

Department of

**SOCIAL SERVICES**

*Community Care Licensing*

**COMPLAINT INVESTIGATION REPORT**

Facility Number: 197609632

Report Date: 11/06/2025

Date Signed: 11/06/2025 03:24:15 PM

**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 **10/30/2025** and conducted by Evaluator Martha Arroyo

	<b>COMPLAINT CONTROL NUMBER: 29-AS-20251030123659</b>
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<b>FACILITY NAME:</b> RESERVE AT THOUSAND OAKS, THE	<b>FACILITY NUMBER:</b> 197609632
<b>ADMINISTRATOR:</b> SPENCER, ELIZABETH	<b>FACILITY TYPE:</b> 740
<b>ADDRESS:</b> 3575 N. MOORPARK ROAD	<b>TELEPHONE:</b> (805) 492-2471
<b>CITY:</b> THOUSAND OAKS	<b>ZIP CODE:</b> 91360
<b>CAPACITY:</b> 170	<b>DATE:</b> 11/06/2025
<b>MET WITH:</b> Elizabeth Spencer	<b>UNANNOUNCED TIME BEGAN:</b> 12:35 PM
	<b>TIME COMPLETED:</b> 03:30 PM

**ALLEGATION(S):**

1	Staff did not ensure that the facility kitchen was kept free of rodents.
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**INVESTIGATION FINDINGS:**

1	Licensing Program Analyst (LPA), Martha Arroyo conducted an initial complaint investigation visit for the above allegation. Upon arrival, the LPA met with Executive Director (ED), Elizabeth Spencer and explained the reason for the visit. Entrance interview.
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5	During today's visit, between 12:45 p.m. and 02:10 p.m., the LPA conducted a plant tour, observed the kitchen / food service area, conducted interviews with five staff, and obtained copies of pertinent documents relevant to the investigation.
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9	Report Continued on LIC 9099C...
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<b>Unsubstantiated</b>	<b>Estimated Days of Completion:</b>
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**SUPERVISORS NAME:** Desaree Perera  
**LICENSING EVALUATOR NAME:** Martha Arroyo  
**LICENSING EVALUATOR SIGNATURE:** \_\_\_\_\_  
**DATE:** 11/06/2025

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

**FACILITY REPRESENTATIVE SIGNATURE:** \_\_\_\_\_  
**DATE:** 11/06/2025

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 2  
**Control Number** 29-AS-20251030123659

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

**FACILITY NAME:** RESERVE AT THOUSAND OAKS, THE **FACILITY NUMBER:** 197609632  
**VISIT DATE:** 11/06/2025

NARRATIVE	
1	Report Continued from LIC 9099...
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4	It was alleged that staff did not ensure that the facility kitchen was kept free of rodents. It is the
5	complainant's concern that rodents have been observed near the kitchen area. During today's visit, the
6	LPA, along with the ED, toured the kitchen and food service areas. The LPA observed multiple rodent
7	boxes and traps set in place. Record review and interviews conducted revealed that the facility has been
8	receiving monthly pest control services from Pacific Exterminator and that additional rodent control
9	services were initiated as soon as a potential rodent issue was identified. Interviews with kitchen staff
10	indicated that although the pest control company visits several times a week to inspect and replace
11	traps, staff have never personally observed any rodents. Additionally, staff also confirmed that the pest
12	control company consistently inspects and replaces the rodent boxes and traps. Further record review
13	and interviews conducted revealed that the facility has also contracted Ventura Pest Control to provide
14	supplementary services in the meantime. Moreover, staff reported that no residents have expressed any
15	concerns or reported rodent sightings anywhere in the facility. Additionally, the facility has consistently
16	taken measures to ensure that the kitchen remains free of rodents. Based on the information obtained
17	and reviewed, although the allegation may be valid, the Department has insufficient evidence to support
18	allegation "staff did not ensure that the facility kitchen was kept free of rodents". Therefore, this
19	allegation is being deemed Unsubstantiated at this time.
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21	Exit interview. A copy of the report was provided.
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**SUPERVISORS NAME:** Desaree Perera  
**LICENSING EVALUATOR NAME:** Martha Arroyo  
**LICENSING EVALUATOR SIGNATURE:** \_\_\_\_\_  
**DATE:** 11/06/2025

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

**FACILITY REPRESENTATIVE SIGNATURE:** \_\_\_\_\_  
**DATE:** 11/06/2025