

Department of

# SOCIAL SERVICES

Community Care Licensing

## FACILITY EVALUATION REPORT

Facility Number: 197606301

Report Date: 12/09/2021

Date Signed: 12/09/2021 04:47:46 PM

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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 DR. ST 500 MONTEREY PARK, CA 91754
<b>FACILITY EVALUATION REPORT</b>	

FACILITY NAME: BROOKDALE MONROVIA	FACILITY NUMBER: 197606301
ADMINISTRATOR: BALBIN, RALPH	FACILITY TYPE: 740
ADDRESS: 201 E FOOTHILL BLVD	TELEPHONE: (626) 301-0204
CITY: MONROVIA	STATE: CA
CAPACITY: 75	ZIP CODE: 91016
TYPE OF VISIT: Required - 1 Year	CENSUS: 62
MET WITH: Business Office Manager / Diana Marquez	DATE: 12/09/2021
Assistant Administrator / Danny Vera	UNANNOUNCED TIME BEGAN: 08:45 AM
	TIME COMPLETED: 03:45 PM

NARRATIVE	
1	Licensing Program Analysts (LPAs) Joe Katrdzhyan and Alberto Lopez conducted a site visit for the
2	Required - 1 Year inspection. Upon arriving at the facility, LPAs met with Business Office Manager /
3	Diana Marquez and were later joined by the Assistant Administrator / Danny Vera who assisted with the
4	visit. The facility is licensed to serve for a capacity of 75 residents (41 Ambulatory and 34 Non-
5	Ambulatory only) ages 60 and above. Non-ambulatory to be housed on second floor only. No Bedridden
6	allowed. The facility has an approved Hospice Waiver on file for ten (10) Residents. Brookdale Monrovia
7	does not have an approved Dementia Care Plan in their plan of operation and does not accept or care
8	for residents with dementia. During today's visit, LPAs used the infection control domain to complete the
9	Required - 1 Year inspection. Also, the physical plant was toured, medication and food supplies
10	reviewed.
11	
12	LPA toured the physical plant areas inside and outside to ensure there are no health and safety hazards
13	and facility is in compliance with Title 22 Regulations. The ground floor consists of a dining room, living
14	room/activity room, laundry room, employee break room and a kitchen. The middle floor consists of
15	resident rooms, an outside patio, library, exercise room, beauty shop, medication room and a laundry
16	room. The upper floor consists of resident rooms and a laundry room. The garage is located on the
17	ground floor.
18	
19	LPA toured a random selection of resident rooms on each floor. Resident rooms were furnished
20	appropriately. Each resident room has their own restroom. The bathrooms were observed to be clean
21	and operational w/grab bars. The resident rooms have signal systems located in each room/restroom
22	and facility phones to call the front desk. The signal system was tested in various locations and is
23	operable. The hot water temperature was tested throughout the facility. The facility has central air and
24	heating accommodations.
25	
	The kitchen was observed. There was a sufficient amount of perishable and non-perishable food supplies and perishable food was stored in covered containers at the appropriate temperatures. No pesticides or poisons were stored in the food areas. Storage areas for cleaning solutions, toxics, knives, and hazardous items

Wei Siew Ho  
Joe Katrdzhyan

DATE: 12/09/2021

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 12/09/2021

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  
CCLD Regional Office, 1000 CORPORATE CNTR  
DR. ST 500  
MONTEREY PARK, CA 91754

## FACILITY EVALUATION REPORT (Cont)

FACILITY NAME: BROOKDALE MONROVIA

FACILITY NUMBER: 197606301

VISIT DATE: 12/09/2021

### NARRATIVE

1 were secured and made inaccessible to Residents. The fire extinguishers were observed to be fully  
2 charged and in compliance. The facility has carbon monoxide detectors in each resident room. The front  
3 grounds of the facility are well landscaped and have a leveled walkway to the entrance. The outdoor  
4 area was enclosed and no large bodies of water were observed. A shaded area with chairs is provided  
5 in the outside patio, located on the middle floor.  
6  
7 Medications are centrally stored in the locked medication room located on the middle floor. A random  
8 selection of medications were reviewed to ensure they are being administered as prescribed and  
9 prescription and non-prescription PRN medications have signed and dated written orders from the  
10 physician. The first-aid kit is fully stocked w/First-aid Manual.  
11  
12 The following deficiencies were observed during today's visit;  
13  
14 • The hot water temperature in the rooms listed below were not in compliance with Title 22  
15 Regulations:  
16  
17 At 11:12am, Room #105 kitchen - measured at 124 degrees F. & bathroom - measured at  
18 122.2 degrees F. At 11:19am, Room #131 kitchen - measured at 124.9 degrees F. & bathroom -  
19 measured at 123.1 degrees F. At 11:38am, Room #234 bathroom - measured at 123.1 degrees F.  
20 At 11:45am, Room 208 kitchen - measured at 121.2 degrees F. At 11:52am, Room #218 kitchen -  
21 measured at 98.5 degrees F., bathroom #1 - measured at 97.2 degrees F. & bathroom #2 - measured at  
22 68.1 degrees F.  
23  
24 • At 12:04pm, LPAs observed the wooden fence located by the east walk way was in disrepair. The  
25 fence had broken pieces and was leaning forward (towards the facility).  
26 • At 11:07am, LPAs observed the wall near the entrance of room #112 was in disrepair. There was  
27 a hole on the corner of the wall. At 11:12am, LPAs observed the kitchen top drawer (next to the  
28 sink) located in room #105 was in disrepair and would not open or close properly.  
29  
30  
31  
32 The following deficiencies were observed to be in violation of California code of Regulations, Title 22,  
Division 6 (refer to 809D)  
An exit interview was conducted and a copy of this report was provided along with the Appeals Rights.

SUPERVISOR'S NAME: Wei Siew Ho

LICENSING EVALUATOR NAME: Joe Katrdzhyan

LICENSING EVALUATOR SIGNATURE:

DATE: 12/09/2021

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 12/09/2021

LIC809 (FAS) - (06/04)

Page: 4 of 4

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Created By: Joe Katrdzhyan On 12/09/2021 at 02:45 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

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

**FACILITY EVALUATION REPORT (Cont)**

FACILITY NAME: BROOKDALE MONROVIA

FACILITY NUMBER: 197606301

DEFICIENCY INFORMATION FOR THIS PAGE:

VISIT DATE: 12/09/2021

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)	
<p>Type A 12/10/2021 Section Cited</p>	<p>1 Maintenance and Operation. Faucets 2 used by residents for personal care 3 such as shaving and grooming shall 4 deliver hot water. Hot water 5 temperature controls shall be 6 maintained to automatically regulate 7 the temperature of hot water used by 8 residents to attain a temperature of 9 not less than 105 degree F (41 10 degree C) and not more than 120 11 degree F (49 degree C).</p>		
	<p>8 This requirement is not met as 9 evidenced by: The hot water 10 temperature in the rooms listed 11 below were not in compliance with 12 Title 22 Regulations: At 11:12am, 13 Room #105 kitchen - measured at 14 124 degrees F. &amp; bathroom - 8 measured at 122.2 degrees F. At 9 11:19am, Room #131 kitchen - 10 measured at 124.9 degrees F. &amp; 11 bathroom - measured at 123.1 12 degrees F. At 11:38am, Room #234 13 bathroom - measured at 123.1 14 degrees F. At 11:45am, Room 208 kitchen - measured at 121.2 degrees F. At 11:52am, Room #218 kitchen - measured at 98.5 degrees F., bathroom #1 - measured at 97.2 degrees F. &amp; bathroom #2 - measured at 68.1 degrees F. This poses an immediate health and safety risk to persons in care.</p>	<p>and #218 (kitchen, bathroom #1 and bathroom #2).  POC must be submitted to CCL by the POC due date.</p>	
<p>Type B 12/16/2021 Section Cited</p>	<p>1 Maintenance and Operation. The 2 facility shall be clean, safe, sanitary 3 and in good repair at all times. 4 Maintenance shall include provision 5 of maintenance services and 6 procedures for the safety and well- 7 being of residents, employees and visitors.  8 This requirement is not met as 9 evidenced by:</p>		
	<p>8 At 11:07am, LPAs observed the wall 9 near the entrance of room #112 was 10 in disrepair. There was a hole on the</p>	<p>8</p>	<p>9 10</p>

11	corner of the wall. At 11:12am, LPAs	11
12	observed the kitchen top drawer	12
13	(next to the sink) located in room	13
14	#105 was in disrepair and would not	14
	open or close properly.	

Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

<b>SUPERVISOR'S NAME:</b>	Wei Siew Ho
<b>LICENSING EVALUATOR NAME:</b>	Joe Katrdzhyan
<b>LICENSING EVALUATOR SIGNATURE:</b>	
	<b>DATE:</b> 12/09/2021

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

<b>FACILITY REPRESENTATIVE SIGNATURE:</b>	
	<b>DATE:</b> 12/09/2021

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Created By: Joe Katrdzhyan On 12/09/2021 at 03:03 PM  
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<b>FACILITY EVALUATION REPORT (Cont)</b>	

**FACILITY NAME:** BROOKDALE MONROVIA

**FACILITY NUMBER:** 197606301

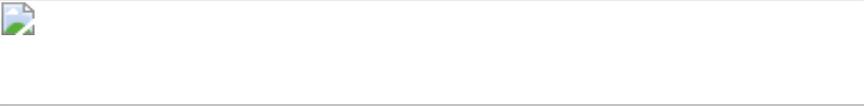
**DEFICIENCY INFORMATION FOR THIS PAGE:**

**VISIT DATE:** 12/09/2021

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)	
Type B 01/10/2022 Section Cited	1 Maintenance and Operation. The facility shall be clean, safe, sanitary and in good repair at all times. 2 Maintenance shall include provision 3 of maintenance services and 4 procedures for the safety and well-being of residents, employees and 5 visitors. 6 7 This requirement is not met as evidenced by:		
	8 At 12:04pm, LPAs observed the 9 wooden fence located by the east 10 walk way was in disrepair. The fence 11 had broken pieces and was leaning 12 forward (towards the facility). This 13 poses a potential health and safety 14 risk to persons in care.		
	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.**

<b>SUPERVISOR'S NAME:</b>	Wei Siew Ho
<b>LICENSING EVALUATOR NAME:</b>	Joe Katrdzhyan
<b>LICENSING EVALUATOR SIGNATURE:</b>	
	<b>DATE:</b> 12/09/2021

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

<b>FACILITY REPRESENTATIVE SIGNATURE:</b>	
	<b>DATE:</b> 12/09/2021