

Department of
SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 079200765
Report Date: 09/10/2026
Date Signed: 09/10/2026 04:50:55 PM

COMPREHENSIVE INSPECTION

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION E BAY DELTA AC/SC, 1515 CLAY STREET, STE. 310 OAKLAND, CA 94612
FACILITY EVALUATION REPORT	

FACILITY NAME:	PLEASANT HILL OASIS	FACILITY NUMBER:	079200765
ADMINISTRATOR/ELEGADO, LIZA DIRECTOR:		FACILITY TYPE:	740
ADDRESS:	40 BOYD RD	TELEPHONE:	(925) 937-5348
CITY:	PLEASANT HILL	STATE: CA	ZIP CODE: 94523
CAPACITY: 49		CENSUS: 45	DATE: 09/10/2026
TYPE OF VISIT:	Required - 1 Year	UNANNOUNCEDTIME VISIT/INSPECTION	09:30 AM
MET WITH:	Liza Jay Elegado, Executive Director	BEGAN:	
		TIME VISIT/INSPECTION	05:00 PM
		COMPLETED:	

NARRATIVE	
1	On 09/10/2026 at 9:30 AM, Licensing Program Analyst (LPA) L. Alexander arrived unannounced to conduct 1-Year Annual Required inspection. LPA met with Executive Director, Liza Jay Elegado and explained the purpose of the visit. The facility's fire clearance was approved for all non-ambulatory for capacity of forty-nine (49) residents. Administrator Certificate #7015304740 expires 03/25/2028.
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8	LPA toured the facility with Liza Jay including but not limited to three (3) residents' apartments, bathrooms, multiple activity rooms, kitchen, common area and courtyard. There are no bodies of water observed. LPA observe lighting in all rooms are adequate for the comfort and safety of the residents. Hallway temperature was maintained at 85 degrees F. LPA observed lighting in all rooms are adequate for the comfort and safety of the residents. The hot water temperature in a sample of residents' shared bathroom were measured at 117.5, 115 and 120 degrees Fahrenheit. Residents' bathrooms are equipped with grab bars and non-skid mats. There is a minimum of one week supply of nonperishable and 2-day of perishable foods. Centrally stored medications, sharps and toxic are locked and inaccessible to residents in care.
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15	LPA reviewed 5 residents records. LPA reviewed 6 staff records and 5 of 6 have current first aid training and associated to the facility.
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DATE: 09/10/2026

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 09/10/2026

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.

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FACILITY NAME: PLEASANT HILL OASIS **FACILITY NUMBER:** 079200765
VISIT DATE: 09/10/2026

NARRATIVE		
1	Updated copies of the following documents were requested for facility file and are to be submitted to CCL by 09/17/2026:	
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5		LIC 308 Designation of Administrative Responsibility - Reviewed
6		LIC 309 Administrative Organization - Reviewed
7		LIC 500 Personnel Report - Reviewed
8		LIC 610E Emergency Disaster Plan - Reviewed
9		Liability Insurance - Reviewed
10		Current Administrator's Certificate - Reviewed
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12	DEFICIENCIES OBSERVED:	
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15		11:31 AM missing toilet seat in resident's bedroom
16		11:36 AM back patio grounds dirty
17		12:12 PM soiled floors in bathrooms, kitchen areas
18		12:13 PM tires, trash, debris behind sheds
19		12:14 PM 4-5 wheelchairs behind building located outside
20		12:18 PM trees leaves/branches up against building and roof
21		12:24 PM dining room chairs, tables, wheelchair sitting outside
22		12:26 PM broken chair located at side gate on the ground
23	12:27 PM broken window at front meeting room	
24	12:30 PM floor siding broken	
25	12:32 PM insect/pest droppings in cabinet located in bathroom	
26	12:34 PM dirty soiled carpet throughout hallways	
27	The following deficiencies were observed (see LIC 809D) and cited from the California Code of Regulations, Title 22 and/or Health and Safety Code Failure to correct deficiencies by POC date may result in additional Civil Penalties.	
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32	Exit interview conducted. Appeal Rights and a copy of this report provided.	

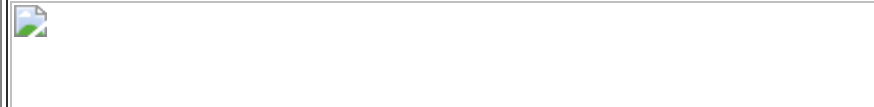
NAME OF LICENSING PROGRAM MANAGER: Bennett Fong	
NAME OF LICENSING PROGRAM ANALYST: Lori Alexander-Washington	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 09/10/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 09/10/2026

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FACILITY EVALUATION REPORT (Cont)	

FACILITY NAME: PLEASANT HILL OASIS **FACILITY NUMBER:** 079200765
DEFICIENCY INFORMATION FOR THIS PAGE: **VISIT DATE:** 09/10/2026

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
Type A 09/11/2026 Section Cited CCR 87202(a)(2)	1 87202 Fire Clearance 2 (a) All facilities shall maintain a fire 3 clearance approved by..county fire 4 department...State Fire Marshal. Prior 5 to accepting or retaining any of the 6 following types of persons, the 7 applicant or licensee shall notify the licensing agency and obtain an appropriate fire clearance approved by...city and county fire department.. (2) Bedridden persons This requirement is not met as evidenced by:	1 Administrator will send LIC 200 2 w/facility sketch indicating room(s) for 3 bedridden by POC due date. 4 5 6 7
	8 Based on record review and 9 observation, the licensee did not 10 comply with the section cited above in 11 by not having a fire clearance for 12 bedridden resident, R2, which poses an 13 immediate health, safety or personal 14 rights risk to persons in care.	8 Civil Penalty Assess \$500.00 9 10 11 12 13 14
Type B 09/24/2026 Section Cited CCR87303(a)	1 87303 Maintenance and Operation 2 (a) The facility shall be clean, safe, 3 sanitary and in good repair at all 4 times... 5 6 This requirement is not met as 7 evidenced by:	1 Administrator agreed to power wash all 2 grounds. Clean all areas listed on 3 report and send photos of all cleaned 4 areas by POC due date. 5 6 7
	8 Based on observation, the licensee did 9 not comply with the section cited above 10 in by not having floors clean in kitchen 11 with built grime, hallway carpets, floor 12 siding lifting, baseboards dirty, missing 13 toilet seat, glass window broke, 14 trees/leaves and debris hanging on roof/building in meeting room which poses a potential health, safety or personal rights risk to persons in care.	8 Repeat Violation \$250.00 9 10 11 12 13 14

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:	Bennett Fong
NAME OF LICENSING PROGRAM ANALYST:	Lori Alexander-Washington
LICENSING PROGRAM ANALYST SIGNATURE:	
	DATE: 09/10/2026
I acknowledge receipt of this form and understand my appeal rights as explained and received.	

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LIC809 (FAS) - (06/04)

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Created By: Lori Alexander-Washington On 09/10/2026 at 03:52 PM
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Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
Type B 09/24/2026 Section Cited CCR 87303(b)(2)	187303 Maintenance and Operation 2(b) A comfortable temperature for 3residents shall be maintained at all 4times.(2) The facility shall cool rooms to 5a comfortable range...or in areas of 6extreme heat to 30 degrees F less than 7the outside temperature. This requirement is not met as evidenced by:	1Administrator will fixed A/C and in the 2meantime get portable A/C including 3but not limited to common areas by 4POC due date.
	8Based on observation, the licensee did 9not comply with the section cited above 10in by not having rooms including but not 11limited to the common areas, television 12area where thermostat read 85 degrees 13which poses a potential health, safety 14or personal rights risk to persons in care.	

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:	Bennett Fong
NAME OF LICENSING PROGRAM ANALYST:	Lori Alexander-Washington
LICENSING PROGRAM ANALYST SIGNATURE:	



DATE: 09/10/2026

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