

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 347000985

Report Date: 02/27/2026

Date Signed: 02/27/2026 03:45:47 PM

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

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|-------------------------|----------------------------------|--|----------------|
| FACILITY NAME: | GOLDEN POND RETIREMENT COMMUNITY | FACILITY NUMBER: | 347000985 |
| ADMINISTRATOR/DIRECTOR: | RYAN NAKAO | FACILITY TYPE: | 740 |
| ADDRESS: | 3415 MAYHEW ROAD | TELEPHONE: | (916) 369-8967 |
| CITY: | SACRAMENTO | STATE: | CA |
| CAPACITY: | 175 | ZIP CODE: | 95827 |
| TYPE OF VISIT: | Required - 1 Year | DATE: | 02/27/2026 |
| MET WITH: | Ryan Nakao | UNANNOUNCED TIME VISIT/INSPECTION BEGAN: | 03:00 PM |
| | | TIME VISIT/INSPECTION COMPLETED: | 04:30 PM |

NARRATIVE

1 Licensing Program Analyst (LPA) Christina Valerio arrived unannounced to conduct an annual required
2 inspection. LPA Valerio met with Administrator Ryan, and explained the purpose of the visit.
3
4 LPA Valerio and Administrator toured the facility to ensure compliance with Title 22 regulations. LPA
5 Valerio observed two resident rooms on the assisting living side and one on the memory care side. The
6 resident rooms were observed fully furnished, free from odors, and clean. LPA did not observed any
7 medications, sharps, or toxins to be left unlocked or accessible to residents in care. The faucet located
8 in the resident room was measured to deliver hot water at a temperature of 111.3 degree F, which is
9 within the regulatory range of 105.0 - 120.0 degrees. LPA Valerio observed residents in the common
10 areas of the facility watching performances, eating charcuterie snacks, and playing bingo. Staff were
11 observed assisting residents, walking in the facility, and doing daily work tasks. LPA Valerio observed
12 the facility fire extinguishers to be fully charged and serviced. The date of the last fire/emergency
13 disaster drill was 02/19/2026. Common areas were observed to be clean and fully furnished. LPA Valerio
14 did not observe any emergency exits to be obstructed. The door that was in disrepair in past visits was
15 observed to be in working condition with the open/closing mechanism to be fully operational. LPA Valerio
16 rode in two elevators, which was observed to be in working condition with no issues.
17
18 Due to time constraints, LPA Valerio was unable to review resident or staff files. LPA will return at a later
19 date to review the files and complete the annual visit. LPA Valerio requested the following be sent for the
20 facility file: LIC 500, LIC 308, LIC 309, LIC 610, and copy of liability insurance.
21 Per California Code of Regulations (CCR) - no deficiencies were observed during today's visit. An exit
22 interview was held, and a copy of this report was provided.
23
24
25

NAME OF LICENSING PROGRAM MANAGER: Stephen Richardson

NAME OF LICENSING PROGRAM ANALYST: Christina Valerio

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 02/27/2026

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 02/27/2026

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.