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Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 197606145
Report Date: 08/14/2019
Date Signed: 02/11/2022 10:37:23 AM

Substantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **COMPLAINT INVESTIGATION REPORT**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 1000 CORPORATE CNTR DR. ST 500 MONTEREY PARK, CA 91754

This is an official report of an unannounced visit/investigation of a complaint received in our office on **08/05/2019** and conducted by Evaluator Joe Katrdzhyan

PUBLIC	COMPLAINT CONTROL NUMBER: 28-AS-20190805131639

FACILITY NAME:	ARCADIA GARDENS RETIREMENT HOTEL		**FACILITY NUMBER:**	197606145
ADMINISTRATOR:	PAT REDNER		**FACILITY TYPE:**	740
ADDRESS:	720 W. CAMINO REAL		**TELEPHONE:**	(626) 574-8571
CITY:	ARCADIA	**STATE:** CA	**ZIP CODE:**	91007
CAPACITY:	200	**CENSUS:** 181	**DATE:**	08/14/2019
		UNANNOUNCED	**TIME BEGAN:**	08:45 AM
MET WITH:	Assistant Administrator / Valantine Ashjian Administrator / Pat Redner Licensee Representatives / Julie and David Chirikian		**TIME COMPLETED:**	03:30 PM

ALLEGATION(S):

1 Staff failed to keep residents call button in operable condition.
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INVESTIGATION FINDINGS:

1 ***This report is being amended and superseded for visit conducted on August 14, 2019, for purposes of
2 downgrading deficiency cited under Regulation Section 87303(a) - Maintenance and Operation, from a
3 Type A deficiency to a Type B deficiency. The findings on this complaint investigation remain
4 unchanged.***
5
6 Licensing Program Analyst (LPA) Joe Katrdzhyan conducted an unannounced 10 day complaint visit to
7 this facility. Upon arriving at the facility, LPA met with Assistant Administrator / Valantine Ashjian and was
8 later joined by Licensee Representatives / Julie and David Chirikian and the Administrator / Pat Redner
9 who assisted with the visit. LPA explained the purpose of today's visit is to discuss the above mentioned
10 allegation of "Staff failed to keep resident's call button in operable condition".
11 During today's visit, LPA interviewed Licensee Representatives / Julie and David Chirikian, Assistant
12 Administrator / Valantine Ashjian, Administrator / Pat Redner, Resident #2 and Technician / Sean
13 Thompson and his Supervisor / Don Gates from Safety Centric Security Installation. LPA attempted to

interview Resident #1 (R1) but R1 declined to speak with the LPA. Also, between the hours of 9:35AM and 10:15AM, LPA toured

Substantiated	Estimated Days of Completion:

NAME OF LICENSING PROGRAM MANAGER: Araceli Ramirez
NAME OF LICENSING PROGRAM ANALYST: Joe Katrdzhyan
LICENSING PROGRAM ANALYST SIGNATURE: **DATE:** 08/14/2019

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

FACILITY REPRESENTATIVE SIGNATURE: **DATE:** 08/14/2019

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

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **COMPLAINT INVESTIGATION REPORT**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 1000 CORPORATE CNTR DR. ST 500 MONTEREY PARK, CA 91754

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CAPACITY:	200	**CENSUS:** 181	**DATE:**	08/14/2019
		UNANNOUNCED	**TIME BEGAN:**	08:45 AM
MET WITH:	Assistant Administrator / Valantine Ashjian Administrator / Pat Redner Licensee Representatives / Julie and David Chirikian		**TIME COMPLETED:**	03:30 PM

ALLEGATION(S):

1 Staff failed to follow physician's order.
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INVESTIGATION FINDINGS:

1 Licensing Program Analyst (LPA) Joe Katrdzhyan conducted an unannounced 10 day complaint visit to
2 this facility. Upon arriving at the facility, LPA met with Assistant Administrator / Valantine Ashjian and was
3 later joined by Licensee Representatives / Julie and David Chirikian and the Administrator / Pat Redner
4 who assisted with the visit. LPA explained the purpose of today's visit is to discuss the above mentioned
5 allegation of "Staff failed to follow physician's order".
6
7 During today's visit, LPA interviewed the Administrator / Pat Redner and reviewed and obtained copies of
8 the following documents in reference to Resident #1 (R1); Admission Order and Physician's Order/Plan
9 of Care from Vitas Healthcare, Resident Assessment and Individualized Service Plan. LPA also
10 attempted to interview Resident #1 (R1) but R1 declined to speak with the LPA.
11
12 The investigation revealed the following;
13 Allegation: Staff failed to follow physician's order. During today's visit, LPA reviewed the file of R1 and

Unsubstantiated	Estimated Days of Completion:

NAME OF LICENSING PROGRAM MANAGER: Wei Siew Ho
NAME OF LICENSING PROGRAM ANALYST: Joe Katrdzhyan

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 08/14/2019

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 08/14/2019

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **COMPLAINT INVESTIGATION REPORT (Cont)**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 1000 CORPORATE CNTR DR. ST 500 MONTEREY PARK, CA 91754

FACILITY NAME: ARCADIA GARDENS RETIREMENT HOTEL

FACILITY NUMBER: 197606145

VISIT DATE: 08/14/2019

NARRATIVE

learned that R1 was admitted to Vitas Hospice on 6/20/18 due to having a terminally ill disease. Based on interview of the Administrator, LPA was told that facility has been following physician's orders and hospice notes in order to meet he needs of the R1. LPA was unable to interview R1 as R1 declined to speak with LPA. After reviewing the file of R1, LPA did not observe any concerns of facility not following physician's orders. There is insufficient evidence to support this allegation.

Although the allegation may have happened or is valid, there is not a preponderance of evidence to prove the alleged violation did or did not occur, therefore the allegation is Unsubstantiated.

An exit interview was conducted and a copy of this report was provided to the Administrator.

NAME OF LICENSING PROGRAM MANAGER: Wei Siew Ho
NAME OF LICENSING PROGRAM ANALYST: Joe Katrdzhyan
LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 08/14/2019

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 1000 CORPORATE CNTR

NARRATIVE

resident bedrooms located on the Basement floor of the D and E sections of the building and tested the call light buttons. LPA obtained a copy of the contract from Safety Centric regarding installation of the new call light system along with the "Call Light Safety Log" performed by staff.

The investigation revealed the following;

Allegation: Staff failed to keep residents call button in operable condition.
Based on interviews conducted of management, the statements obtained did not corroborate with this allegation. During a walk through of resident rooms located on the Basement floor of the D and E sections of the building and observed the following concerns;

-At 9:57AM, Assistant Administrator tested the call light button in Room #153E with LPA present and the call light button was observed to be inoperable as there was no light or sound on the intercom and no response from staff.
-At 10:05AM, Assistant Administrator tested the call light button in Room #155E with LPA present and the call light button was observed to be inoperable as there was no light or sound on the intercom and no response from staff.
-At 10:07AM, Assistant Administrator tested the call light button in Room #159E with LPA present and the call light button was observed to be inoperable as there was no light or sound on the intercom and no response from staff.
-At 10:09AM, Assistant Administrator tested the call light button in Room #157E with LPA present and the call light button was observed to be inoperable as there was no light or sound on the intercom and no response from staff.
-At 10:11AM, Assistant Administrator tested the call light button in Room #156E with LPA present and the call light button was observed to be inoperable as there was no light or sound on the intercom and no response from staff.
-At 10:13AM, Assistant Administrator tested the call light button in Room #158E with LPA present and the call light button was observed to be inoperable as there was no light or sound on the intercom and no response from staff.
-At 10:15AM, Assistant Administrator tested the call light button in Room #160E with LPA present and the call light button was observed to be inoperable as there was no light or sound on the intercom and no response from staff. LPA learned that the intercom has been in disrepair since 8/13/19.

NAME OF LICENSING PROGRAM MANAGER: Araceli Ramirez
NAME OF LICENSING PROGRAM ANALYST: Joe Katrdzhyan
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NARRATIVE

Based on LPAs observations, the only resident room located in the E section of building (basement level) with a working call light was Room #161E. Currently the facility is in the process of updating all resident rooms with a new call light and intercom through Safety Centric Security Installation (SCSI). After speaking with the Technician and his Supervisor from SCSI, LPA was told that although the facility is upgrading to a new call light system, nothing was disconnected on the existing call light system or wiring in resident rooms. Supervisor / Ron Gates stated that the new call light equipment is independent

from the exiting system and has a new wiring and a new brain. LPA was also told that the existing call light system is removed upon installation of the new call light system in each resident bedroom so that residents may continue to alert staff if needed without interruption.

Based on LPA's observations and interviews which were conducted, the preponderance of evidence standard has been met, therefore the above allegation is found to be Substantiated. California Code of Regulations, (Title 22, Division & Chapter number), are being cited on the attached LIC 9099D.

An exit interview was conducted and a copy of this report was provided to the Administrator along with the Appeals Rights.

NAME OF LICENSING PROGRAM MANAGER: Araceli Ramirez
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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

COMPLAINT INVESTIGATION REPORT (Cont)

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
CCLD Regional Office, 1000 CORPORATE CNTR DR. ST 500
MONTEREY PARK, CA 91754

FACILITY NAME: ARCADIA GARDENS RETIREMENT HOTEL **FACILITY NUMBER:** 197606145
DEFICIENCY INFORMATION FOR THIS PAGE: **VISIT DATE:** 08/14/2019

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
Request Denied Type B 08/15/2019 **Section Cited** CCR 87303(a)	Maintenance and Operation. The facility shall be clean, safe, sanitary and in good repair at all times. Maintenance shall include provision of maintenance services and procedures for the safety and well-being of residents, employees and visitors. This requirement is not met as evidenced by; On 8/14/19, During a walk through of resident	According to Licensee Representative / David Chirikian, a new call light system will be installed in rooms 153E, 155E, 159E, 157E, 156E, 158E and 160E by the end of today (8/14/19). In the mean time, there is one (1) staff monitoring the E section of the building from 7AM - 10PM (basement level) and will continue to monitor until the new call light
	rooms between the hours of 9:35AM - 10:15AM, the Assistant Administrator tested the call light button in the following resident rooms with LPA present and the call light button was observed to be inoperable as there was	system has been installed and is operable. Licensee will self certify to CCL once installation has been completed of the new call light system in the E section of the building by the POC due date.

	13 14	no light or sound on the intercom and no response from staff; Rooms 153E, 155E, 159E, 157E, 156E, 158E and 160E.	13 14	
ILS	1 2 3 4 5 6 7		1 2 3 4 5 6 7	
	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.

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