

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 079201513
Report Date: 05/08/2025
Date Signed: 05/08/2025 10:58:03 AM

Document Has Been Signed on 05/08/2025 10:58 AM - It Cannot Be Edited

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

FACILITY NAME: SAFE HAVEN ROSE GARDEN LLC	FACILITY NUMBER: 079201513
ADMINISTRATOR/GRIMSEY,RICHARD	FACILITY TYPE: 740
DIRECTOR:	
ADDRESS: 2967 HONOR WAY	TELEPHONE: (510) 224-7357
CITY: BRENTWOOD	STATE: CA
CAPACITY: 6	ZIP CODE: 94513
TYPE OF VISIT: Prelicensing	CENSUS: 0
	ANNOUNCED
	DATE: 05/08/2025
	TIME VISIT/INSPECTION BEGAN: 09:55 AM
MET WITH: Licensee, Kevin Parker/Administrator, Richard Grimesey	TIME VISIT/INSPECTION COMPLETED: 11:25 AM

NARRATIVE	
1	On 05/08/2025 at 9:55AM, Licensing Program Analyst (LPA) T. Syess-Gibson conducted an announced
2	pre-licensing inspection. This is a continuance from the previous visit conducted on 04/15/2025. LPA
3	met with Licensee, Kevin Parker and Administrator, Richard Grimesey and explained the purpose of the
4	visit.
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6	On 04/15/2025 LPA toured facility including but not limited to resident's bedrooms, bathrooms, living
7	room, dining area, kitchen, garage, and outdoor area. LPA observed lighting in all rooms. LPA observed
8	facility had some non-perishable food supply. Licensee will purchase additional food supplies once
9	facility is licensed. Carbon monoxide detector was observed in operating condition. First aid kit was
10	complete. Emergency disaster plan was complete.
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12	On 05/08/2025 LPA toured the facility and observed Licensee/Administrator made corrections from
13	previous visit on 04/15/2025.
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15	Continue on LIC809C
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NAME OF LICENSING PROGRAM MANAGER: Harpreet Humpal

NAME OF LICENSING PROGRAM ANALYST: Tonica Syess-Gibson

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 05/08/2025

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 05/08/2025

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 III, 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 EVALUATION REPORT (Cont)	

FACILITY NAME: SAFE HAVEN ROSE GARDEN LLC **FACILITY NUMBER:** 079201513
VISIT DATE: 05/08/2025

NARRATIVE	
1	Continued from LIC809
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6	LPA Conducted COMP III on 05/08/2025.
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8	The licensee/administrator was reminded of the statute that requires CCL to be notified within <u>5</u>
9	<u>business days</u> of admitting their first resident. This notification may be done by phone, by mail, email,
10	or by fax.
11	
12	No Issues were noted during inspection. LPA observed that facility is ready to be licensed. This
13	report will be submitted to the Central Applications Unit (CAU) and a final review of the
14	application will be conducted. This facility is not yet licensed and is subject to final approval by
15	CAU. Additional requirements may still be required.
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17	Exit interview conducted and a copy of this report provided.
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NAME OF LICENSING PROGRAM MANAGER: Harpreet Humpal	
NAME OF LICENSING PROGRAM ANALYST: Tonica Syess-Gibson	
LICENSING PROGRAM ANALYST SIGNATURE:	DATE: 05/08/2025

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

FACILITY REPRESENTATIVE SIGNATURE:	DATE: 05/08/2025
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