

Department of

**SOCIAL SERVICES**

*Community Care Licensing*

**COMPLAINT INVESTIGATION REPORT**

Facility Number: 195850240

Report Date: 02/19/2026

Date Signed: 02/19/2026 04:12:51 PM

**Substantiated**

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION WOODLAND HILLS N.ASC, 21731 VENTURA BLVD. #250 WOODLAND HILLS, CA 91364
<b>COMPLAINT INVESTIGATION REPORT</b>	

This is an official report of an unannounced visit/investigation of a complaint received in our office on **08/29/2025** and conducted by Evaluator Angela Barutyan

	<b>COMPLAINT CONTROL NUMBER: 29-AS-20250829112317</b>
--	---

<b>FACILITY NAME:</b> VARIEL OF WOODLAND HILLS, THE	<b>FACILITY NUMBER:</b> 195850240
<b>ADMINISTRATOR:</b> LOURDES BUSTAMANTE	<b>FACILITY TYPE:</b> 740
<b>ADDRESS:</b> 6233 VARIEL AVE	<b>TELEPHONE:</b> (818) 651-6018
<b>CITY:</b> WOODLAND HILLS	<b>ZIP CODE:</b> 91367
<b>CAPACITY:</b> 436	<b>DATE:</b> 02/19/2026
<b>MET WITH:</b> Jessica Saks	<b>UNANNOUNCED TIME BEGAN:</b> 12:25 PM
	<b>TIME COMPLETED:</b> 04:20 PM

**ALLEGATION(S):**

1	Staff damaged a resident's personal item.
2	
3	
4	
5	
6	
7	
8	
9	

**INVESTIGATION FINDINGS:**

1	Licensing Program Analyst (LPA) Angela Barutyan arrived at the facility unannounced to conduct a
2	subsequent complaint investigation with the purpose of delivering findings for the allegations listed above
3	at 12:25PM. LPA met with staff, Executive Director (ED) Allison Marty, and Associate Executive Director
4	Jessica Saks. Entrance interview conducted.
5	
6	During the subsequent visit on 10/30/2025 and initial visit on 09/03/2025, LPA conducted interviews with
7	four (4) staff and one (1) resident, reviewed and obtained copies of pertinent documents relevant to the
8	investigation, conducted a brief physical plant tour, and discussed allegations with ED.
9	
10	CONTINUED ON LIC9099-C.
11	
12	
13	

<b>Substantiated</b>	<b>Estimated Days of Completion:</b>
----------------------	--------------------------------------

**SUPERVISORS NAME:** Kristin Heffernan  
**LICENSING EVALUATOR NAME:** Angela Barutyán  
**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 02/19/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 02/19/2026

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

LIC9099 (FAS) - (06/04)

Page: 1 of 6

**Control Number** 29-AS-20250829112317

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES  
COMMUNITY CARE LICENSING DIVISION  
WOODLAND HILLS N.ASC, 21731 VENTURA BLVD. #250  
WOODLAND HILLS, CA 91364

## COMPLAINT INVESTIGATION REPORT (Cont)

**FACILITY NAME:** VARIEL OF WOODLAND HILLS, THE

**FACILITY NUMBER:** 195850240

**VISIT DATE:** 02/19/2026

### NARRATIVE

1 It was alleged that staff damaged Resident #1 (R1)'s duvet cover after washing it. Interviews with staff,  
2 ED, R1, and R1's responsible parties confirmed that the duvet cover faded in color after it was washed  
3 by a staff member. The color faded from bronze to gray. The facility was notified of the damage to the  
4 duvet cover on 08/28/2025 and on 09/05/2025, a \$207.43 credit was issued by the facility to  
5 R1/responsible parties for a replacement duvet cover. Interviews also confirmed that R1 was not left  
6 without a blanket and that the facility ensured R1 had appropriate bedding. Based on interview and  
7 record review, the allegation "Staff damaged a resident's personal item" is deemed **SUBSTANTIATED** at  
8 this time. However, the LPA determined that there is no direct impact to the residents, presented no  
9 danger, and did not effect the overall operation of the facility. This is considered a technical violation and  
10 no citations are being issued at this time.

11  
12 Exit interview conducted. A copy of today's report was provided  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31  
32

**SUPERVISORS NAME:** Kristin Heffernan  
**LICENSING EVALUATOR NAME:** Angela Barutyán  
**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 02/19/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 02/19/2026

LIC9099 (FAS) - (06/04)

Page: 2 of 6

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES  
COMMUNITY CARE LICENSING DIVISION  
WOODLAND HILLS N.ASC, 21731 VENTURA BLVD. #250  
WOODLAND HILLS, CA 91364

## COMPLAINT INVESTIGATION REPORT

**COMPLAINT CONTROL NUMBER:** 29-AS-20250829112317

**FACILITY NAME:** VARIEL OF WOODLAND HILLS, THE

**FACILITY NUMBER:** 195850240

**ADMINISTRATOR:** LOURDES BUSTAMANTE

**FACILITY TYPE:** 740

**ADDRESS:** 6233 VARIEL AVE

**TELEPHONE:** (818) 651-6018

**CITY:** WOODLAND HILLS

**STATE:** CA

**ZIP CODE:** 91367

**CAPACITY:** 436

**CENSUS:** 374

**DATE:** 02/19/2026

**MET WITH:** Jessica Saks

**UNANNOUNCED TIME BEGAN:** 12:25 PM

**TIME COMPLETED:** 04:20 PM

**ALLEGATION(S):**

- 1 Staff did not ensure that resident attended a medical appointment.
- 2 Staff did not ensure resident received prescribed medication.
- 3 Staff did not pick resident up from an appointment in a timely manner.
- 4
- 5
- 6
- 7
- 8
- 9

**INVESTIGATION FINDINGS:**

- 1 Licensing Program Analyst (LPA) Angela Barutyan arrived at the facility unannounced to conduct a
- 2 subsequent complaint investigation with the purpose of delivering findings for the allegations listed above
- 3 at 12:25AM. LPA met with staff, Executive Director (ED) Allison Marty, and Associate Executive Director
- 4 Jessica Saks. Entrance interview conducted.
- 5
- 6 During the subsequent visit on 10/30/2025 and initial visit on 09/03/2025, LPA conducted interviews with
- 7 four (4) staff and one (1) resident, reviewed and obtained copies of pertinent documents relevant to the
- 8 investigation, conducted a brief physical plant tour, and discussed allegations with ED.
- 9
- 10 CONTINUED ON LIC9099-C.
- 11
- 12
- 13

**Unsubstantiated** Estimated Days of Completion:

**SUPERVISORS NAME:** Kristin Heffernan  
**LICENSING EVALUATOR NAME:** Angela Barutyan  
**LICENSING EVALUATOR SIGNATURE:** \_\_\_\_\_ **DATE:** 02/19/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:** \_\_\_\_\_ **DATE:** 02/19/2026

**This report must be available at Child Care and Group Home facilities for public review for 3 years.**  
 LIC9099 (FAS) - (06/04) Page: 3 of 6  
**Control Number 29-AS-20250829112317**

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY  <b>COMPLAINT INVESTIGATION REPORT (Cont)</b>	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION WOODLAND HILLS N.ASC, 21731 VENTURA BLVD. #250 WOODLAND HILLS, CA 91364
--	---

**FACILITY NAME:** VARIEL OF WOODLAND HILLS, THE

**FACILITY NUMBER:** 195850240

**VISIT DATE:** 02/19/2026

**NARRATIVE**

- 1 It was alleged that staff did not wake up or dress Resident #1 (R1) on time for their early morning
- 2 medical appointment on 08/29/2025. LPA conducted interviews with staff and R1's responsible parties
- 3 which confirmed that staff were informed in the evening of 08/28/2025 of R1's appointment, however,
- 4 proper protocol was not followed. One caregiver was notified in passing in the hallway instead of
- 5 informing the Resident Care Coordinator or Wellness Office in advance. While the caregiver wrote the
- 6 appointment details on the office whiteboard, morning shift caregivers were unaware of the appointment.

7 R1's care plan dated 07/24/2025 documents that R1 "requires Daily STAND BY assist with dressing"  
8 twice a day and R1's assessment signed and dated 04/06/2025 documents that R1 "requires standby  
9 assistance with dressing and undressing or assistance with seasonal clothes selection." Record review  
10 reveals that R1 is not on a care or service plan to receive full assistance with waking up or dressing.  
11 Interviews with staff and R1 confirmed that R1 prefers to wake up later in the day to afternoon, which is  
12 why the morning shift staff had not attempted to dress R1 in the early morning of 08/29/2025. It was not  
13 until staff on shift were notified of R1's medical appointment an hour before the scheduled time, that  
14 they were able to assist R1 with waking up and dressing for the appointment. Record review confirms  
15 that R1 attended their appointment on 08/29/2025. Facility management held a meeting with R1's  
16 responsible parties and discussed the most appropriate ways to communicate appointments or care-  
17 related requests to ensure that all team members get the necessary information needed to act on the  
18 requests. Based on interviews and record review, the information obtained during the investigation does  
19 not have sufficient evidence to corroborate the allegation. Although the allegation may have happened  
20 or is valid, there is not sufficient evidence to prove the alleged violation did or did not occur, therefore  
21 the above allegation "Staff did not ensure that resident attended a medical appointment" is deemed  
22 **UNSUBSTANTIATED** at this time.

23  
24 It was further alleged that staff did not ensure R1 received their prescribed nasal spray medication for  
25 seventeen (17) days. Staff interviews confirmed that R1 went to a doctor's appointment for a  
26 cough/runny nose on 08/01/2025. The facility received a signed order from a physician on 08/01/2025  
27 for Atrovent 0.06% nasal spray which the facility faxed to Guardian Pharmacy to get filled. The  
28 pharmacy stated that it was not a valid order as the refills section and date of birth were blank, and  
29 subsequently the pharmacy attempted to contact the prescribing physician. The facility followed up on  
30 08/03/2025, 08/06/2025, and 08/07/2025 and the pharmacy stated the medication was being processed  
31 and would soon be delivered. However, the medication was not sent out because the order had expired  
32 and R1's insurance was not allowing for a refill. The medication was received on 08/10/2025 after facility  
followed up again on 08/09/2025 and 08/10/2025 and the pharmacy was able to contact R1's insurance  
to cancel the medication fulfillment at a different pharmacy. **Report Continued on LIC9099-C.**

**SUPERVISORS NAME:** Kristin Heffernan  
**LICENSING EVALUATOR NAME:** Angela Barutyan  
**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 02/19/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 02/19/2026

LIC9099 (FAS) - (06/04)

Page: 4 of 6

**Control Number 29-AS-20250829112317**

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

## COMPLAINT INVESTIGATION REPORT (Cont)

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES  
COMMUNITY CARE LICENSING DIVISION  
WOODLAND HILLS N.A.S.C, 21731 VENTURA BLVD. #250  
WOODLAND HILLS, CA 91364

**FACILITY NAME:** VARIEL OF WOODLAND HILLS, THE

**FACILITY NUMBER:** 195850240

**VISIT DATE:** 02/19/2026

### NARRATIVE

1 R1 did not receive the nasal spray for a total of nine (9) days from 08/01/2025-08/10/2025. However, the  
2 facility made multiple attempts to receive the medication. Based on interviews and record review, the  
3 information obtained during the investigation does not have sufficient evidence to corroborate the  
4 allegation. Although the allegation may have happened or is valid, there is not sufficient evidence to  
5 prove the alleged violation did or did not occur, therefore the above allegation "Staff did not ensure  
6 resident received prescribed medication" is deemed **UNSUBSTANTIATED** at this time.

7  
8 Lastly, it was alleged that on 08/28/2025, R1 had a confirmed outing to a hair salon with the facility's  
9 transportation but was then left in the heat for 2 and a half hours with no ride back and the facility not  
10 answering R1's/responsible party's calls. LPA reviewed the employee timecards for 08/28/2025 and  
11 observed that both drivers were clocked out of their shifts by 04:33PM. Staff interviews confirmed that  
12 the drivers are either scheduled from 8AM-04:30PM or 07:30AM-4PM. LPA interviewed staff who stated  
13 that R1 notified them of their appointment shortly before their hair appointment at 2PM on 08/28/2025.  
14 R1 and responsible parties were informed that the facility can accommodate the ride to the salon,  
15 however, the drivers will be done with their shifts by 04:30PM and that they will not be able to drive R1  
16 back to the facility if the appointment finishes after that time. Around 04:53PM the facility received a call  
17 from R1's responsible party stating that R1 has been waiting in the heat and no one has picked R1 up.  
18 The facility ordered a Lyft to R1's location at 04:56PM with a note to the driver that R1 "is at the hair  
19 salon." The facility attempted to call R1 and R1's responsible party to inform R1 that the Lyft driver had  
20 arrived, but was unable to get a response. The Lyft driver waited at the location until 05:10PM and

21 cancelled the ride due to "rider no-show." At 05:51PM, the facility ordered another Lyft with the same  
22 note to driver, however, the driver cancelled the ride at 06:02PM for "rider no-show." After the second  
23 cancellation, Administrator Lourdes Bustamante drove to R1's location and picked R1 up. R1 was back  
24 at the facility around 06:10PM, approximately 1 hour and 15 minutes from the first Lyft order at  
25 04:56PM. LPA reviewed call logs of the facility's drivers, R1, and concierge. There were no missed calls  
26 observed on 08/28/2025 to either driver. R1's call logs had no record of calls made to the facility on  
27 08/28/2025, however, there were six (6) missed calls from the facility to R1 between 05:53PM-05:59PM  
28 on 08/28/2025. The facility received a call from R1's responsible party around 04:53PM and the Lyft  
29 order was subsequently placed. LPA did not observe missed calls to the concierge.  
30

31 **Report Continued on LIC9099-C.**  
32

**SUPERVISORS NAME:** Kristin Heffernan

**LICENSING EVALUATOR NAME:** Angela Barutyan

**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 02/19/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 02/19/2026

LIC9099 (FAS) - (06/04)

Page: 5 of 6

**Control Number 29-AS-20250829112317**

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

## COMPLAINT INVESTIGATION REPORT (Cont)

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES  
COMMUNITY CARE LICENSING DIVISION  
WOODLAND HILLS N.ASC, 21731 VENTURA BLVD. #250  
WOODLAND HILLS, CA 91364

**FACILITY NAME:** VARIEL OF WOODLAND HILLS, THE

**FACILITY NUMBER:** 195850240

**VISIT DATE:** 02/19/2026

### NARRATIVE

1 The facility ordered multiple Lyft rides and made multiple attempts to contact R1 to arrange the  
2 transportation. Regulation states that, "in providing transportation the licensee shall do so directly or  
3 make arrangements for this service." Based on interviews and record review, the information obtained  
4 during the investigation does not have sufficient evidence to corroborate the allegation. Although the  
5 allegation may have happened or is valid, there is not sufficient evidence to prove the alleged violation  
6 did or did not occur, therefore the above allegation "Staff did not pick resident up from an appointment in  
7 a timely manner" is deemed **UNSUBSTANTIATED** at this time.

8  
9 No deficiencies cited at this time. Exit interview conducted. A copy of the report was provided.  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31  
32

**SUPERVISORS NAME:** Kristin Heffernan

**LICENSING EVALUATOR NAME:** Angela Barutyan

**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 02/19/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:** **DATE:** 02/19/2026