

Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 019200673
Report Date: 05/28/2026
Date Signed: 05/28/2026 03:11:48 PM

Substantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION E BAY DELTA AC/SC, 1515 CLAY STREET, STE. 310 OAKLAND, CA 94612
COMPLAINT INVESTIGATION REPORT	

This is an official report of an unannounced visit/investigation of a complaint received in our office on **02/10/2026** and conducted by Evaluator Lori Alexander-Washington

PUBLIC	COMPLAINT CONTROL NUMBER: 15-AS-20260210153003
FACILITY NAME: D'NALOR CARE HOMES, LLC	FACILITY NUMBER: 019200673
ADMINISTRATOR: WILSON, ROLAND	FACILITY TYPE: 740
ADDRESS: 2706 106TH AVE	TELEPHONE: (510) 756-6122
CITY: OAKLAND	ZIP CODE: 94605
CAPACITY: 6	DATE: 05/28/2026
	UNANNOUNCED TIME BEGAN: 02:15 PM
MET WITH: Roland Wilson, Licensee/Administrator	TIME COMPLETED: 03:30 PM

ALLEGATION(S):

1	Licensee allowing three residents to share a single bedroom.
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INVESTIGATION FINDINGS:

1	On 05/28/2026 at 2:15PM, Licensing Program Analyst (LPA) L. Alexander conducted a subsequent visit
2	with Administrator, Roland Wilson, to deliver the findings of the above allegation. LPA explained the
3	purpose of the visit with Mr. Wilson.
4	
5	During the investigation, the Department obtained and reviewed the following documents from the facility:
6	Register of Facility Residents dated 07/01/2025; Personnel Report (LIC 500) dated 01/31/2026; emails
7	titled "R-3.1 Approval Not Requiring Automatic Sprinklers" dated 10/12/2018 and 10/02/2019; City of
8	Oakland Fire Marshal letter dated 10/12/2018 regarding "Exception Request for Automatic Sprinklers on
9	R-3.1"; copies of RCFE licenses reflecting capacity increases from four (4), five (5), and six (6) residents;
10	City of Oakland Fire Marshal Fire Life Safety Inspection letter dated 11/25/2019; facility sketch; and
11	Program Flexibility waiver request dated 04/07/2026.
12	
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Substantiated	Estimated Days of Completion:
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SUPERVISORS NAME: Bennett Fong	
LICENSING EVALUATOR NAME: Lori Alexander-Washington	
LICENSING EVALUATOR SIGNATURE:	DATE: 05/28/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 05/28/2026

This report must be available at Child Care and Group Home facilities for public review for 3 years.
LIC9099 (FAS) - (06/04) Page: 1 of 3
Control Number 15-AS-20260210153003

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COMPLAINT INVESTIGATION REPORT (Cont)	

FACILITY NAME: D'NALOR CARE HOMES, LLC **FACILITY NUMBER:** 019200673
VISIT DATE: 05/28/2026

NARRATIVE	
1	LIC9099-C (Page 2)
2	
3	Allegation: Licensee allowing three residents to share a single bedroom.
4	Finding: Substantiated
5	
6	On 02/10/2026, Witness 1 (W1) reported that on 02/03/2026, an on-site audit was
7	conducted at D'Nalor Care Homes, LLC. During the physical inspection of the facility,
8	it was observed that one resident bedroom was occupied by three residents. On
9	02/18/2026, Staff 1 (S1) stated that the facility had been granted a fire clearance
10	permitting three residents to share a single bedroom.
11	
12	LPA reviewed facility records, including fire clearance documentation, RCFE
13	licenses, facility sketches, and correspondence from the City of Oakland Fire
14	Marshal's Office. However, the documents reviewed did not support or validate that
15	an approved fire clearance exception had been granted allowing three residents to
16	occupy one bedroom. Pursuant to California Code of Regulations (CCR), Title 22,
17	Division 6, Chapter 8, Section 87307(a)(2)(D) states:
18	
19	"Resident bedrooms shall be provided which meet, at a minimum, the following
20	requirements: Not more than two residents shall sleep in a bedroom."
21	
22	Based on LPA observations, interviews conducted and records reviewed, the
23	preponderance of evidence standard has been met. Therefore, the above allegation
24	is found to be SUBSTANTIATED . California Code of Regulations (Title 22, Division
25	6, Chapter 8), are being cited on the attached LIC 9099D.
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27	Exit interview conducted. Appeal Rights and a copy of this report provided.
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LIC9099 (FAS) - (06/04) Page: 2 of 3
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COMPLAINT INVESTIGATION REPORT (Cont)

310
OAKLAND, CA 94612

FACILITY NAME: D'NALOR CARE HOMES, LLC
DEFICIENCY INFORMATION FOR THIS PAGE:

FACILITY NUMBER: 019200673
VISIT DATE: 05/28/2026

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
Type B 06/11/2026 Section Cited CCR 87307(a)(2)(D)	1 87307 Personal Accommodations and 2 Services 3 (a) Living accommodations... The 4 facility shall...provide comfortable living 5 accommodations and privacy for the 6 residents... (2) Resident bedrooms shall 7 be provided which meet, at a minimum, the following requirements: (D) Not more than two residents shall sleep in a bedroom. This requirement is not met as evidenced by:	1 Administrator agrees to ensure 2 compliance by placing another bed in 3 Bedroom #1. Administrator will send a 4 photo of new bedroom set-up to CCLD 5 by POC due date. 6 7
	8 Based on observations, interviews, and 9 records reviewed, the Licensee failed to 10 ensure compliance with California Code 11 of Regulations, Title 22, Section 12 87307(a)(2)(D), which requires that no 13 more than two residents sleep in a 14 bedroom. During the investigation, it was determined that three residents were occupying one bedroom without documentation supporting an approved fire clearance exception. This poses a potential risk to the health, safety, and personal rights of residents in care.	8 9 10 11 12 13 14
	1 2 3 4 5 6 7	1 2 3 4 5 6 7
	1 2 3 4 5 6 7	1 2 3 4 5 6 7

Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

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