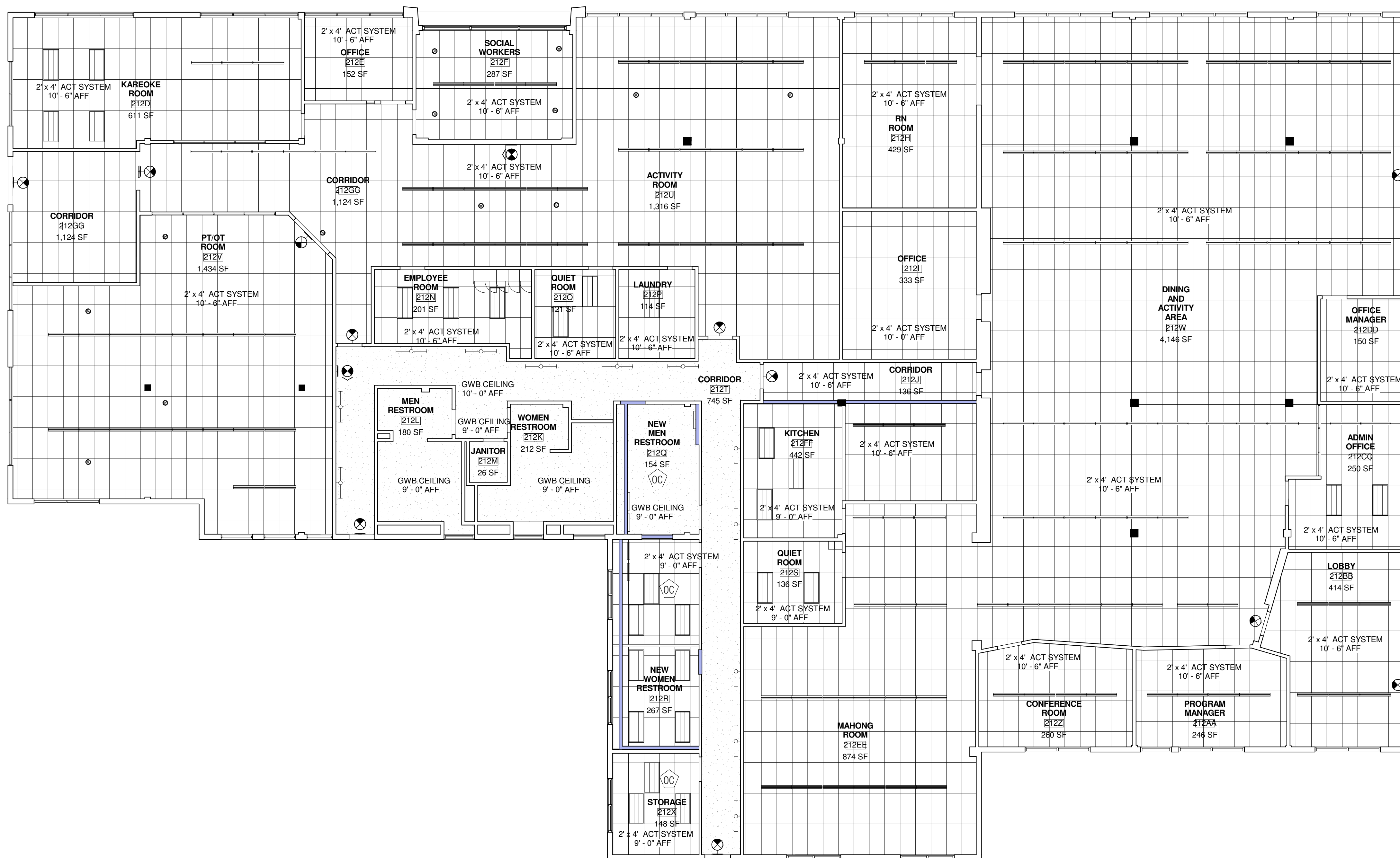
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**A400**  
EXISTING / DEMO  
REFLECTED CEILING  
PLAN

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ADDRESS 2101 WILLIAM STREET,  
SAN LEANDRO, CALIFORNIA, 94577  
CLIENT COZY NEST ADULT DAY HEALTH CARE, LLC

NOT FOR CONSTRUCTION



**LEGEND**

(OC) SWITCH WITH OCCUPANCY SENSOR (SWITCH O.C. COMBO OR CEILING/WALL MOUNTED INFRARED SENSOR -NOT SHOWN-) (W/ AUTOMATIC SHUT-OFF)

**CONTRACTOR NOTES**

- ALL EXISTING CEILING SYSTEMS TO REMAIN.
- NO CEILING ALTERATIONS AND/OR REMODEL WILL BE PART OF THIS PROJECT.
- GENERAL CONTRACTOR TO PROVIDE LIGHT CONTROLS UPGRADES IN EXISTING NEW ROOMS AS SHOWN IN PLAN AND LEGEND
- LIGHTING UPGRADES NOT SHOWN IN RCP TO BE VERIFIED IN FIELD BY GENERAL CONTRACTOR TO BE FEASIBLE AS SHOWN
- ALL NEW LIGHTING CONTROL TO COMPLY WITH CALIFORNIA T-24 AND AHJ.
- ALL NEW LIGHTING CONTROL UPGRADES TO BE ENERGY EFFICIENT
- ALL NEW LIGHTING CONTROL UPGRADES SHALL BE UL LISTED

**LEGEND**

(E) 24\"/>

(E) WALL MOUNTED INDUSTRIAL FLUORESCENT

(E) INDIRECT LIGHT FIXTURE MOUNTED 21 INCH BELOW CEILING 3 LAMP T8 ROUNDED CHANNEL

(E) DOWNLIGHT

--- DEMOLISH / REMOVE / RELOCATE

(D) DEMOLISH / REMOVE

(E) EXISTING

RE RELOCATE

(N) NEW

**E/E**

**EMERGENCY EXIT SIGN**  
 ABOVE ENTRY DOOR PROVIDE EMERGENCY ILLUMINATED EXIT SIGN. WALL / CEILING MOUNTED W/ BATTERY BACK UP. (EXIT DOOR)

LITHONIA LRP  
 Precise® Edge-Lit Exits with LED Lamps

ILLUMINATED EXIT SIGN, WALL / CEILING MOUNTED W/ BATTERY BACK UP. (EXIT DOOR)

ILLUMINATED EXIT SIGN, WALL / CEILING MOUNTED W/ BATTERY BACK UP. (DIRECTION OF TRAVEL)

SMOKE DETECTOR  
 ALL ROOMS TO BE PROVIDED WITH SMOKE DETECTORS

**NOTES:**

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**1 PROPOSED CEILING PLAN**

A410 1/8" = 1'-0"

- CONTRACTOR TO INVESTIGATE FIELD CONDITIONS AND ASCERTAIN THAT WORK IS FEASIBLE AS SHOWN.
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- SEE SHEET A001 FOR GENERAL NOTES

**SHEET LEGEND**

**ROOM NAME**

101 ROOM NUMBER

150 SF ROOM AREA SEE COVER SHEET FOR ROOM OCCUPANCY AND EXIT CALCULATIONS

A EQUIP/ FIXTURE / LUMINAIRE. SEE SHEET A-600 FOR EQUIPMENT AND ACCESSORY DETAILS

101 DOOR TYPE. SEE SHEET A-600 FOR DOOR SCHEDULE AND DETAILS

11 WINDOW TYPE. (NOT APPLICABLE)

11 WALL TYPE. SEE SHEET A-800 FOR PROPOSED WALL TYPES

XX-00 MATERIAL TYPE. SEE SHEET A-600 FOR FINISH SCHEDULE AND DETAILS

AA-00 PROJECT KEYNOTES (SEE SHEET A-001 FOR GENERAL & ADDITIONAL CONTRACTOR NOTES)

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**A410**

PROPOSED REFLECTED CEILING PLAN

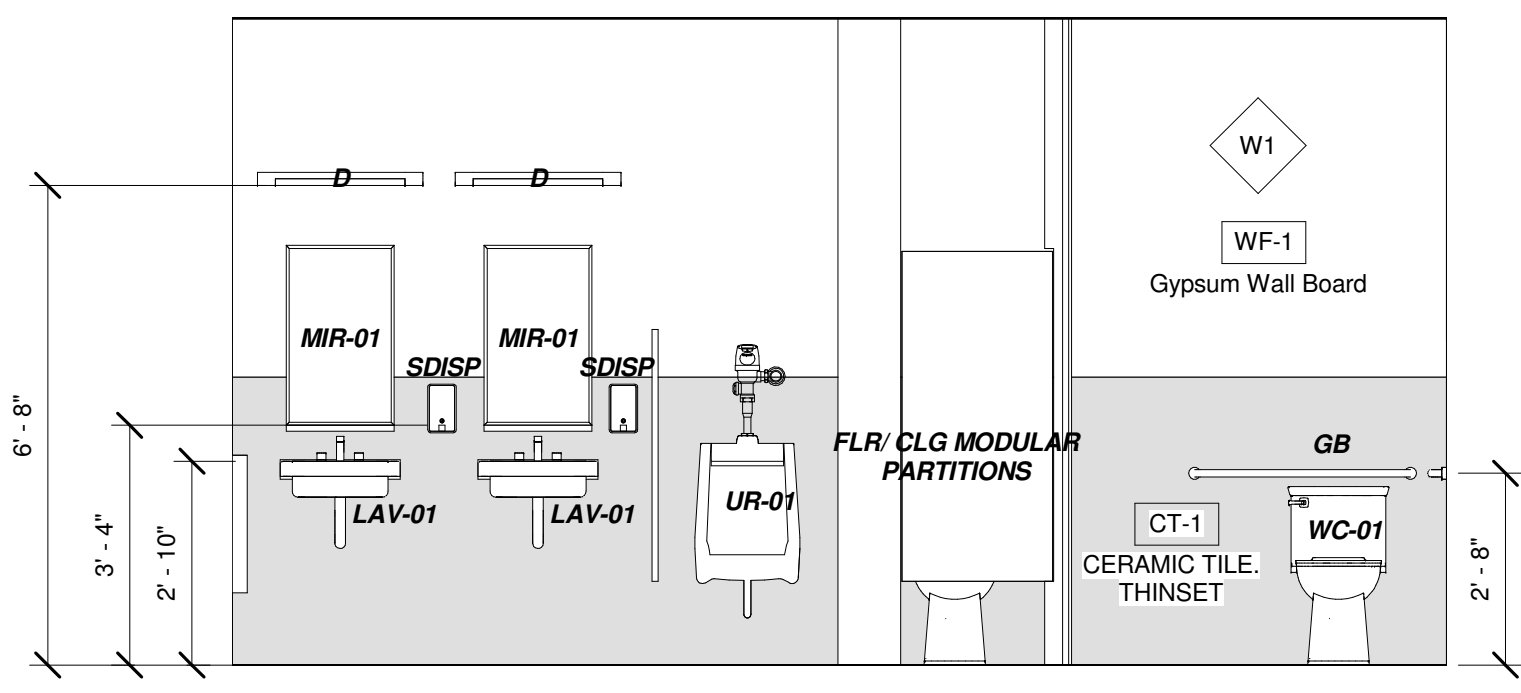
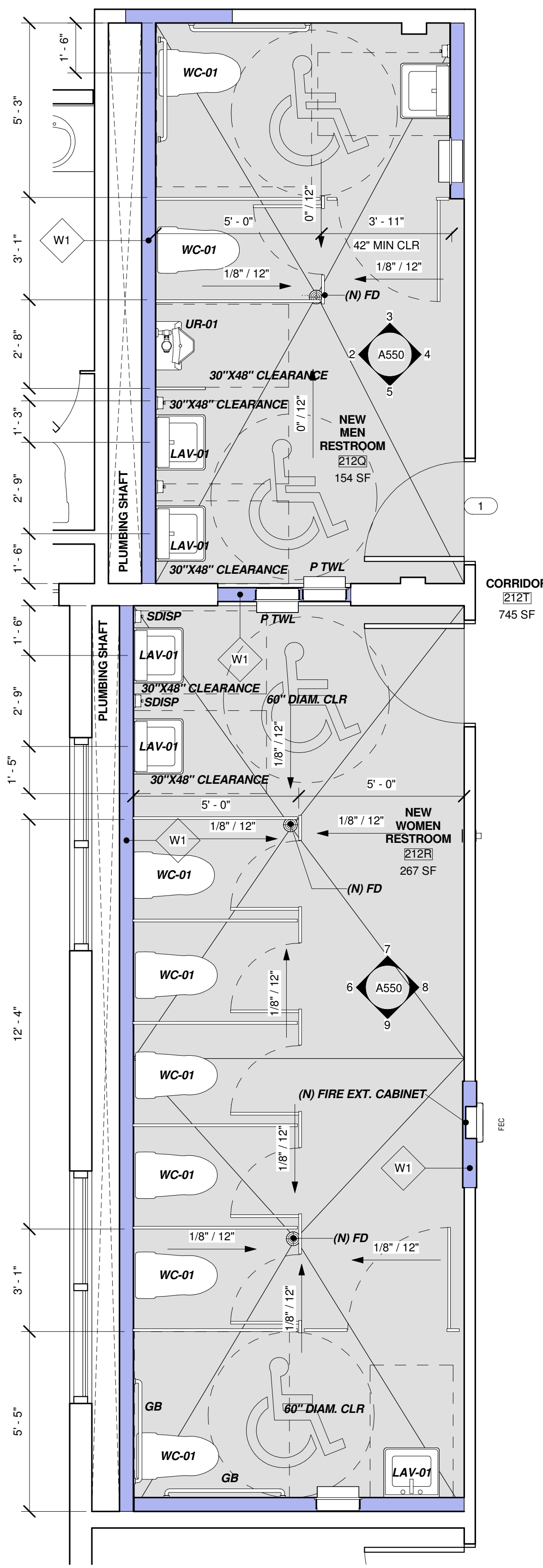
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**ADULT DAY HEALTH CARE CENTER**

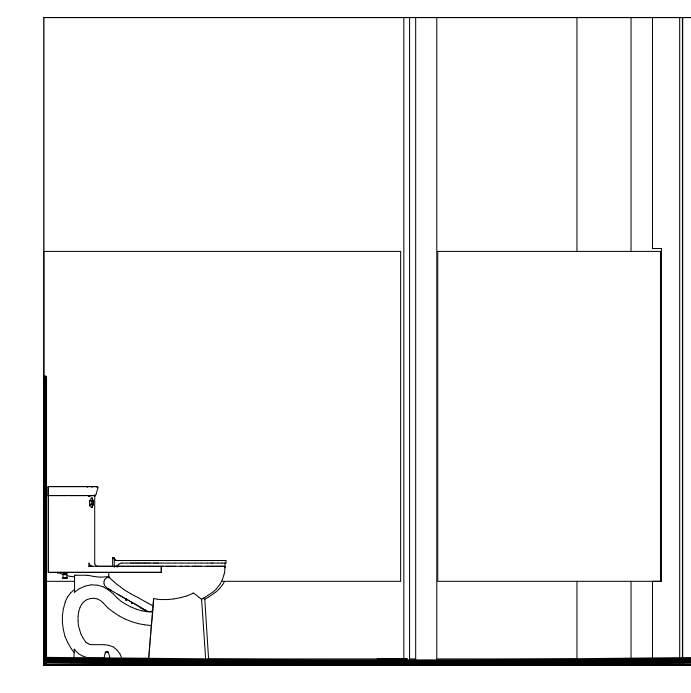
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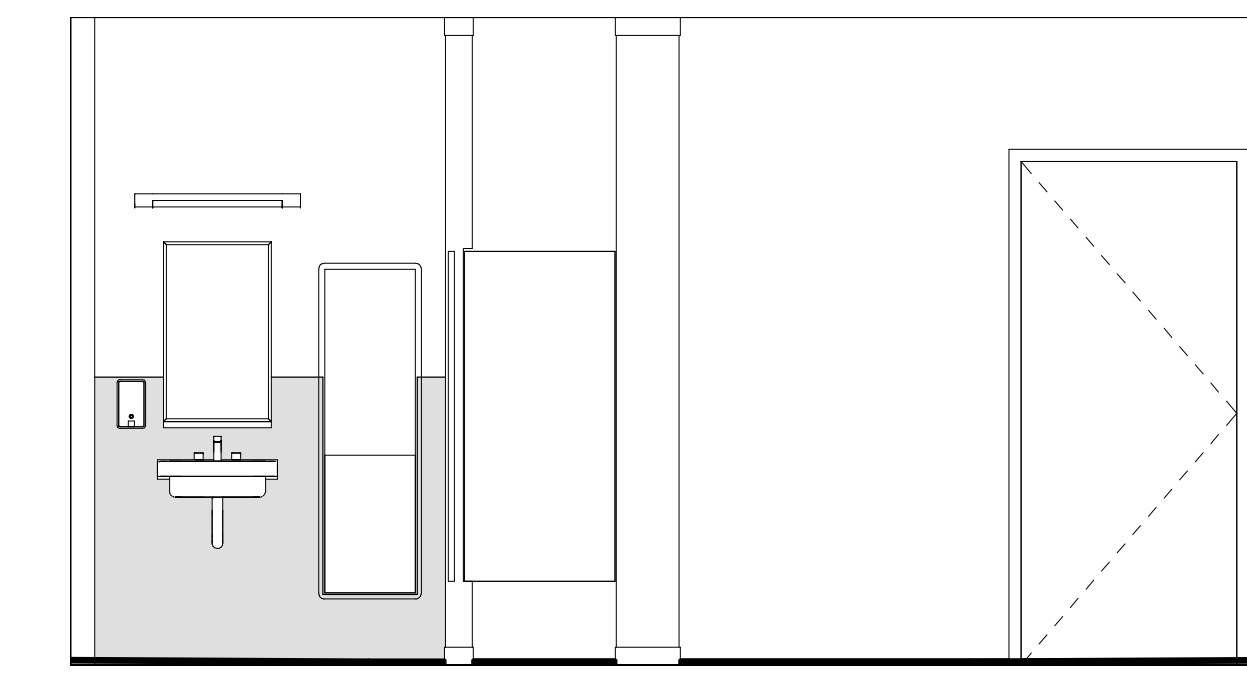
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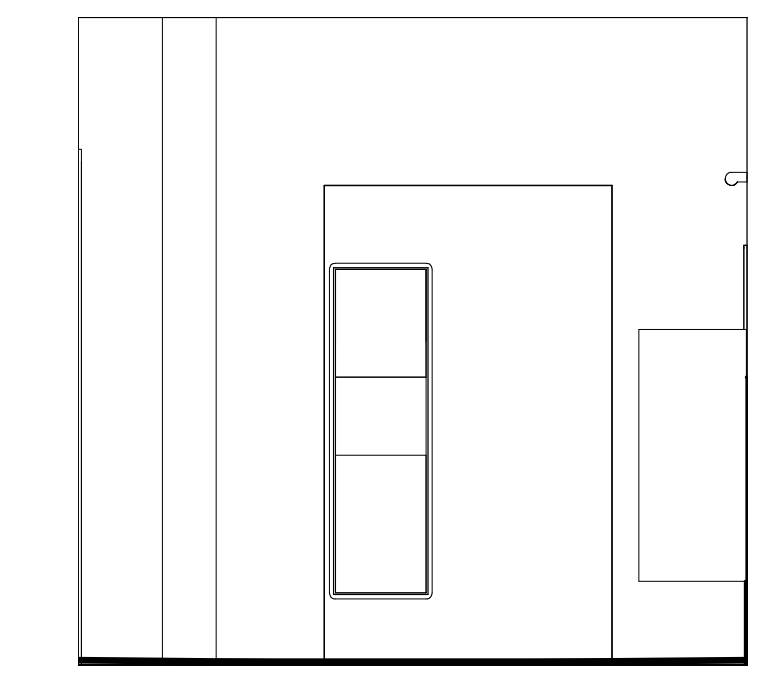
PROPOSED MEN RESTROOM  
3/8" = 1'-0"



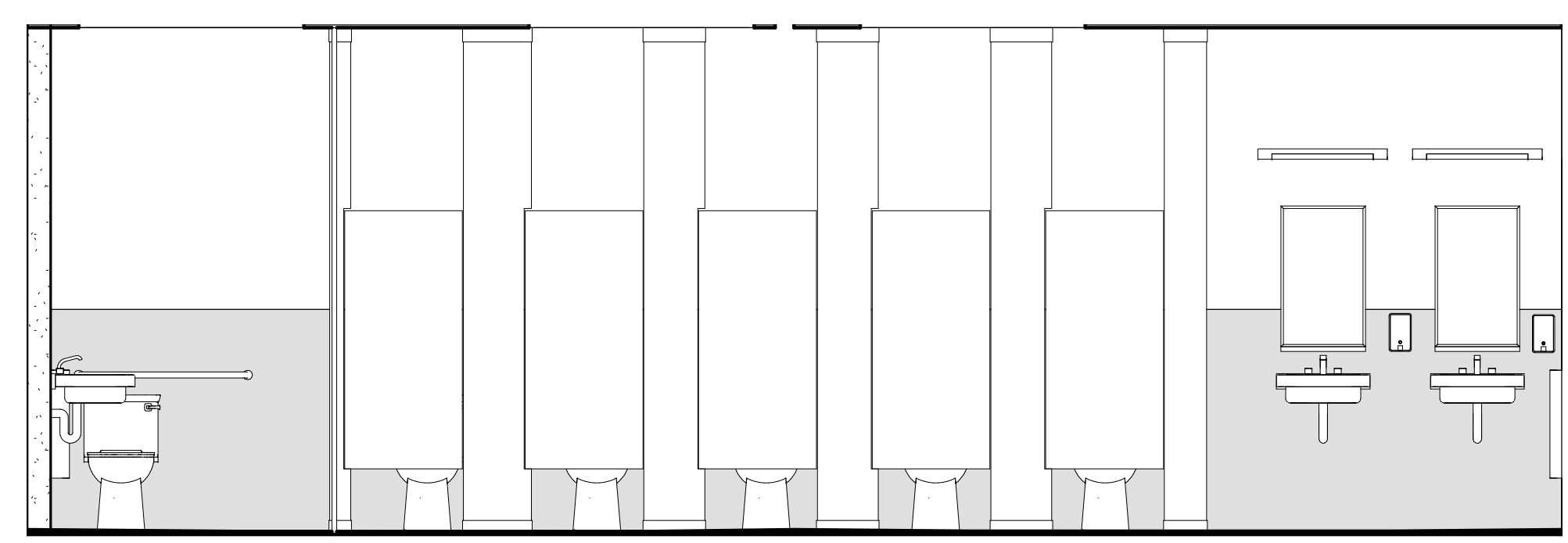
3/8" = 1'-0"



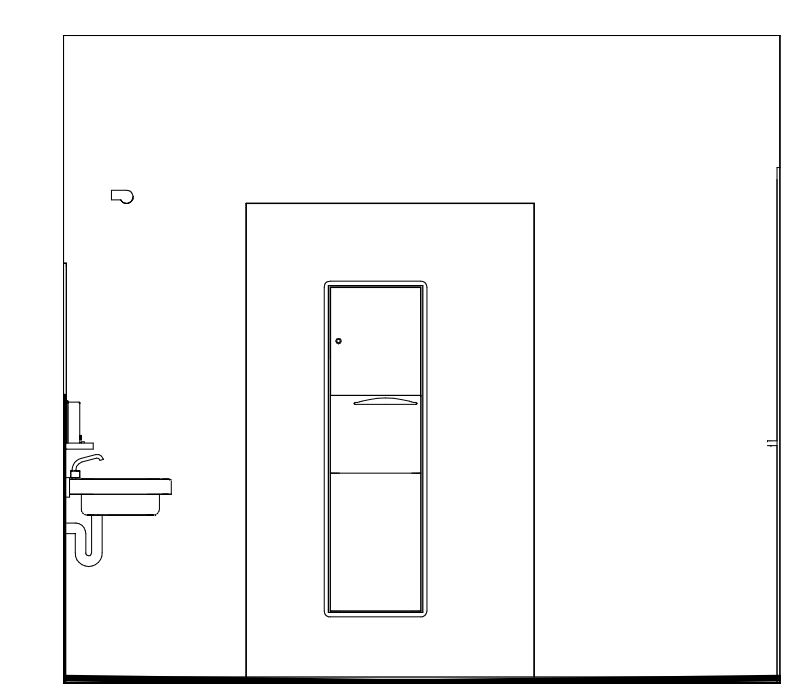
3/8" = 1'-0"



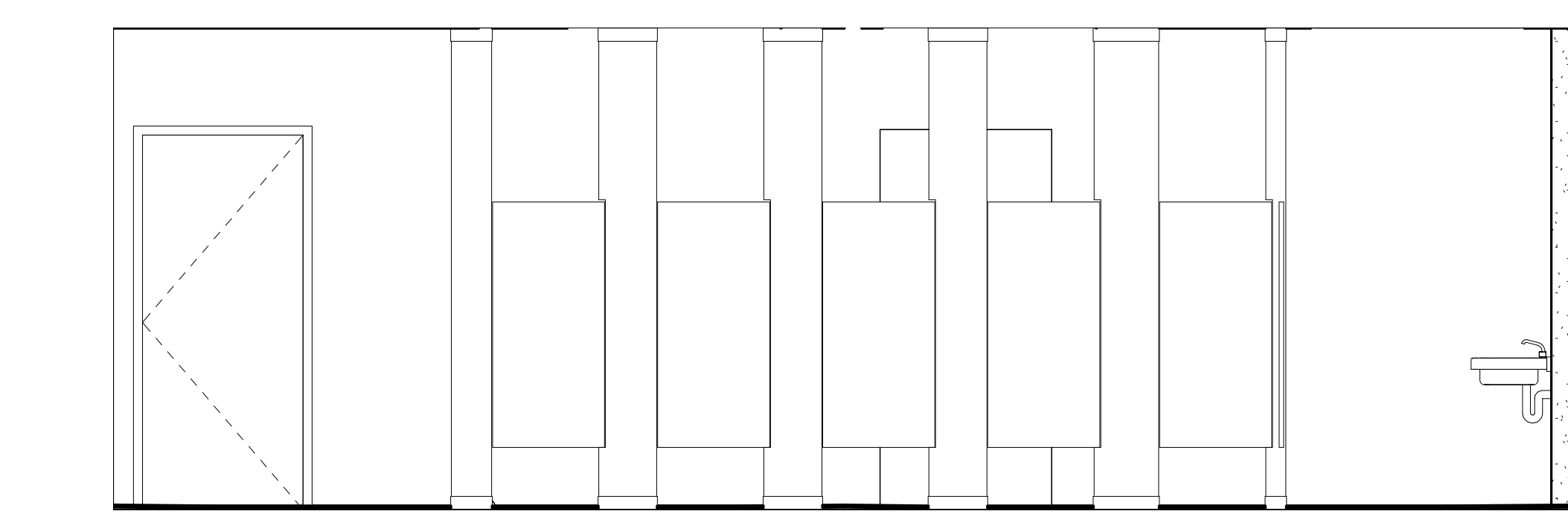
3/8" = 1'-0"



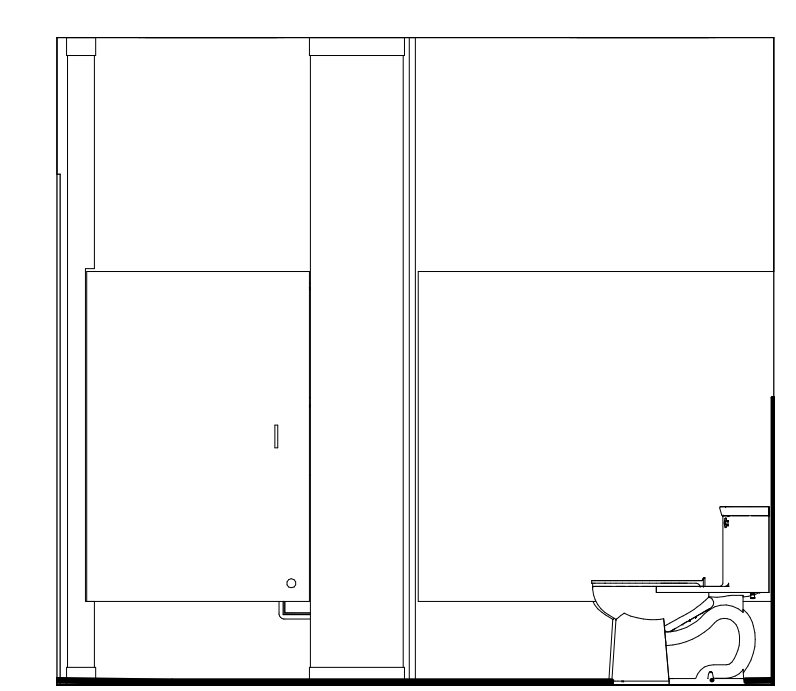
PROPOSED WOMEN RESTROOM  
3/8" = 1'-0"



3/8" = 1'-0"



3/8" = 1'-0"



3/8" = 1'-0"

SHEET LEGEND	
<b>ROOM NAME</b>	
101	ROOM NUMBER
150 SF	ROOM AREA SEE COVER SHEET FOR ROOM OCCUPANCY AND EXIT CALCULATIONS
<b>A</b>	EQUIP/ FIXTURE / LUMINAIRE . SEE SHEET A-600 FOR EQUIPMENT AND ACCESSORY DETAILS
101	DOOR TYPE. SEE SHEET A-600 FOR DOOR SCHEDULE AND DETAILS
11	WINDOW TYPE. (NOT APPLICABLE)
11	WALL TYPE. SEE SHEET A-800 FOR PROPOSED WALL TYPES
XX-00	MATERIAL TYPE. SEE SHEET A-600 FOR FINISH SCHEDULE AND DETAILS
AA-00	PROJECT KEYNOTES (SEE SHEET A-001 FOR GENERAL & ADDITIONAL CONTRACTOR NOTES)

ARCHITECT.  
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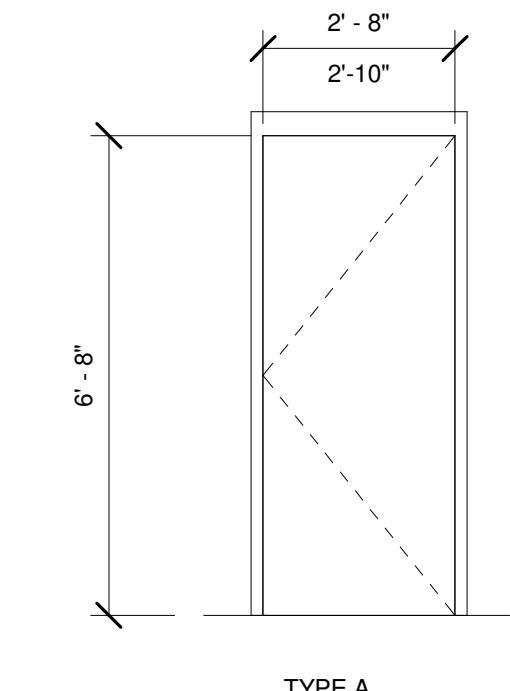
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**A550**  
 PROPOSED RESTROOMS  
 ENLARGED PLAN AND ELEVATIONS

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 CLIENT COZY NEST ADULT DAY HEALTH CARE, LLC

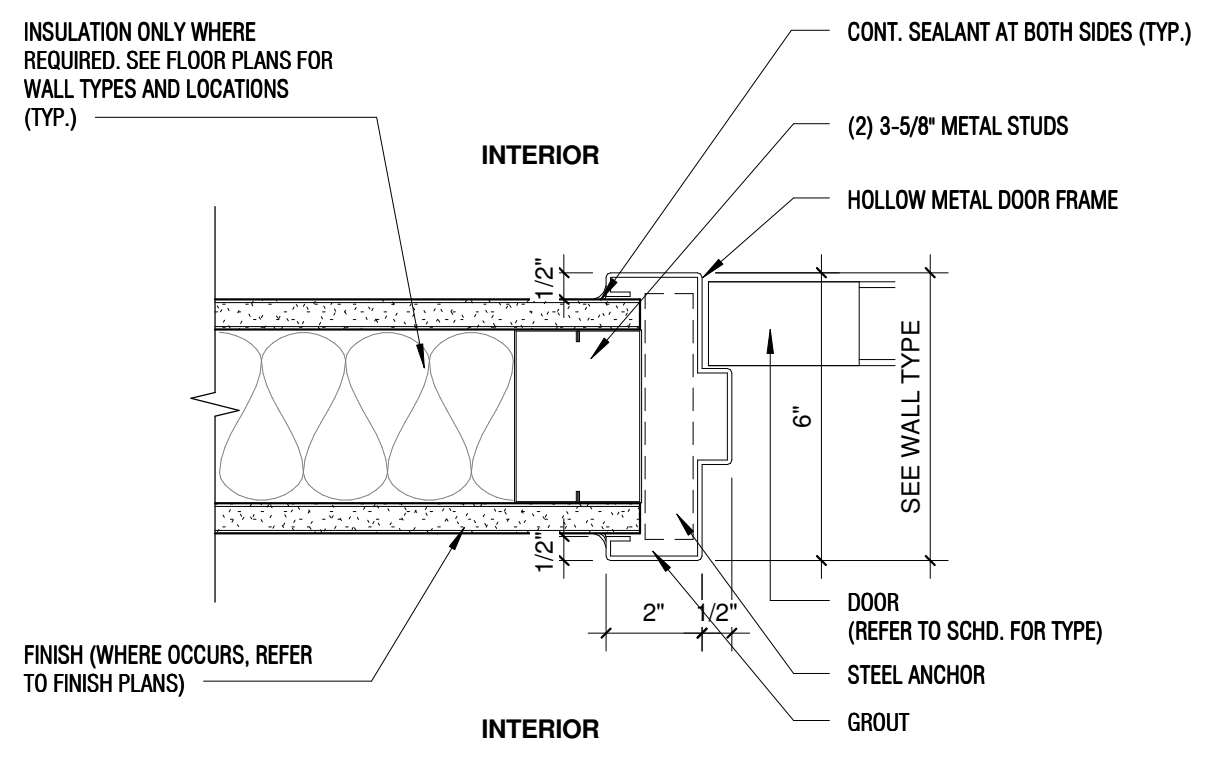
DOOR SCHEDULE																		
MARK	TYPE	DESCRIPTION	WIDTH	HEIGHT	THICKNESS	MATERIAL	FINISH	FIRE RATING	HARDWARE	HARDWARE TYPE	DOOR NOTES	FRAME MATERIAL	JAMB	HEADER	FINISH	COMMENTS	OR APPROVED EQUAL	
1	A	FLUSH SOLID CORE	3'-0"	7'-0"	0'-1 3/4"	WD/MTL SOLID CORE	PT	45 MIN.	LEVER HANDLE ACCESSIBLE	TYPE 3	2-4-6-7-8	HM	HM	HM	PT	NON LOCKABLE	Yes	



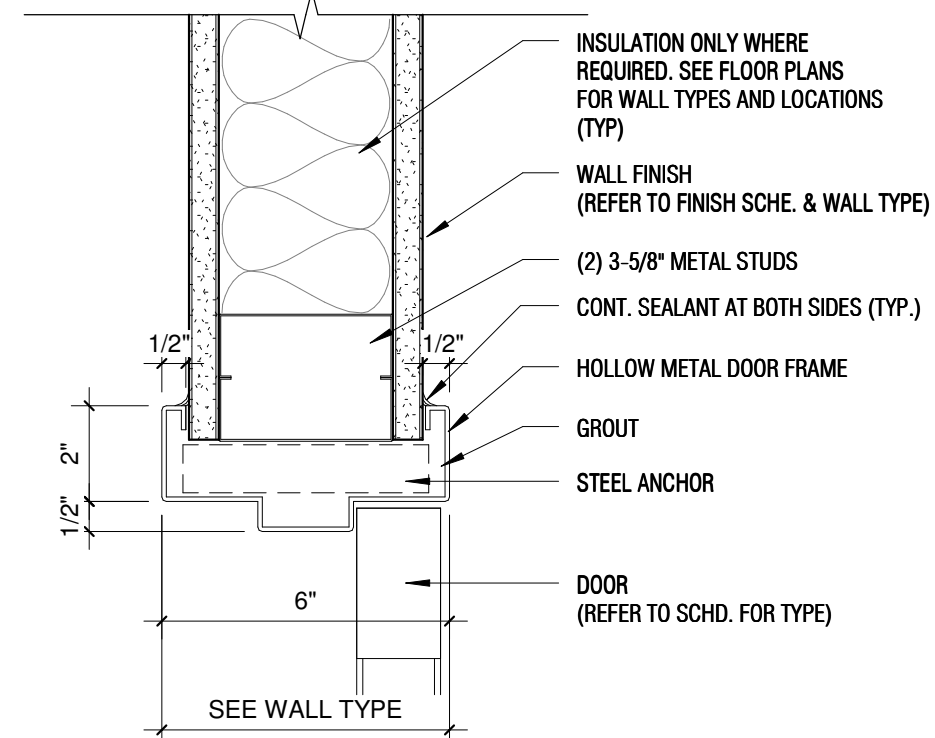
**DOOR TYPES**  
3/8" = 1'-0"

**ADDITIONAL DOOR NOTES:**

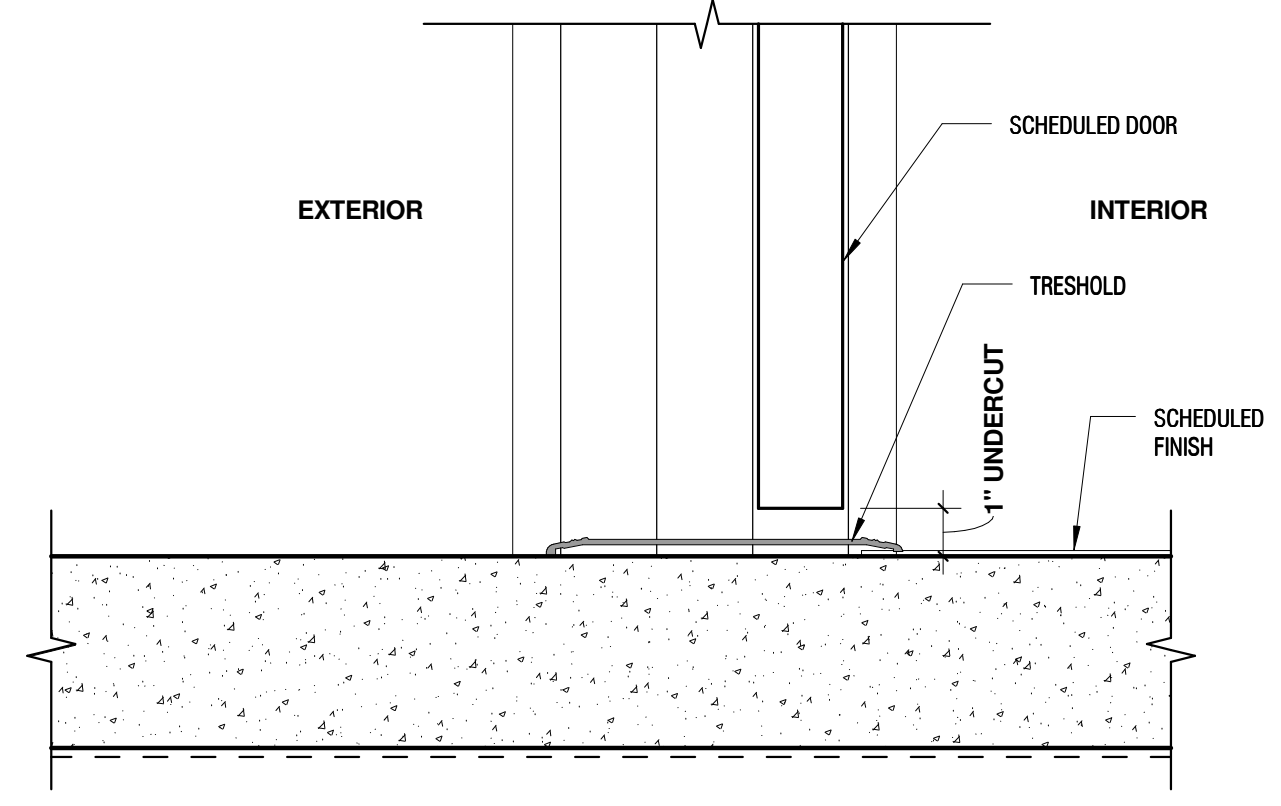
CONTRACTOR SHOULD MEASURE ALL OPENINGS PRIOR TO FABRICATE. CONTRACTOR TO PROVIDE SHOP DRAWINGS FOR ARCHITECT APPROVAL. LATCH & HANDLE SHALL BE 54" (MAX.) ABOVE FLOOR. LOCKS AND LATCHES MUST COMPLY W / N.F.P.A. 5-21.5 B (HARDWARE). PRIVACY LOCK.



**3 DOOR "A" JAMB DETAIL**  
3" = 1'-0"



**2 DOOR "A" HEAD DETAIL**  
3" = 1'-0"



**4 THRESHOLD DETAIL AT ENTRY**  
3" = 1'-0"

ROOM FINISH SCHEDULE										
Level	ROOM	NUMBER	AREA	Perimeter	Base Finish	Ceiling Finish	Floor Finish	Wall Finish	Comments	
Level 1	PROGRAM MANAGER	212AA	246 SF	63' - 5"						
Level 1	LOBBY	212BB	414 SF	84' - 9"						
Level 1	ADMIN OFFICE	212CC	250 SF	69' - 3"						
Level 1	KAREOKE ROOM	212D	611 SF	108' - 8"						
Level 1	OFFICE MANAGER	212DD	150 SF	49' - 2"						
Level 1	OFFICE	212E	152 SF	49' - 11"						
Level 1	MAHONG ROOM	212EE	874 SF	119' - 4"						
Level 1	SOCIAL WORKERS	212F	287 SF	68' - 1"						
Level 1	KITCHEN	212FF	442 SF	95' - 9"						
Level 1	CORRIDOR	212GG	1,124 SF	228' - 4"						
Level 1	RN ROOM	212H	429 SF	84' - 3"						
Level 1	OFFICE	212I	333 SF	73' - 1"						
Level 1	CORRIDOR	212J	136 SF	65' - 7"						
Level 1	WOMEN RESTROOM	212K	212 SF	110' - 2"						
Level 1	MEN RESTROOM	212L	180 SF	89' - 1"						
Level 1	JANITOR	212M	26 SF	20' - 4"						
Level 1	EMPLOYEE ROOM	212N	201 SF	63' - 11"						
Level 1	QUIET ROOM	212O	121 SF	44' - 1"						
Level 1	LAUNDRY	212P	114 SF	42' - 10"						
Level 1	NEW MEN RESTROOM	212Q	154 SF	53' - 0"	VINYL	(E)	(SBO.) RESILIENT FLOORING	PT	48" WAINSOAT FRP PANEL IN WET WALLS	
Level 1	NEW WOMEN RESTROOM	212R	267 SF	73' - 8"	VINYL	(E)	(SBO.) RESILIENT FLOORING	PT	MINOR DEMOLITION AS SHOWN IN SHEET A100. 48" WAINSOAT FRP PANEL IN WET WALL	
Level 1	QUIET ROOM	212S	136 SF	46' - 11"						
Level 1	CORRIDOR	212T	745 SF	301' - 1"						
Level 1	ACTIVITY ROOM	212U	1,316 SF	158' - 5"						MINOR DEMOLITION AS SHOWN IN SHEET A100
Level 1	PT/OT ROOM	212V	1,434 SF	163' - 3"						MINOR DEMOLITION AS SHOWN IN SHEET A100
Level 1	DINING AND ACTIVITY AREA	212W	4,146 SF	317' - 3"						
Level 1	STORAGE	212X	148 SF	48' - 9"						
Level 1	CONFERENCE ROOM	212Z	260 SF	64' - 11"						

**NOTES:**

- (SBO) AS SELECTED BY OWNER
- (E) EXISTING TO REMAIN
- ALL BLANK ITEMS CORRESPOND TO ROOMS WITH EXISTING FINISHES TO REMAIN. CONTRACTOR TO EXECUTE PATCH AND PAINT WALLS AND REPAIR FLOORS AS NEEDED FOR THE INTENDED PURPOSE OF THE BUILDING AND USE OF ROOMS.
- NO ADDITIONAL ALTERATION OR RENOVATION WILL BE PART OF THIS PROJECT.

**INTERIOR WALL BOARD SPECIFICATION:**

**WF-01**  
GYPSUM WALL BOARD ULTRALIGHT TYPE C, 5/8" THK, TAPERED, FRAMING AT 16" O.C. MIN-24" O.C. MAX. FIRE RESIST. 4 HR MAX. ASTM C1396

**WF-02**  
GYPSUM WALL BOARD TYPE M.R. (MOISTURE RESISTANT), 1/2" THK, TAPERED, FRAMING AT 16" O.C. MIN-24" O.C. MAX. FIRE RESIST. 4 HR MAX. ASTM C1396

**INTERIOR FINISH SPECIFICATION:**

**FP-1**  
CONCRETE STAIN  
GLOMARBLE  
BEECH NUT (WATER BASE STAIN- ECO STAIN)  
OR FINISH AS SELECTED BY OWNER

**LAM-1**  
LAMINATED VYNIL  
COMMERCIAL FLOORING  
ARMSTRONG  
FINISH AS SELECTED BY OWNER

**PT-1**  
INTERIOR Ultra Spec® SCUFF-X  
BENJAMIN MOORE  
WHITE OPULENCE  
OR FINISH AS SELECTED BY OWNER

**CTR-1**  
COUNTERTOP  
CORIAN  
INDUSTRY STANDARD  
OR FINISH AS SELECTED BY OWNER

**BF-1**  
BASE WALL FINISH  
4" VYNIL  
COMMERCIAL  
COLOR AS SELECTED BY OWNER

ACCESSORY AND PRODUCT SCHEDULE	
Secure Package Receiver INTERBANK EQUIPMENT Part No. / SKU: QS-PR-2020	
KITCHENETTE: SINK-01 33"x22" STAINLESS STEEL, DOUBLE BOWL, TOP MOUNTED KHOLER Verse OR APPROVED EQUAL / AS SELECTED BY OWNER	
FAUCET FONTAINE SERIES: BIANKE SINK, PULL-DOWN SPRAY MODEL # SFF-BIAK 1-BN, BRUSHED NICKEL FIN. OR APPROVED EQUAL / AS SELECTED BY OWNER	
NOTE: ACCESSORIES AND PRODUCTS IN SCHEDULE TO BE "APPROVED EQUAL"	

HARDWARE GROUP 1 N/A				
1 EA.	PRIVACY LOCKSET #D40S RHODES	SCHLAGE	613	OR APPROVED EQUAL
1-1/2 PAIR	BUTTS 4-1/2"x4-1/2" #BB179	STANLEY	613	OR APPROVED EQUAL
1 EA.	CLOSER #7500-DA	NORTON	US10B	OR APPROVED EQUAL
1 EA.	WALL STOP #409-1/2	IVES	810B	OR APPROVED EQUAL
3 EA.	SILENCER #21	IVES	GRAY	OR APPROVED EQUAL
1 EA.	COAT HOOK (AT RESTR. DOORS) #572 (MOUNT @ +6'-0" A.F.F.)	IVES	MB108	OR APPROVED EQUAL
2 EA.	KICKPLATE 10" x 34" #B400	IVES	613	OR APPROVED EQUAL

HARDWARE GROUP 2 N/A				
1 EA.	PRIVACY LOCKSET #D40S RHODES	SCHLAGE	613	OR APPROVED EQUAL
1-1/2 PAIR	BUTTS 4-1/2"x4-1/2" #BB179	STANLEY	613	OR APPROVED EQUAL
1 EA.	CLOSER #7500-DA	NORTON	US10B	OR APPROVED EQUAL
1 EA.	WALL STOP #409-1/2	IVES	810B	OR APPROVED EQUAL
3 EA.	SILENCER #21	IVES	GRAY	OR APPROVED EQUAL
1 EA.	COAT HOOK (AT RESTR. DOORS) #572 (MOUNT @ +6'-0" A.F.F.)	IVES	MB108	OR APPROVED EQUAL
2 EA.	KICKPLATE 10" x 34" #B400	IVES	613	OR APPROVED EQUAL

HARDWARE GROUP 3				
1 EA.	PRIVACY LOCKSET #D40S RHODES	SCHLAGE	613	OR APPROVED EQUAL
1-1/2 PAIR	BUTTS 4-1/2"x4-1/2" #BB179	STANLEY	613	OR APPROVED EQUAL
1 EA.	CLOSER #7500-DA	NORTON	US10B	OR APPROVED EQUAL
1 EA.	WALL STOP #409-1/2	IVES	810B	OR APPROVED EQUAL
3 EA.	SILENCER #21	IVES	GRAY	OR APPROVED EQUAL
1 EA.	COAT HOOK (AT RESTR. DOORS) #572 (MOUNT @ +6'-0" A.F.F.)	IVES	MB108	OR APPROVED EQUAL
2 EA.	KICKPLATE 10" x 34" #B400	IVES	613	OR APPROVED EQUAL

**DOOR NOTES**

- ADD SIGN ABOVE DOOR TO READ: "THESE DOORS MUST REMAIN UNLOCKED DURING BUSINESS HOURS." THE SIGN SHALL BE IN LETTERS NOT LESS THAN ONE INCH HIGH ON A CONTRASTING BACKGROUND.
- PROVIDE ACCESSIBLE SIGNAGE
- FOR EXTERIOR DOORS - MAXIMUM DOOR OPENING EFFORT - 5.0 LBS
- FOR INTERIOR DOORS - MAXIMUM DOOR OPENING EFFORT - 5.0 LBS
- ALL EXTERIOR DOORS - PROVIDE HARDWARE TO ALLOW DOORS TO BE OPENED FROM INSIDE WITHOUT KEY OR SPECIAL KNOWLEDGE OR EFFORT
- REQUIRED EXIT DOORS SHALL NOT BE PROVIDED WITH THUMB TURN DEVICES.
- FIRE RATED, NOT TO EXCEED 15 LBS. PER 11B-404-2-9 SELF CLOSING & SELF LATCHING
- ACCESSIBLE LISTED DOOR THROUGHOUT

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NOT UPDATED

NOT UPDATED

ARCHITECT.

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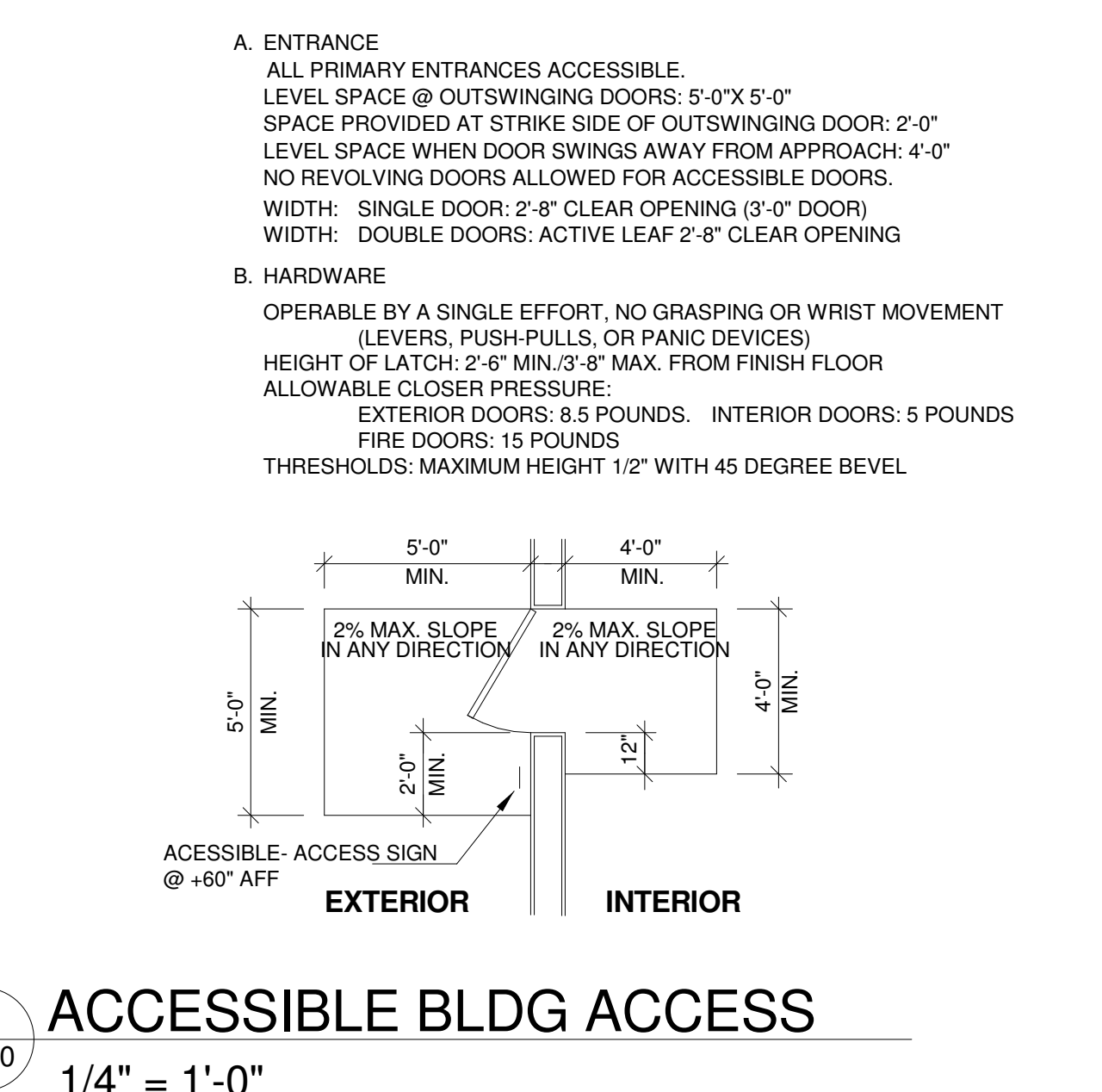
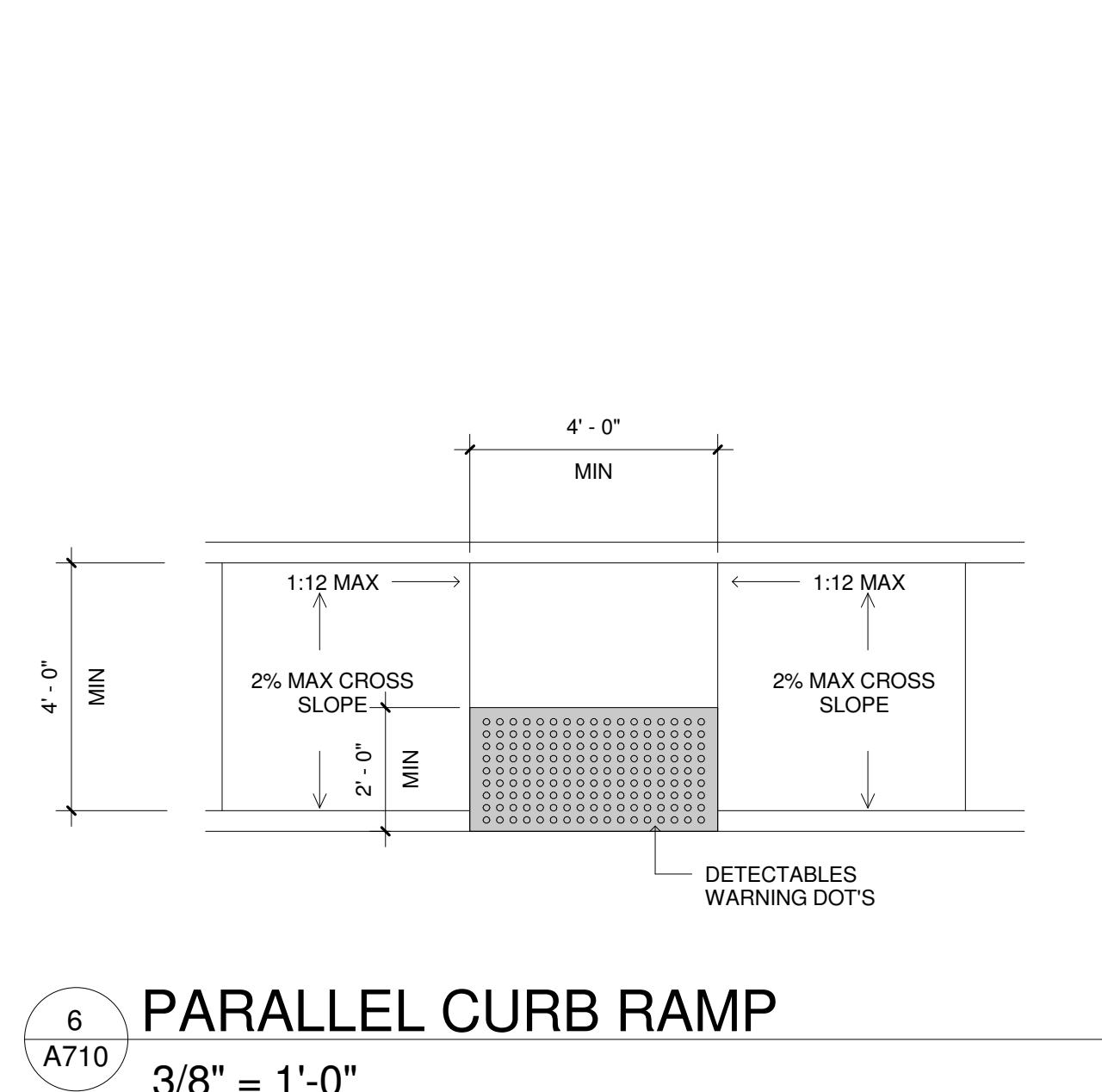
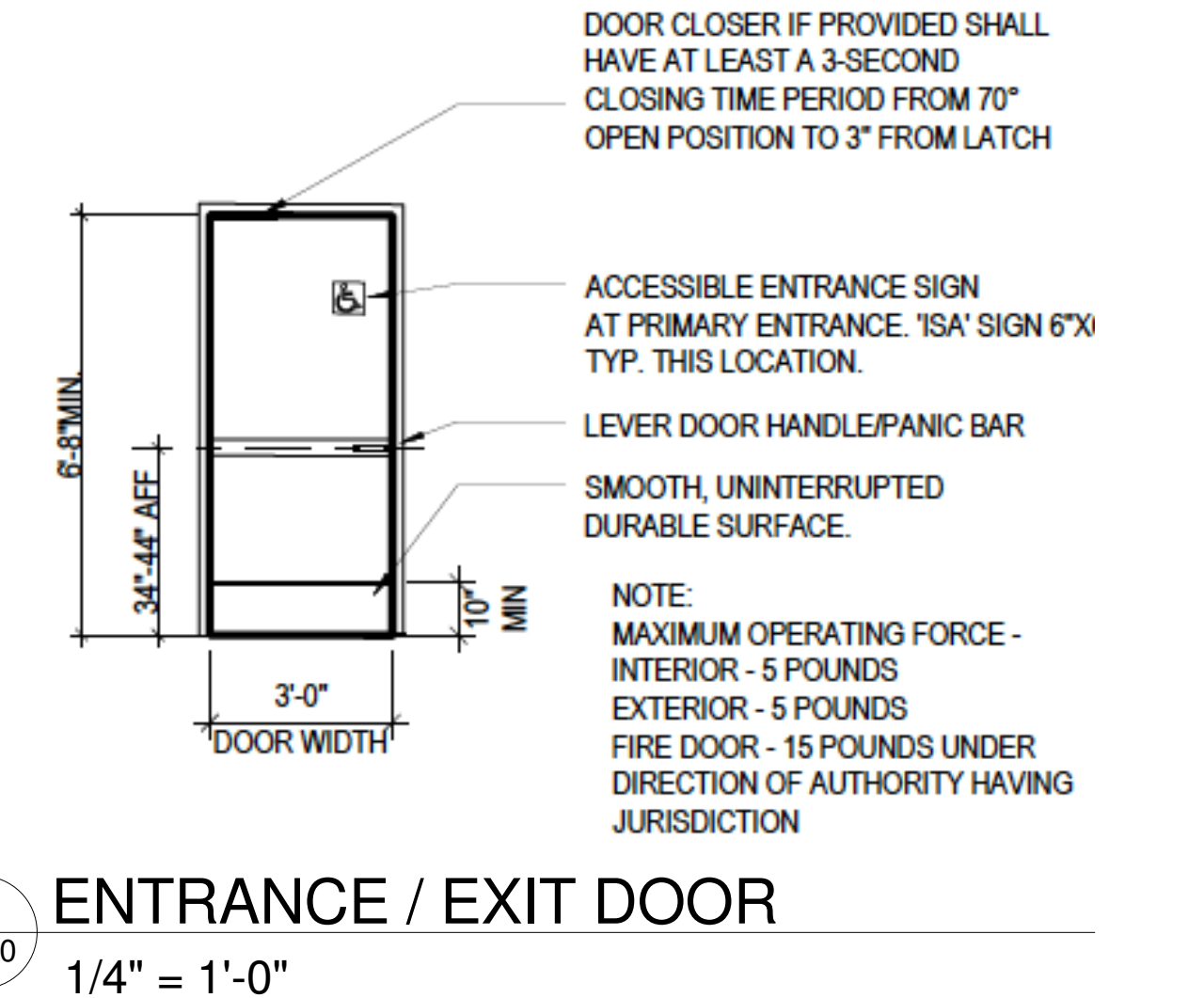
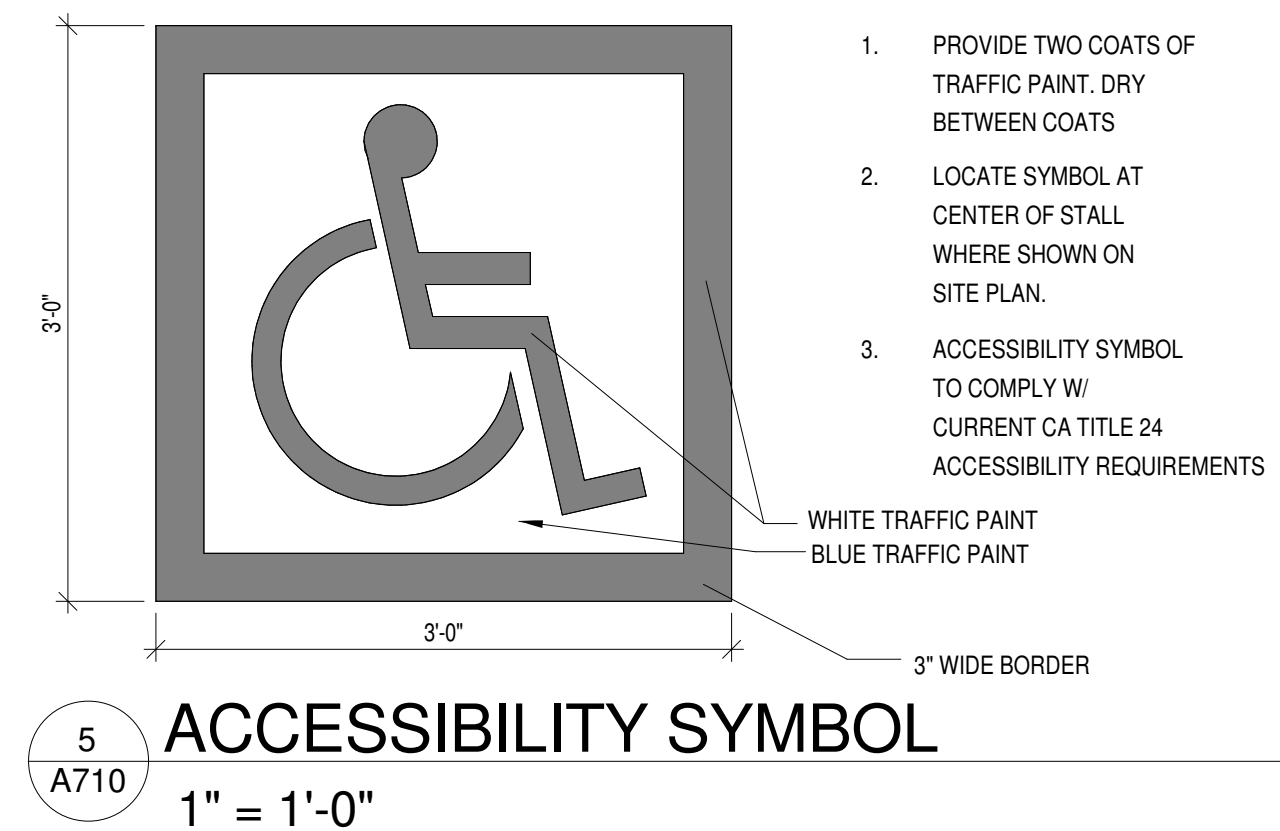
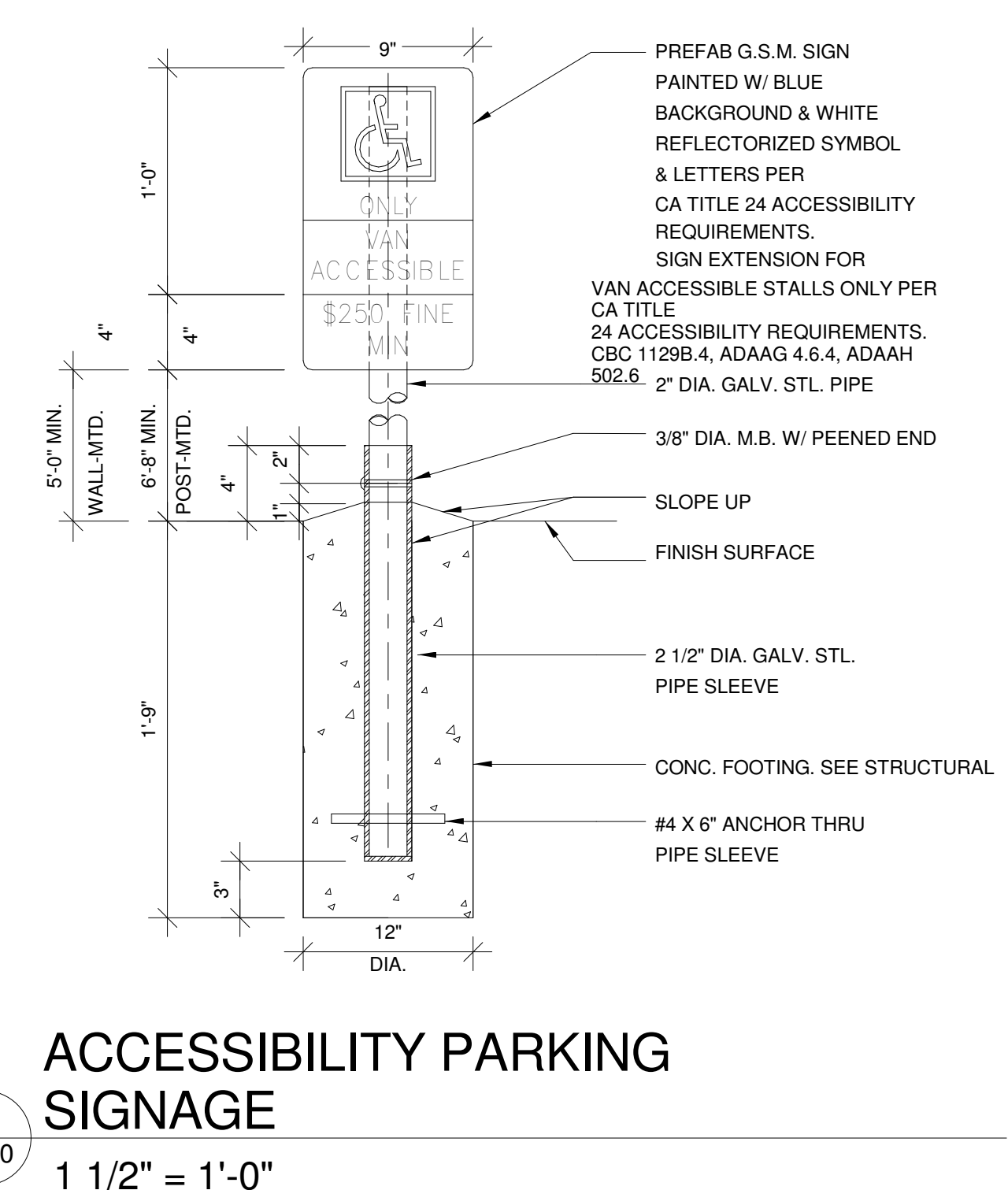
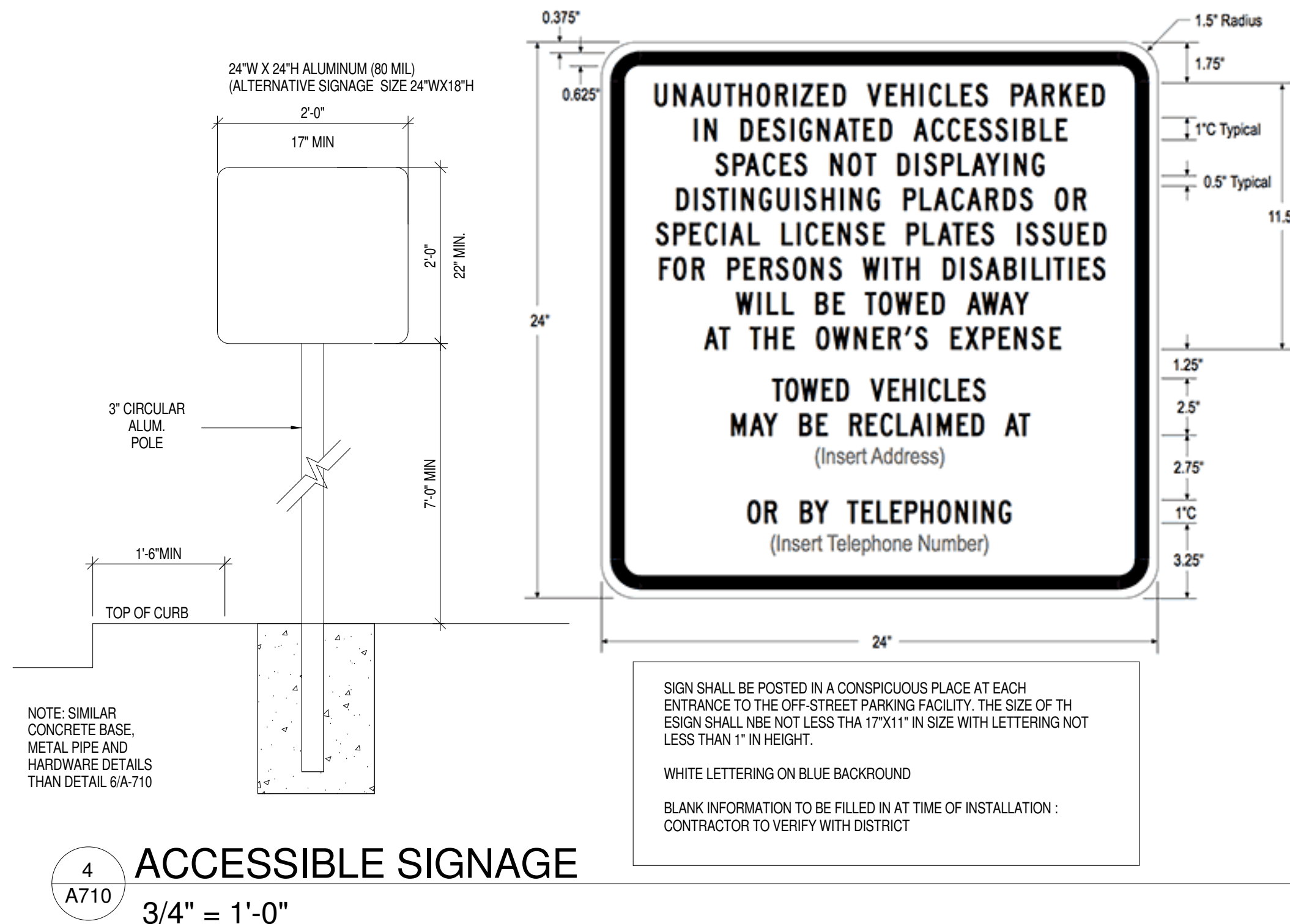
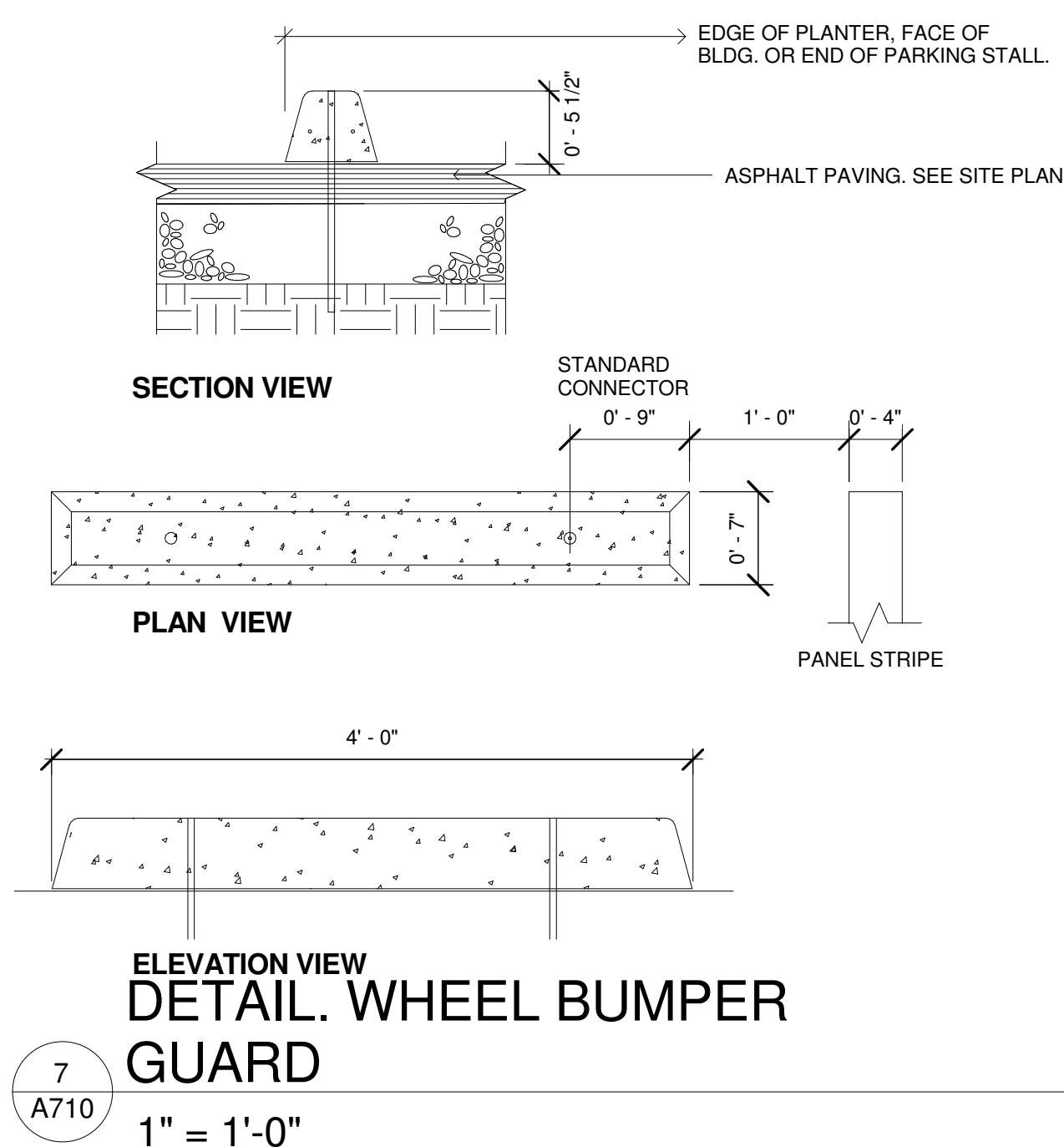
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**A600**

FINISH AND ACCESSORY SCHEDULE

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<b>ADULT DAY HEALTH CARE CENTER</b>	
ADDRESS	2101 WILLIAM STREET, SAN LEANDRO, CALIFORNIA, 94577
CLIENT	COZY NEST ADULT DAY HEALTH CARE, LLC





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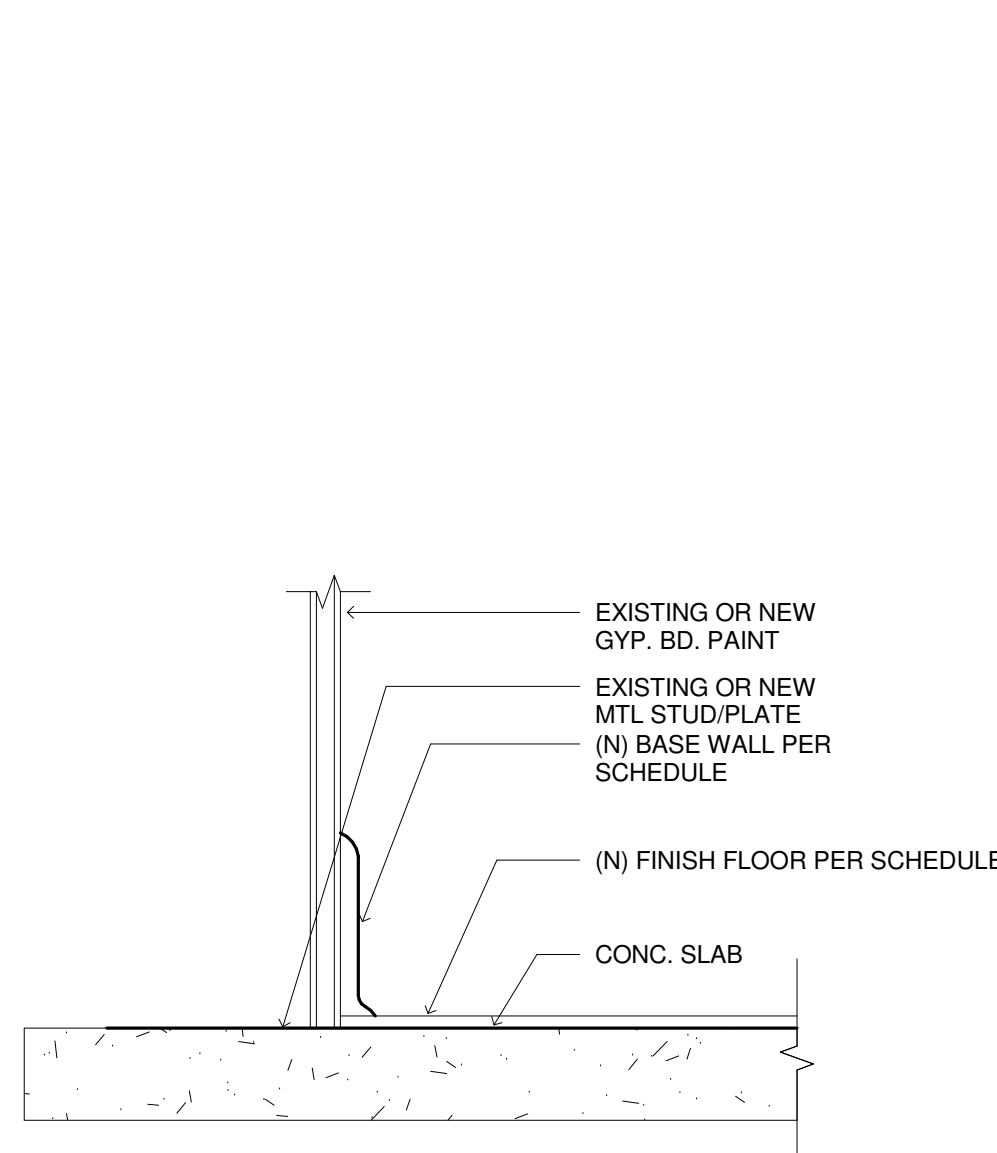
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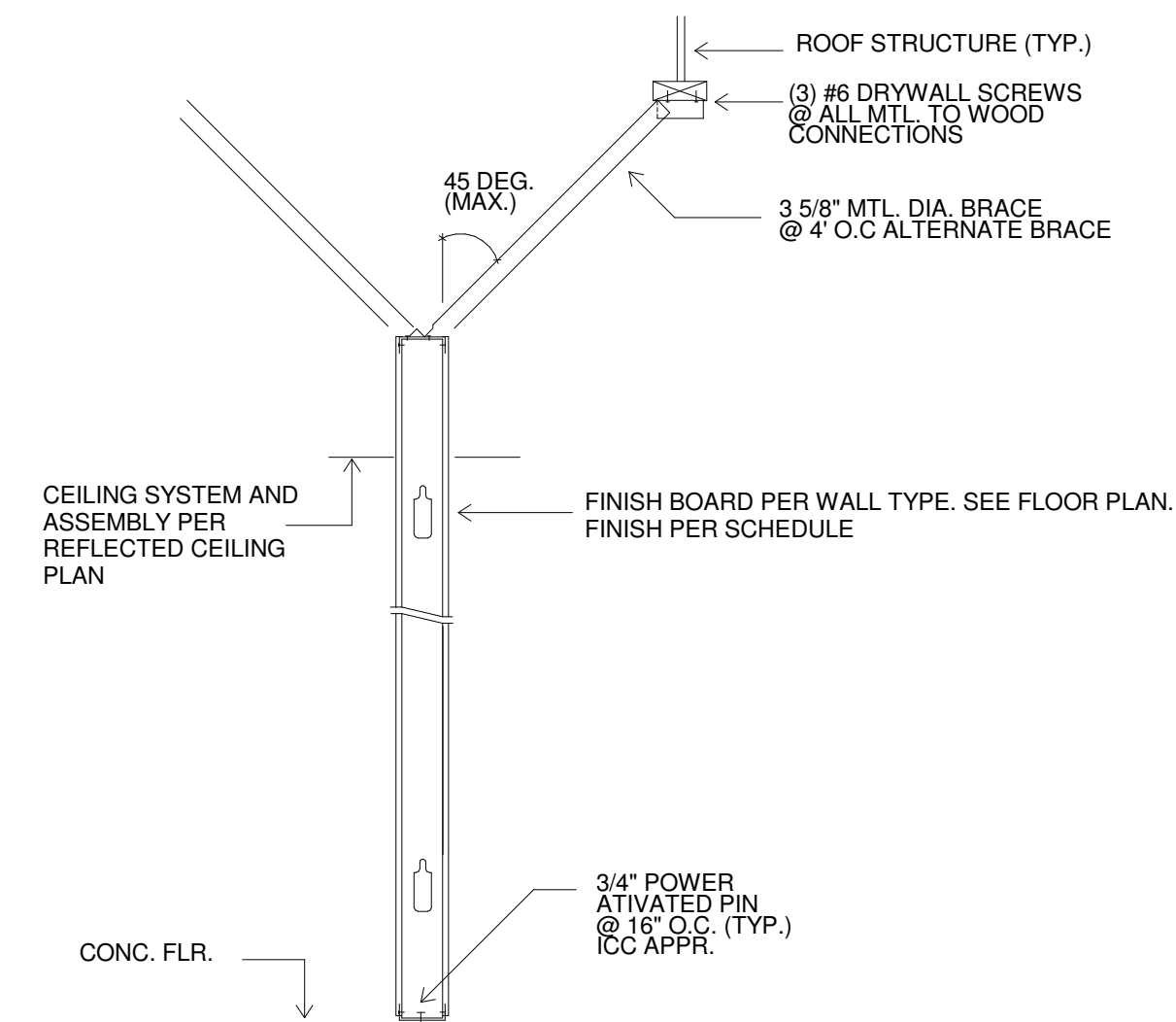
**A710**  
SITE DETAILS

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**ADULT DAY HEALTH CARE CENTER**  
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SAN LEANDRO, CALIFORNIA, 94577  
CLIENT COZY NEST ADULT DAY HEALTH CARE, LLC

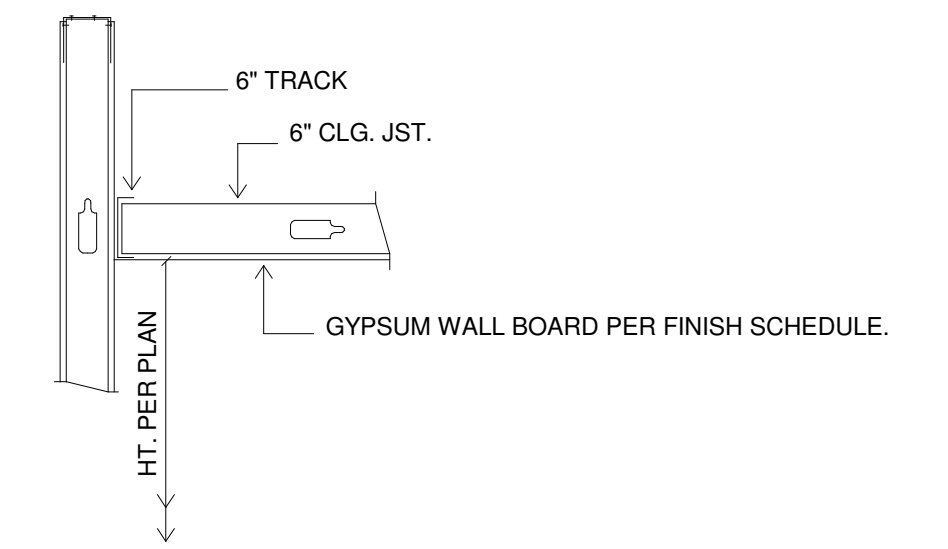




3  
A800  
**DETAIL. WALL BASE**  
3" = 1'-0"

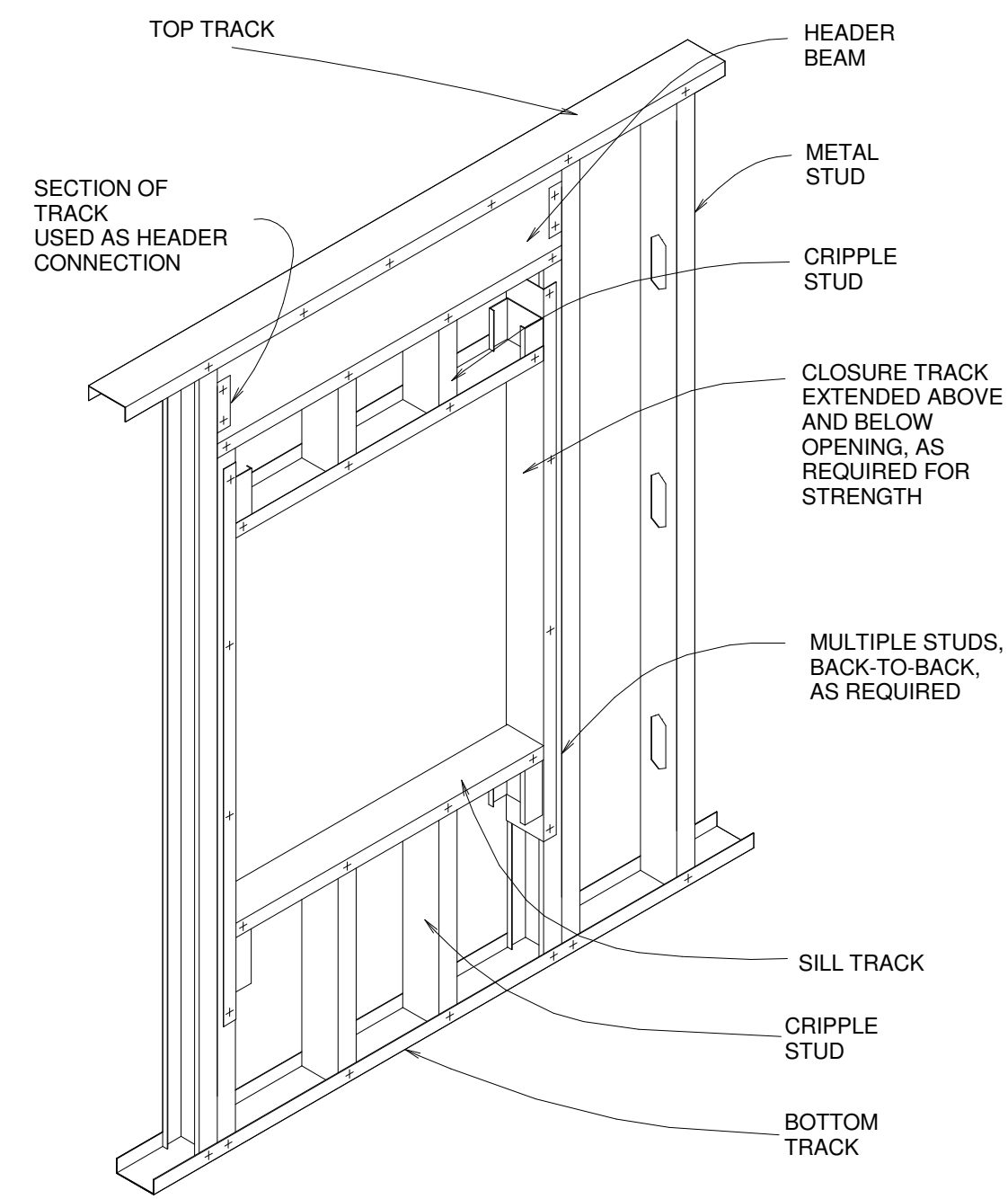


2  
A800  
**DETAIL. WALL BRACING DETAILS**  
1/4" = 1'-0"

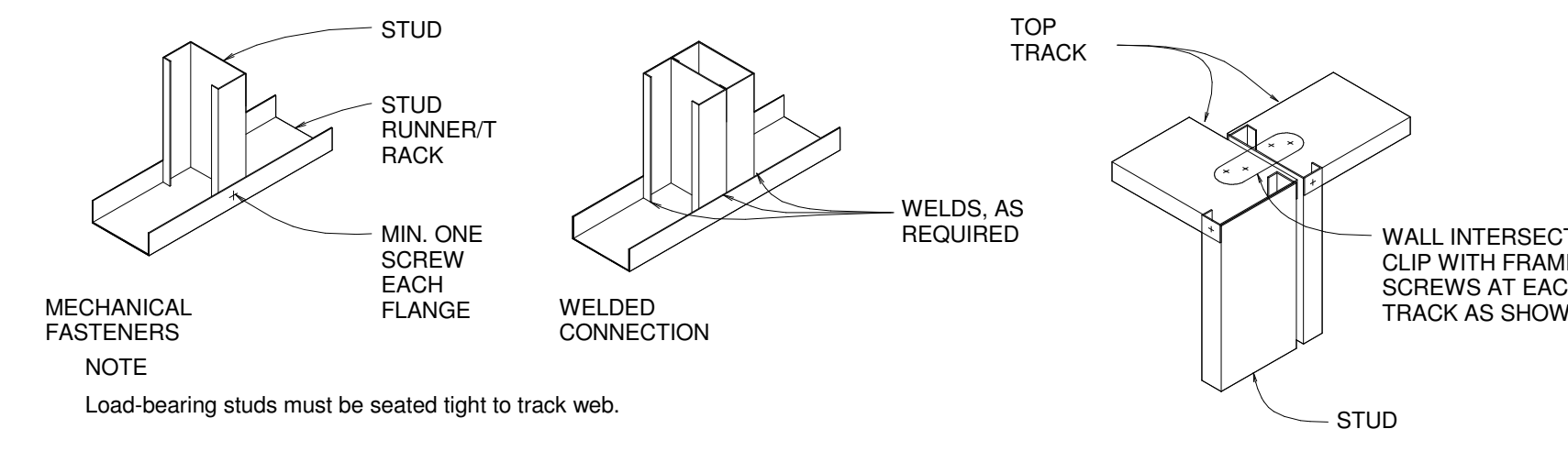
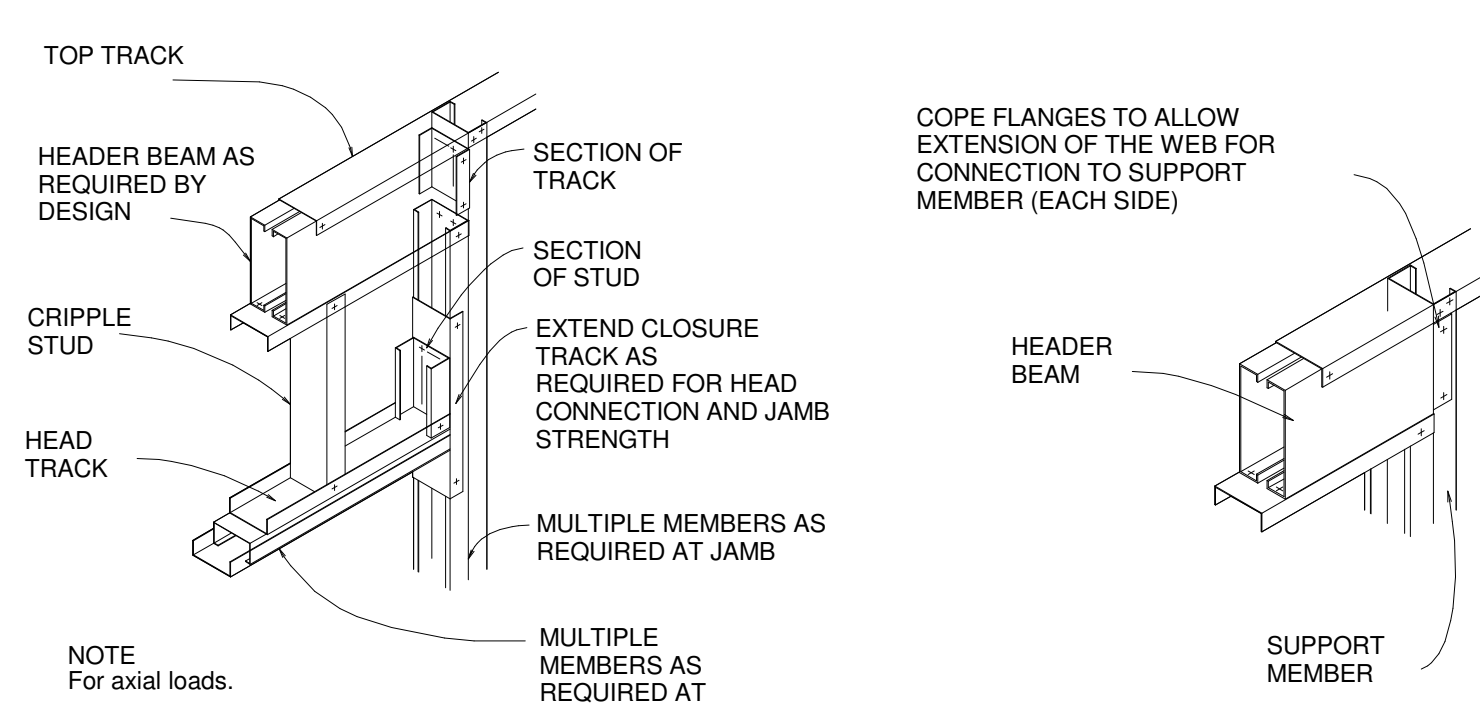
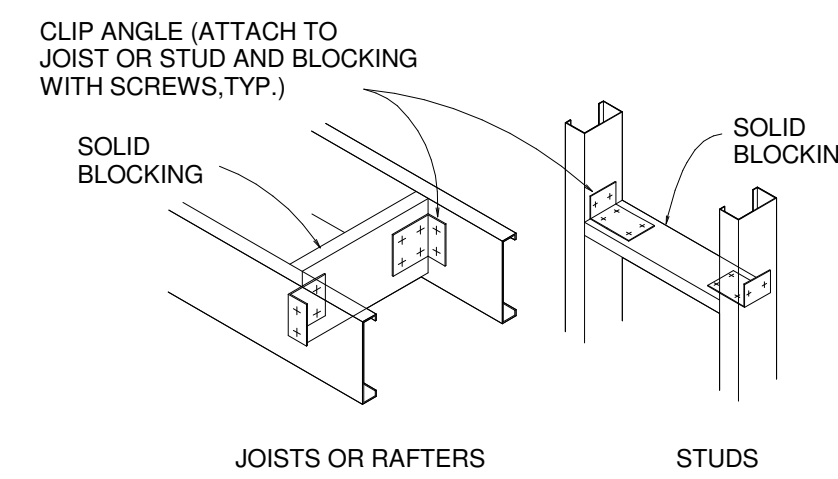
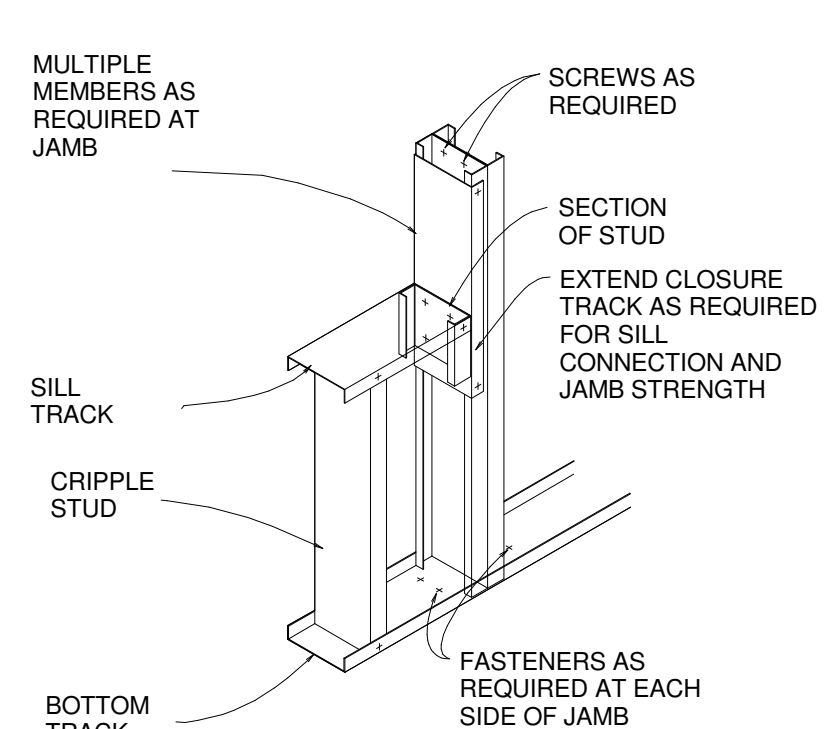


NOTE: CEILING TYPES, MOUNTING HEIGHTS AND FINISHES PER REFLECTED CEILING PLAN

1  
A800  
**DETAIL. ACT AND GWB MOUNTING**  
1/4" = 1'-0"



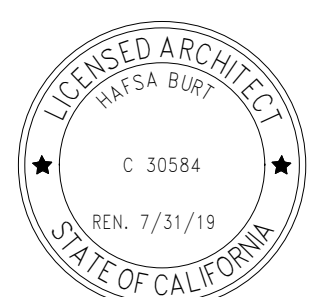
5  
A800  
**LIGHT GAGE INTERIOR FRAMING TYPICAL DETAILS**  
NTS



WALL TYPE	UL # U419	FIRE RATING
	DESIGN U404	1 HR.
<p><b>1 FLOOR AND CEILING RUNNERS:</b> CHANNEL SHAPED, 3-5/8 INCH WIDE, 1-1/4 INCH LEGS, FORMED FROM MIN No 25 MSG GALVANIZED STEEL, ATTACHED TO FLOOR AND CONC. SLAB WITH FASTENERS SPACED 12 INCHES O.C.</p> <p><b>2 STEEL STUDS:</b> CHANNEL SHAPED, FABRICATED FROM MIN 25 MSG GALV STEEL, 3-5/8 INCH WIDTH, MIN 1-1/2 INCH. FLANGES AND 1/4 INCH RETURN, SPACED A MAX OF 12 INCH O.C. STUDS TO BE CUT 3/8 TO 3/4 INCH LESS THAN ASSEMBLY HEIGHT.</p> <p><b>3 BATTS AND BLANKETS:</b> MIN 3 INCH THICK MINERAL WOOL INSULATION BATTS, FRICTION-FITTED BETWEEN STUDS.</p> <p><b>4 GYPSUM WALLBOARD:</b> (1) LAYER OF 5/8 INCH THICK, 4FT WIDE, ATTACHED TO STEEL STUDS AND RUNNERS WITH 1 INCH LONG TYPE S-12 SCREWS SPACED MAX 8 INCH O.C. ON OPPOSITE SIDES OF ASSEMBLY.</p> <p><b>5 JOINT AND TAPE COMPOUND:</b> VINYL DRY OR PREMIXED JOINT COMPOUND, APPLIED IN TWO COATS TO JOINTS AND SCREW HEAD, PAPER TAPE, 2 INCH WIDE, EMBEDDED IN FIRST LAYER OF COMPOUND OVER ALL JOINTS.</p>		

4  
A800  
**WALL TYPES**  
3/4" = 1'-0"

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**A800**  
WALL TYPES,  
CEILING DETAILS,  
MOUNTING DETAILS

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