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Department of

SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 342701040
Report Date: 06/02/2026
Date Signed: 06/02/2026 04:21:30 PM

COMPREHENSIVE INSPECTION

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **FACILITY EVALUATION REPORT**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SACRAMENTO SOUTH ASC, 9835 GOETHE ROAD, SUITE 100 SACRAMENTO, CA 95827

FACILITY NAME:	BRUCEVILLE POINT		FACILITY NUMBER:	342701040
ADMINISTRATOR/ DIRECTOR:	MARIANNE RICHARDSON		FACILITY TYPE:	740
ADDRESS:	9730 BACKER RANCH ROAD		TELEPHONE:	(916) 226-5300
CITY:	ELK GROVE	STATE: CA	ZIP CODE:	95757
CAPACITY: 200		CENSUS: 140	DATE:	06/02/2026
TYPE OF VISIT:	Case Management - Annual Continuation	UNANNOUNCED	TIME VISIT/ INSPECTION BEGAN:	01:00 PM
MET WITH:	Marianne Richardson		TIME VISIT/ INSPECTION COMPLETED:	04:30 PM

NARRATIVE

On June 2, 2026, Licensing Program Analyst, Arvin Villanueva (LPA), arrived unannounced at this facility to conduct a case management visit to continue to annual inspection that was initiated on May 27, 2026. LPA met with Business Office Director, Breah Taylor (OD), and Event/Activity Director, Jaime Cervantes (EA), and stated the purpose of the visit. The Executive Director/Administrator, Marianne Richardson (AD), was unable to be present during this visit.

Overview: Facility is a three-story building located in a residential neighborhood. Facility is licensed to serve up to 200 elderly residents, 150 of which may be non-ambulatory and 10 may be bedridden. Any unit on the first floor can be for bedridden use; any unit on the first and second floor may be for non-ambulatory use; and any unit on all three floors may be for ambulatory use. Delayed egress is cleared in the Memory Care area only. Facility has a current hospice waiver for 10 residents.

Physical Inspection: Areas inspected include, but not limited to, the kitchen, resident units, resident bathrooms, dining room and outdoor areas.

LPA and AD inspected all three floors. Four resident units were inspected, three in Assisted Living and two in the Memory Care area. Each resident unit has its own bathroom. Per observation, bathrooms are equipped with non-skid flooring and grab bars. Faucet, toilet and shower are in working condition. Hot water temperatures were taken in resident bathrooms and were between 114 and 116 degrees Fahrenheit. Each unit has its own air and heater and can be controlled by residents. Hallway temperature was maintained at 72 degrees Fahrenheit throughout this visit.

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NAME OF LICENSING PROGRAM MANAGER: Stephen Richardson

NAME OF LICENSING PROGRAM ANALYST: Arvin Villanueva
LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 06/02/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 06/02/2026

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

FACILITY EVALUATION REPORT California law requires a public report of each licensing visit/inspection. This report is a record for the facility and the licensing agency. This report is available for public review; therefore, care is taken not to disclose personal or confidential information. Inquiries concerning the location, maintenance, and contents of these reports may be directed to the Licensing Program Analyst or Regional Office whose address and telephone number are listed on the front of this form.

DEFICIENCIES A deficiency is an instance of noncompliance with licensing requirements, including applicable statutes, regulations, interim licensing standards, operating standards, and written directives. Applicants/ licensees must be notified in writing of all licensing deficiencies. Deficiencies are listed on the left side of this form, and the applicable licensing requirement upon which the deficiency is identified. There are two types of deficiencies:

- Type A deficiencies are violations of licensing requirements that, if not corrected, have a direct and immediate risk to the health, safety, or personal rights of persons in care.

- Type B deficiencies are violations of licensing requirements that, without correction, could become a risk to the health, safety, or personal rights of persons in care, a recordkeeping violation that could impact the care of said persons and/or protection of their resources, or a violation that could impact those services required to meet the needs of persons in care.

PLANS OF CORRECTION (POCs) The licensing agency is required to establish a reasonable length of time to correct a deficiency. In order to set the time, the licensing agency must take into consideration the seriousness of the violation, the number of persons in care involved, and the availability of equipment and personnel necessary to correct the violation. Applicants/licensees are requested to provide a specific plan for each violation on the right side of the form across from each deficiency. The more specific the plan, the less chance exists for any misunderstanding in setting time limits and reviewing corrections. The applicant/licensee who encounters problems beyond their control in completing the corrections within the specified time frame may request and may be granted an extension of the correction due date by the licensing agency.

CORRECTION NOTIFICATION The applicant/licensee is responsible for completing all corrections and promptly notifying the licensing agency of corrections. Applicants/licensees are advised to keep a dated copy of any correspondence sent to the licensing agency concerning corrections, or if corrections are telephoned to the licensing agency, the date, person contacted, and information given.

CIVIL PENALTIES The licensing agency is required by law to issue a Penalty Notice, when applicable, to all facilities holding a license issued by the licensing agency, or subject to licensure, except Certified Family Homes, Resource Families, and Foster Family Homes, or any governmental entity.

PENALTY NOTICE GIVEN The statement concerning civil penalties serves as a penalty notice on this Licensing Report and failure to correct cited licensing deficiencies will result in civil penalties. Applicants/ licensees are required to pay civil penalties when administrative appeals have been exhausted and in accordance with any payment arrangements made with the licensing agency.

APPEAL RIGHTS The applicant/licensee has a right without prejudice to discuss any disagreement in this report with the licensing agency concerning the proper application of licensing requirements. The applicant/ licensee may request a formal review by the licensing agency to amend or dismiss the notice of deficiency and/ or civil penalty. Requests for review shall be made in writing within 15 business days of receipt of a deficiency notification or civil penalty assessment. Licensing deficiencies may be appealed pursuant to the

procedures in the LIC 9058 Applicant/Licensee Rights.

AGENCY REVIEW The licensing agency review of an appeal may be conducted based upon information provided in writing by the applicant/licensee. The applicant/licensee may request an office meeting to provide additional information. The applicant/licensee will be notified in writing of the results of the agency review within 60 business days of the date when all necessary information has been provided to the licensing agency.

EMAIL REQUIREMENT Adult Community Care Facilities, Residential Care Facilities for the Chronically Ill, and Residential Care Facilities for the Elderly are required to provide and maintain an active email address of record with the licensing agency.

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **FACILITY EVALUATION REPORT (Cont)**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SACRAMENTO SOUTH ASC, 9835 GOETHE ROAD, SUITE 100 SACRAMENTO, CA 95827

FACILITY NAME: BRUCEVILLE POINT **FACILITY NUMBER:** 342701040

VISIT DATE: 06/02/2026

NARRATIVE

In the kitchen/dining area, LPA observed at least 7-day nonperishable and 2-day perishable food items. Knives/sharps and cleaning chemicals were locked and not accessible. Fire extinguishers were observed throughout the hallways, on each floor, and in the kitchen. Smoke detectors and carbon monoxide detectors were observed throughout. Menu was observed to be posted. Residents with food allergies were written on a board. Refrigerator and Freezer temperatures were within regulatory standards.

There are three dining rooms in the Assisted Living (AL) area and one dining room in the Memory Care (MC) area. Medication Room for the AL is located on the second floor and the MC has its own medication room.

Outdoor area was inspected. Walkways were observed to be unobstructed. Fence and gate were in good repair at this time. There is a shaded area for outdoor activities. LPA observed outdoor furniture.

Record Reviews: During this visit, LPA reviewed seven staff files, including review of background clearance, first aid/CPR certification, and training.

Per review, Fire/Emergency Drill is being conducted at least quarterly and last drill was conducted on 5/12/26. Fire sprinkler system and fire alarms were tested on 3/10/26.

Medication review will be conducted at a later visit.

Interviews: Two resident interviewed and two staff interviewed.

Documents Requested: LPA requested a copy of updated Liability Insurance *LIC500, and LIC308.*

Per the California Code of Regulations, Title 22, Division 6, no deficiencies were cited.

Exit interview was conducted with AD. A copy of the report was provided upon exit.

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NAME OF LICENSING PROGRAM MANAGER: Stephen Richardson
NAME OF LICENSING PROGRAM ANALYST: Arvin Villanueva
LICENSING PROGRAM ANALYST SIGNATURE:
DATE: 06/02/2026

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FACILITY REPRESENTATIVE SIGNATURE:
DATE: 06/02/2026