

Department of  
**SOCIAL SERVICES**

*Community Care Licensing*

# COMPLAINT INVESTIGATION REPORT

Facility Number: 197609117  
Report Date: 01/25/2021  
Date Signed: 01/25/2021 11:57:36 AM

## Unsubstantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 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 **01/11/2021** and conducted by Evaluator Ashley Smith

	<b>COMPLAINT CONTROL NUMBER: 29-AS-20210111085746</b>
--	---

<b>FACILITY NAME:</b> SILVERADO SENIOR LIVING - CALABASAS	<b>FACILITY NUMBER:</b> 197609117
<b>ADMINISTRATOR:</b> GIUNTO, TAYLOR	<b>FACILITY TYPE:</b> 740
<b>ADDRESS:</b> 25100 CALABASAS RD	<b>TELEPHONE:</b> (818) 222-1000
<b>CITY:</b> CALABASAS	<b>STATE:</b> CA <b>ZIP CODE:</b> 91302
<b>CAPACITY:</b> 110	<b>CENSUS:</b> 62 <b>DATE:</b> 01/25/2021
<b>MET WITH:</b> Taylor Giunto	<b>UNANNOUNCED TIME BEGAN:</b> 11:25 AM
	<b>TIME COMPLETED:</b> 11:35 AM

**ALLEGATION(S):**

1	Facility is unsanitary.
2	
3	
4	
5	
6	
7	
8	
9	

**INVESTIGATION FINDINGS:**

1	Licensing Program Analyst (LPA) Ashley Smith conducted a subsequent visit to deliver the findings for
2	the above allegation. Due to the situation surrounding the Coronavirus Disease 2019 (COVID-19), and to
3	implement mitigation measures, today's visit was conducted telephonically with Executive Director Taylor
4	Giunto. Staff interviews were conducted on 1/19/2021 at 2:23pm, 2:35pm and 2:56pm; and, on 1/22/2021
5	at 1:57pm, 2:46pm, 3:01pm, and 3:17pm. During today's visit, a virtual tour was conducted at 11:27am.
6	
7	It was alleged that the facility is unsanitary, as fecal matter was allegedly observed and it was not
8	cleaned for over an hour. Interviews revealed that most of the staff believe the facility is regularly cleaned
9	and that housekeeping staff respond to areas that require immediate attention, especially if a resident
10	has an accident. The LPA reviewed documentation that detailed the schedule for facility deep cleaning.
11	During the virtual tour, the facility appeared clean and sanitary. Based on the investigation, there is
12	insufficient evidence to support the claim that the facility is unsanitary. This allegation is deemed
13	Unsubstantiated at this time. No deficiencies cited. Exit interview conducted. A copy of the report was
	emailed for signature.

**Unsubstantiated**

**Estimated Days of Completion:**

**NAME OF LICENSING PROGRAM MANAGER:** Jeralyn Ann Pfannenstiel

**NAME OF LICENSING PROGRAM ANALYST:** Ashley Smith

**LICENSING PROGRAM ANALYST SIGNATURE:**

**DATE:** 01/25/2021

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 01/25/2021

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