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Department of

SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 197610403
Report Date: 07/20/2026
Date Signed: 07/20/2026 02:55:51 PM

Unsubstantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **COMPLAINT INVESTIGATION REPORT**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION WOODLAND HILLS S.RO, 21731 VENTURA BLVD., STE. 250 WOODLAND HILLS, CA 91364

This is an official report of an unannounced visit/investigation of a complaint received in our office on **07/13/2026** and conducted by Evaluator Gina Saucedo

PUBLIC	COMPLAINT CONTROL NUMBER: 31-AS-20260713103718

FACILITY NAME:	SAVANT OF WEST HOLLYWOOD			**FACILITY NUMBER:**	197610403
ADMINISTRATOR:	ADAM SYNCHEFF			**FACILITY TYPE:**	740
ADDRESS:	1025 N FAIRFAX AVE			**TELEPHONE:**	(323) 656-7900
CITY:	LOS ANGELES	**STATE:** CA		**ZIP CODE:**	90046
CAPACITY:	130	**CENSUS:** 118		**DATE:**	07/20/2026
		UNANNOUNCED		**TIME BEGAN:**	08:49 AM
MET WITH:	Adam Syncheff-Administrator			**TIME COMPLETED:**	02:55 PM

ALLEGATION(S):

1	Staff are not following resident's care plan
2	Staff do not provide adequate food service to resident resulting in resident losing weight
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INVESTIGATION FINDINGS:

1	On 07/20/26, at 9:30am, Licensing Program Analyst (LPA) Gina Saucedo arrived at the facility to conduct
2	an unannounced, initial complaint visit and was greeted by Adam Syncheff, Administrator. LPA explained
3	the purpose of this visit was to gather information and deliver findings for this complaint.
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5	On 07/20/26, LPA Saucedo asked for the census, staff, and resident rosters. On 07/20/26, at 10:20am,
6	LPA Saucedo conducted a physical tour, interviewed both resident(s) and staff.
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8	LIC 9099C-continued
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Unsubstantiated	**Estimated Days of Completion:**

SUPERVISORS NAME: Troy Agard
LICENSING EVALUATOR NAME: Gina Saucedo
LICENSING EVALUATOR SIGNATURE:
DATE: 07/20/2026

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

FACILITY REPRESENTATIVE SIGNATURE:
DATE: 07/20/2026

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

Control Number 31-AS-20260713103718

FACILITY NAME: SAVANT OF WEST HOLLYWOOD **FACILITY NUMBER:** 197610403
VISIT DATE: 07/20/2026

NARRATIVE

Regarding the allegation: Staff are not following resident's care plan. It is alleged that resident #1 (R1)'s care plan is not being followed. LPA attempted to interview R1 but due to R1's son/Power of Attorney (POA) being in the room while the interview was being conducted and answering R1's questions by LPA, LPA concluded their interview with R1. During LPA's interview with R1's son/POA, they stated several things that were under R1's care plan. They stated that R1 has dentures that are supposed to be cleaned and put on and taken off from R1, R1 is not supposed to eat in their bed but instead transferred and moved to their recliner if R1 does not want to go to the dining hall, R1 is also on a special diet and their food is not supposed to be touching each other, R1's food is supposed to be in separate plates, R1 is supposed to not be waken up between the hours of 6AM-9AM, R1 is not supposed to attend activities but to be returned to their room after their shower and/or after eating, R1 is supposed to be on a two (2) hour watch. During LPA's interview with four (4) staff, it was confirmed that R1 used to eat on their own, R1 still wakes up on their own, R1 is on a regular staff watch which is several times per shift, R1 is now assisted with their new dentures, R1 is still assisted with showers, incontinence care, changing of clothes and R1 can take their own medication being assisted. The four (4) staff confirmed that R1 receives all the services in their care plan, and they try their best accommodating all of R1's needs and of the needs R1's son/POA wants. During LPA's interview with one (1) staff out of four (4) they also confirmed when R1 refuses to eat in the dining hall their food is taken to their room and R1 is not paying for those extra services also they have asked R1's son/POA to pay for a one-on-one for R1 to get additional help and R1's son/POA has declined to pay for those services. Three (3) out of the four (4) staff have confirmed that R1 is now requiring a higher level of care based on different areas that R1 cannot do on their own anymore like showering, incontinence, moving out of bed, eating by themselves is now requiring more than one staff. During LPA's review of R1's file- R1 reviewed and obtained R1's Face Sheet and Emergency Information, R1's Service Plan, R1's Resident Assessment, Preplacement Appraisal Information, R1's original physician report dated 04/2019 and the new updated Medical Assessment dated 06/2026 showing R1 is now non-ambulatory and their level of care has increased from having one (1) staff assisting to having two (2) staff assists, their cognitive/alertness has also declined and their behavior has become more aggressive. Two (2) out of the four (4) staff interviewed have been hit and bitten several times by R1.

LIC 9099C-continued

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NARRATIVE

Let it be noted on R1's service plan although it does not specify the care for R1's dentures, it does state dental and oral hygiene and it does state a special diet but it does not state the food to be separated in different plates and not touching each other, it does not state that R1 is not supposed to eat in there room on their bed and instead to be transferred to a recliner and eat and it does not state that R1 is supposed to not be awaken between the hours of 6AM-9AM. During LPA's physical tour, R1's son/POA was at the facility, when LPA asked R1's son/POA if R1 had home health or hospice and R1's son/POA denied R1 to have those services. R1's son also refused to pay for a one-on-one for R1 and has opted not to have those extra services and pay out of pocket. Furthermore, R1's food was removed by their son/POA because they stated R1 is not supposed to be eat in their bed. Therefore, based on the interviews conducted the allegation(s) is UNSUBSTANTIATED at this time.

Regarding the allegation: Staff do not provide adequate food service to resident resulting in resident losing weight. It is alleged that resident #1 (R1) has lost weight within the last year because of being served food R1 will not eat and it also takes R1 a long time to eat. In addition, the facility forgot to put R1's dentures in on 07/06/26, resulting in R1 not being able to eat. During LPA's interview with R1's son and/or power of attorney (POA), they told LPA that R1's food is supposed to be separated on their plate because R1 will choose what to eat and then R1 will not eat all their food. Furthermore, per R1's son/POA, R1 is not supposed to eat in their bed. They are supposed to be moved to their recliner and eat there. During LPA's physical tour, LPA observed R1's son/POA remove the food from R1 because they stated, "R1 is not supposed to eat in their bed." Let it be noted, R1's son/POA was at the facility at the time LPA was conducting their investigation/physical tour. During LPA's interview with four (4) staff, it was confirmed that R1's son/POA is not happy with the food and the service that is being provided to R1. The four (4) staff also confirmed that R1 is on a special diet and could only eat certain foods. Two (2) out of the four (4) staff confirmed that R1's son/POA wants to control everything about R1-how they sleep, what time they sleep, what time they wake-up, what they eat, where and how they eat, how many times R1 is changed and R1's son/POA does not want to turn off the cameras when R1's diaper/incontinence care is being taken care of which violates R1's rights to privacy. In addition, two (2) out of the four (4) staff confirmed that R1 needs and qualifies for home health or hospice because their level of care has changed and R1's son/POA has declined to get those services for R1.

LIC 9099C-continued

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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
WOODLAND HILLS S.RO, 21731 VENTURA BLVD., STE. 250
WOODLAND HILLS, CA 91364

FACILITY NAME: SAVANT OF WEST HOLLYWOOD **FACILITY NUMBER:** 197610403
VISIT DATE: 07/20/2026

NARRATIVE

During LPA's interview with R1, LPA asked R1 how they were doing and R1 stated, "Okay." LPA asked R1 how the staff was treating them and R1 stated, "fine." LPA attempted to continue to interview R1 but R1's son/POA continued to answer and interrupted LPA's interview with R1. Upon reviewing R1's file, LPA confirmed that R1 is on a special diet which is a diabetic diet which is noted on their medical assessment and service plan. Furthermore, R1's service plan does not state that R1's food is supposed to be separated into different categories/plates. Therefore, based on the interviews conducted the allegation(s) is UNSUBSTANTIATED at this time.

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

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