

## Community Care Licensing

# FACILITY EVALUATION REPORT

Facility Number: 410508727

Report Date: 10/04/2024

Date Signed: 10/04/2024 11:40:45 AM

Document Has Been Signed on 10/04/2024 11:40 AM - 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
<b>FACILITY EVALUATION REPORT</b>	
FACILITY NAME: B & B RESIDENTIAL FACILITIES, INC.	FACILITY NUMBER: 410508727
ADMINISTRATOR/SLAVA AND ANTE BULJAN	FACILITY TYPE: 740
DIRECTOR:	
ADDRESS: 15 W. 38TH AVENUE	TELEPHONE: (650) 345-6580
CITY: SAN MATEO	STATE: CA ZIP CODE: 94403
CAPACITY: 7	CENSUS: 7 DATE: 10/04/2024
TYPE OF VISIT: Required - 1 Year	UNANNOUNCED TIME VISIT/ INSPECTION BEGAN: 09:15 AM
MET WITH: Administrator/Licensee - Ante Buljan	TIME VISIT/ INSPECTION COMPLETED: 12:00 PM

NARRATIVE	
1	On 10/04/2024, Licensing Program Analyst (LPA) Vado Jaime Vado conducted an unannounced
2	required - 1 year inspection visit. LPA met with administrator/licensee Ante Buljan and explained the
3	purpose of today's visit. There are currently 7 residents in care and 4 staff present. This is a multi level
4	facility. The second floor is where the licensee resides. licensed for residents age range of 60 years and
5	over all of which may be non-ambulatory. License is approved for 5 hospice residents. Room 4 is the
6	only cleared bedridden room. There are 3 hospice residents as of today's inspection visit.
7	
8	The physical plant was toured inside and outside of the facility to ensure the safety of the residents.
9	There are no video cameras on site per the caregivers. LPA observed the facility kitchen which is clean
10	and observed appliances that are in good repair. Knives are stored and locked in a drawer next to the
11	sink. Perishable and non-perishable food items are observed as being in place meeting both the 2 day
12	fresh food supply and 7 day emergency food supply requirement. There is an additional
13	refrigerator/freezer in the garage area which carries additional food supplies for resident use. PPE and
14	incontinence supplies are also stored in the garage area and observed as in place. First aid kits are
15	observed as complete with required items stored in the kitchen of the facility. Medications are observed
16	to be locked in the kitchen in a kitchen cabinet. LPA observed at least two fire extinguishers in place
17	which are currently within operating range, hard wired smoke detector, carbon monoxide detectors are
18	observed in place through out the facility, and central heating/air conditioning. LPA also observed two
19	fire pull stations in the rear and front of the facility. Emergency exit routes are observed inside and
20	outside to be free and clear of obstructions. Emergency disaster drill last conducted on July 22, 2024
21	Water temperature was measured at 107F. Cleaning supplies are observed to be locked in the kitchen
22	below the sink and the garage. LPA observed the laundry room, and both laundry and dryer are
23	operational.
24	
25	Continued on next...

NAME OF LICENSING PROGRAM MANAGER: April Cowan

**NAME OF LICENSING PROGRAM ANALYST:** Jaime Vado  
**LICENSING PROGRAM ANALYST SIGNATURE:**



**DATE:** 10/04/2024

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

**FACILITY REPRESENTATIVE SIGNATURE:**



**DATE:** 10/04/2024

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

LIC809 (FAS) - (06/04)

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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 (Cont)**

**FACILITY NAME:** B & B RESIDENTIAL FACILITIES, INC.

**FACILITY NUMBER:** 410508727

**VISIT DATE:** 10/04/2024

### **NARRATIVE**

1 Page 2

2  
3 LPA observed all resident rooms as clean, free of odors, and contained all the required furniture per  
4 regulatory recommendations. Resident bathrooms are observed as clean and in good worker order.  
5 Shower floors are equipped with non-skid mats or flooring. Facility does not handle resident monies.  
6 Medications and logs are observed today as current. During today's inspection LPA reviewed 5 resident  
7 file and 4 staff files, which are all current. Administrator certificates are current for licensee expiring  
8 01/10/2025.  
9

10 The following updated forms are requested to be submitted to CCLD by 10/11/2024:

11  
12 • Copy of updated Administrator Certificates  
13 • Copy of liability insurance  
14 • LIC308 Designation of responsible staff person  
15 • LIC400 Affidavit Regarding Client/Resident Cash Resources  
16 • LIC610E Emergency Disaster Plan  
17 • LIC500 Staff Schedule  
18 • Copy of control of property  
19

20 There are no citations issued on this day. Report is reviewed with the licensee Ante Buljan and a copy is  
21 provided.  
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32

**NAME OF LICENSING PROGRAM MANAGER:** April Cowan

**NAME OF LICENSING PROGRAM ANALYST:** Jaime Vado

**LICENSING PROGRAM ANALYST SIGNATURE:**

**DATE:** 10/04/2024

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 10/04/2024