

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 385601148
Report Date: 10/08/2025
Date Signed: 10/08/2025 01:25:13 PM

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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 EVALUATION REPORT	

FACILITY NAME: IVY AT GOLDEN GATE, THE	FACILITY NUMBER: 385601148
ADMINISTRATOR/RAUKHMAN, KATHERINE DIRECTOR:	FACILITY TYPE: 740
ADDRESS: 1601 19TH AVENUE	TELEPHONE: (415) 664-6264
CITY: SAN FRANCISCO	STATE: CA
CAPACITY: 168	ZIP CODE: 94122
TYPE OF VISIT: Case Management - Incident	CENSUS: 120
	DATE: 10/08/2025
	UNANNOUNCED TIME VISIT/INSPECTION: 10:21 AM
MET WITH: Regional Operations Specialist, Caroline Frangieh	BEGAN: TIME VISIT/INSPECTION: 01:39 PM
	COMPLETED:

NARRATIVE	
1	On 10/08/2025, Licensing Program Analyst (LPA) Yi Sam Jian conducted an unannounced case
2	management visit to follow up on an incident report that was submitted to CCLD on 10/03/2025. LPA
3	met with Memory Care Director, Daisy Dizon, and Regional Operations Specialist, Caroline Frangieh,
4	arrived later during the visit. LPA explained the purpose of the visit.
5	
6	The facility submitted a written incident report indicating on 09/27/2025, at approximately 9:30 AM,
7	Resident R1 participated in a morning walk accompanied by activity staff S1 and other residents. S1
8	was unaware that Resident R1 was not to leave the facility without assistance. Staff S1 returned to the
9	facility without Resident R1. At approximately 5:00 PM the same day, Resident R1 returned to the facility
10	accompanied by an individual from outside the facility.
11	
12	Resident R1's physician's report identifies Alzheimer's dementia as the primary diagnosis. The
13	resident's mental status indicates that R1 is not able to leave the facility unassisted. Due to lack of care
14	and supervision by facility staff, R1 was able to elope from the facility. Deficiencies of the California
15	Code of Regulations, Title, 22 cited on the LIC809D. Failure to correct the deficiencies may result in civil
16	penalties.
17	
18	Report is reviewed with the Regional Operations Specialist, and a copy is provided with appeal rights.
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25	

NAME OF LICENSING PROGRAM MANAGER: Brenda Chan

NAME OF LICENSING PROGRAM ANALYST: Yi Sam Jian

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 10/08/2025

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 10/08/2025

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.

LIC809 (FAS) - (09/23)

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Created By: Yi Sam Jian On 10/08/2025 at 12:17 PM
Link to Parent Document Below:

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY FACILITY EVALUATION REPORT (Cont)	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION , 851 TRAEGER AVE., SUITE 360 SAN BRUNO, CA 94066
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FACILITY NAME: IVY AT GOLDEN GATE, THE

FACILITY NUMBER: 385601148

DEFICIENCY INFORMATION FOR THIS PAGE:

VISIT DATE: 10/08/2025

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)		
Type A 10/09/2025 Section Cited	1 87464 Basic Services: (f) Basic 2 services shall at a minimum include: 3 (1) Care and supervision as defined 4 in Section 87101(c)(3) and Health 5 and Safety Code section 1569.2(c). 6 This requirement is not met as 7 evidenced by:			
	8 Based on file review and incident 9 report, Licensee did not provide care 10 and supervision to resident R1 who is 11 diagnosed with Dementia. R1 eloped 12 from facility without supervision, with 13 documented mental condition stated 14 not able to leave facility unassisted.	8 9 10 11 12 13 14		
	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	Brenda Chan
MANAGER:	
NAME OF LICENSING PROGRAM	Yi Sam Jian
ANALYST:	

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 10/08/2025

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 10/08/2025