

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 385601045
Report Date: 03/24/2026
Date Signed: 03/24/2026 02:45:47 PM

Document Has Been Signed on 03/24/2026 02:45 PM - It Cannot Be Edited

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SAN BRUNO RO, 851 TRAEGER AVE., SUITE 360 SAN BRUNO, CA 94066
--	---

FACILITY NAME: PORTOLA GARDENS	FACILITY NUMBER: 385601045
ADMINISTRATOR/GREGORY K BOGART DIRECTOR:	FACILITY TYPE: 740
ADDRESS: 350 UNIVERSITY ST	TELEPHONE: (415) 337-1587
CITY: SAN FRANCISCO	STATE: CA
CAPACITY: 132	ZIP CODE: 94134
TYPE OF VISIT: Case Management - Other	CENSUS: 98
	DATE: 03/24/2026
	UNANNOUNCED TIME VISIT/ INSPECTION
	BEGAN: 09:27 AM
MET WITH: Gregory Bogart	TIME VISIT/ INSPECTION
	COMPLETED: 03:00 PM

NARRATIVE

1 On 3/24/2026, Licensing Program Analysts (LPA) Yi Sam Jian arrived unannounced for the purpose of
2 conducting a case management. The purpose of the case management is to address the corresponding
3 complaint investigation report number 14-AS-20260112162335 and 14-AS-20260127162859. LPA met
4 with administrator, Gregory Bogart. LPA explained the purpose of the visit.
5
6 During complaint investigation, document were reviewed, **Facility Progress notes** for resident R1 and
7 **Hospital after visit summary** indicate that R1 suffered a fall resulted in a hospital visit. There was no
8 incident report on file submitted by the facility to CCL documenting the incident involving R1. **Physician**
9 **communication and instructions** reported resident R2 was assessed by paramedics and brought to a
10 hospital. There was no incident report on file submitted by the facility to CCL documenting the incident
11 involving resident R2. **SOC341** reported allegation of incident involved staff S1 and resident R3. There
12 was no incident report or SOC341 on file submitted by the facility to CCL regarding the incident involving
13 resident R3.
14
15 Deficiencies of the California Code of Regulations, Title, 22 cited on the 809-D. Failure to correct the
16 deficiencies may result in civil penalties. Report is reviewed with administrator and a copy is provided
17 with appeal rights.
18
19
20
21
22
23
24
25

NAME OF LICENSING PROGRAM MANAGER: Brenda Chan
NAME OF LICENSING PROGRAM ANALYST: Yi Sam Jian

LICENSING PROGRAM ANALYST SIGNATURE:


DATE: 03/24/2026

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

FACILITY REPRESENTATIVE SIGNATURE:


DATE: 03/24/2026

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 III, and Residential Care Facilities for the Elderly are required to provide and maintain an active email address of record with the licensing agency.

Document Has Been Signed on 03/24/2026 02:45 PM - It Cannot Be Edited

Created By: Yi Sam Jian On 03/24/2026 at 09:37 AM
Link to Parent Document Below:

<p>STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY</p> <p>FACILITY EVALUATION REPORT (Cont)</p>	<p>CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION , 851 TRAEGER AVE., SUITE 360 SAN BRUNO, CA 94066</p>
---	--

FACILITY NAME: PORTOLA GARDENS

FACILITY NUMBER: 385601045

DEFICIENCY INFORMATION FOR THIS PAGE:

VISIT DATE: 03/24/2026

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)	
Type B 03/31/2026 Section Cited CCR 87211(a)(1)	1 Reporting Requirements: A written 2 report shall be submitted to the 3 licensing agency and to the person 4 responsible for the resident within 5 seven days of the occurrence of... Any 6 incident which threatens the welfare, 7 safety or health of any resident. This requirement is not met as evidenced by:	1 Facility to submit a copy of in-service 2 training regarding reporting 3 requirements with staff who document 4 LIC624s to CCLD by POC due date. 5 6 7	
	8 Based on document review, facility did 9 not submit a written report to the 10 Department for fall occurrences of R1 11 and R2 and alleged physical abuse on 12 R3, which is a potential health, safety, 13 or personal rights risk to persons in 14 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.

NAME OF LICENSING PROGRAM MANAGER:	Brenda Chan
NAME OF LICENSING PROGRAM ANALYST:	Yi Sam Jian

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 03/24/2026

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 03/24/2026