

RESOLUTION NO. PC-2024-002

RESOLUTION OF THE PLANNING COMMISSION OF THE CITY OF SANTA ROSA RECOMMENDING TO THE CITY COUNCIL THE ADOPTION OF A ZONING CODE TEXT AMENDMENT TO TITLE 20 OF THE SANTA ROSA CITY CODE, SECTION 20-42.060, COMMUNITY CARE AND HEALTH CARE FACILITIES, TO EXEMPT SENIOR CARE FACILITIES FROM THE COMMUNITY CARE FACILITY OVERCONCENTRATION LIMITATION AND SPACING REQUIREMENT, AND SECTION 20-70.020, GLOSSARY, TO MODIFY THE DEFINITION OF COMMUNITY CARE FACILITY TO ALLOW PALLIATIVE CARE AND END OF LIFE MEDICAL TREATMENTS – FILE NUMBER PRJ23-016

WHEREAS, an application was submitted on August 3, 2023, requesting the approval of a Zoning Code Text Amendment to amend Title 20 of the Santa Rosa City Code, Section 20-42.060, Community Care and Health Care Facilities, to remove the overconcentration and spacing requirement for age-restricted senior care facilities, and Section 20-70.020, Glossary, to modify the definition of Community Care Facility to allow palliative care and end of life medical treatments; and

WHEREAS, City Code Section 20-42.060 currently includes spacing and concentration limitations for all types of community care facilities that serve seven or more clients, which requires that community care facilities maintain a minimum distance of 300 feet in all directions from any other community care facility, including age-restricted facilities (senior care); and

WHEREAS, the California Health and Safety Code (enforced by the Department of Social Services) aims to prevent the overconcentration of residential facilities that, “impair the integrity of residential neighborhoods;” and

WHEREAS, the Department of Social Services (Department) may deny an application for a new residential facility license if the Department determines that the location would result in overconcentration to an existing residential facility; and

WHEREAS, the California Health and Safety Code defines “overconcentration” as residential facilities that are separated by a distance of 300 feet or less, as measured from any point upon the outside walls of the structures housing those facilities; and

WHEREAS, based on special local needs and conditions, the Department may approve a separation distance of less than 300 feet with the approval of the city or county in which the proposed facility will be located; and

WHEREAS, the State of California Health and Safety Code 1520.5(f) states that “foster family homes and residential facilities for the elderly shall not be considered in determining overconcentration of residential facilities, and license applications for those facilities shall not be denied upon the basis of overconcentration;” and

WHEREAS, amending City Code Section 20-42-060 to exempt age-restricted senior care

facilities would be consistent with current California Health and Safety Code permits; and

WHEREAS, City Code Section 20-70.020, Glossary, defines Community Care Facility and limits such facilities to provide only non-medical residential care. Because senior community care facilities often include palliative or end of life care, the proposal includes a modification to the definition of Community Care Facility to allow palliative care and end of life medical treatments; and

WHEREAS, on January 11, 2024, the Planning Commission held a duly noticed public hearing to consider recommending to the City Council adoption of Zoning Code text amendments to Title 20 of the Santa Rosa City Code, Section 20-42.060, Community Care and Health Care Facilities, to exempt senior care facilities from the community care facility overconcentration limitation, and Section 20-70.020, Glossary, to allow palliative care and end of life medical treatments, at which time all those wishing to be heard were allowed to speak; and

NOW, THEREFORE, BE IT RESOLVED, that based on the evidence presented and the records and files herein, and pursuant to City Code Section 20-64.050 (Findings), the Planning Commission of the City of Santa Rosa finds and determines:

- A. Chapter 9 – Youth and Family (YF) section of the General Plans states that: “Senior citizens are valuable economic, social, and political contributors to our society, often with a unique set of needs and perspectives. The community service needs of the senior citizen population can be more substantial and specialized. The majority of senior citizens are retired or semi-retired. While senior citizens may enjoy more leisure time, they may also be limited by fixed incomes, less mobility, and health problems. It is important for the city to address these needs which arise due to aging. They include affordable housing, health and day care, transportation, recreation, and social services (9-4).” The proposed amendment is consistent with the goals and policies of all elements of the General Plan, and any applicable specific plan in that the proposed Zoning Code Text Amendment would further General Plan Goal YF-E-1, which states: “Continue to develop, manage, and expand the city’s senior services and programs as an important social service within the community.” The proposed Zoning Code Text Amendment would remove the overconcentration and location requirements for Community Care Facilities serving seniors and allow for medical services in facilities providing palliative care and/or end of life medical care for seniors within those facilities, therefore, serving the citizens of Santa Rosa.
- B. The proposed amendment would not be detrimental to the public interest, health, safety, convenience or welfare of the City in that the proposed amendment would allow more age-restricted care facilities to be established, as needed, for the aging population of the City. This would increase specialized housing that includes elderly care and would promote jobs in specialized elderly care. The State of California does not view residential facilities for the elderly as a use that will “impair the integrity of residential neighborhoods” and does not have an overconcentration or spacing requirement like it does for other types of residential care facilities. Removing the spacing and overconcentration limit for age-restricted care would bring the City’s Code in compliance

with State Health and Safety Code.

- C. The proposed amendments are exempt from the requirements of the California Environmental Quality Act (CEQA) per CEQA Guidelines Section 15183 in that the proposed Zoning Code text amendment is consistent with General Plan 2035, the project relies upon the General Plan 2035 Environmental Impact Report (November 3, 2009, SCH No. 2008092114), and is consistent with CEQA Section 15183 (Projects Consistent with a Community Plan, General Plan, or Zoning). The Environmental Impact Report for the General Plan 2035 analyzed impacts to Traffic, Air Quality and Green House Gases, and Noise for the implementation of the General Plan.
- D. The proposed amendment is internally consistent with other applicable provisions of this Zoning Code in that the proposed amendment creates opportunities for development of additional care facilities for seniors/the elderly who need assisted living or specialized care, while maintaining internal consistency with the Zoning Code. The proposed changes to Sections 20-42.060 and 20-70.020 would not allow any new land uses or regulations. The amendment would align the Zoning Code with current California Health and Safety Code requirements, while continuing to support multiple City Zoning Code and General Plan objectives of creating incentives for development of housing and services for seniors, promoting more environmentally sustainable urban infill, and reducing travel costs when seeking these types of uses.

BE IT FURTHER RESOLVED that the Planning Commission of the City of Santa Rosa recommends that the City Council adopt a Zoning Code text amendment to amend Title 20 of the Santa Rosa City Code, Section 20-42.060, Community Care and Health Care Facilities, as set forth in Exhibit A attached hereto, to remove the overconcentration and spacing requirement for age-restricted senior care facilities, and Section 20-70.020, Glossary, to modify the definition of Community Care Facility to allow palliative care and end of life medical treatments.

REGULARLY PASSED AND ADOPTED by the Planning Commission of the City of Santa Rosa on the 11th day of January 2024, by the following vote:

AYES: (6) Chair Weeks, Vice Chair Duggan, Commissioner Carter, Commissioner Cisco, Commissioner Holton, and Commissioner Peterson

NOES: (0)

ABSTAIN: (0)

ABSENT: (1) Commissioner Sanders

APPROVED: 
[Karen Weeks \(Feb 1, 2024 13:41 PST\)](#)
KAREN WEEKS, CHAIR

ATTEST: 
JESSICA JONES, EXECUTIVE SECRETARY

Exhibit A – Proposed Zoning Code Text Amendment

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(strike-out and underline format)

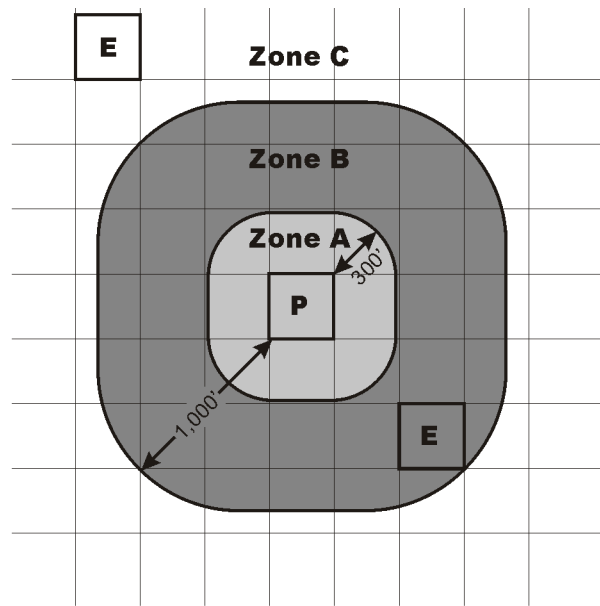
§ 20-42.060. Community care and health care facilities.

Community care and health care facilities shall comply with the requirements of this section, where allowed by Division 2 (Zoning Districts and Allowable Land Uses).

- A. Purpose. The provisions of this Section are intended to facilitate the integration of mentally and physically handicapped persons who are in family residential situations into community life, as mandated by State law applicable to a chartered city, while avoiding the over-concentration of these facilities in any particular neighborhood. The purpose of regulating the location of community care and health care facilities is to permit these services to be available at locations within Santa Rosa, as mandated by State law applicable to a charter city, that are convenient to the public, while requiring the mitigation of or avoiding any adverse effects of the facilities upon surrounding properties to the extent permitted by law.
- B. Application requirements. The following shall be included in an application for a community care facility Minor Conditional Use Permit:
 1. One copy of a completed Conditional Use Permit application form. The application shall indicate number of persons to be cared for; number of employees; hours of operation and outdoor playtime; and State license number. The application and site plan shall clearly show conformance to standards.
 2. One copy of a site plan (8-1/2" x 11") showing: location and dimensions of existing residence and other structures, including: fencing; outdoor play structures and equipment; distance to property line; parking areas and number of spaces both on-site and off-site spaces contiguous to property lines; access and traffic circulation.
 3. An accurate traffic circulation plan showing parking, circulation and drop-off areas.
- C. Conditions of approval. The operation of a community care or health care facility serving seven or more persons, in compliance with a Minor Conditional Use Permit as required by Division 2, may be conditioned or limited by the permit, except as may be prohibited by State law applicable to a chartered city, in any manner deemed necessary by the review authority to ensure the preservation of the health, safety and general welfare of the community and the neighborhood where the facility is proposed. The scope of permit review and approval shall be limited as required by State law to the following.
 1. Spacing and concentration. No proposed community care/health care facility shall be located closer than 300 feet in all directions from any other community care facility, as measured from any point on the exterior walls of both structures.

In no case shall a residential parcel be directly abutted by community care facilities on two or more sides.

2. Over-concentration of facilities. The over-concentration of community care/ health care facilities in an area shall constitute cause for the denial of a Minor Conditional Use Permit, where it is determined that overconcentration will not be mitigated by conditions that might be imposed upon the Minor Conditional Use Permit and other measures instituted by the applicant. As used in this Section, a condition of "overconcentration" arises wherever two or more community care facilities would be located at a distance of 1,000 feet or less from each other, as measured from any point upon the outside walls of the structures housing the facilities.



Zone A: Not permitted if an existing facility is located within this zone.
Zone B: May be permitted in this zone if over-concentration issues are mitigated.
Zone C: No concentration issue in this zone.

- E Existing Facility
- P Proposed Facility

Figure 4-1—Overconcentration of Community Care Facilities

3. Age-Restricted Housing or Age-Restricted Care Facilities for Qualifying Residents, as defined in 20-70, are exempt from the spacing and overconcentration requirement of Section 20-42.060 C.1. and C.2.
- D. Required findings for approval. No Minor Conditional Use Permit for a community care/health care facility shall be granted unless the review authority first makes all of the following findings, in addition to those required by Section 20-52.050 (Conditional Use Permits and Minor Conditional Use Permits):
1. That the facility complies with all applicable requirements of this Section; and

2. The facility complies with all applicable building and fire code provisions adopted by the State and administered by the City Fire Marshal, and California Department of Social Services licensing requirements.
- E. Notification of proposed action. Not less than 10 working days prior to the date on which the decision will be made on the application, the City shall provide public notice in compliance with Section 20-52.050 (Conditional Use Permits and Conditional Minor Conditional Use Permits) to the applicant, and all owners of property within a 100-foot radius of the exterior boundaries of the proposed parcel. The notice shall state that no hearing on the application shall be held prior to the decision, unless requested by the applicant or owners of property described above.

§ 20-70.020. Definitions of specialized terms and phrases.

Community Care Facility. A facility, place, or building that is maintained and operated to provide non-medical residential care, ~~(allowing palliative care or end of life care-medical treatment)~~ which may include home finding and other services, for children and/or adults, including: the physically handicapped; mentally impaired, mentally disordered, or incompetent; developmentally disabled; court wards and dependents; neglected or emotionally disturbed children; the addicted; and the aged. **Notwithstanding the above, end of life care, including palliative care, shall be allowed at senior care facilities.**









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Final Audit Report

2024-02-01

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