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Department of

SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 197610501
Report Date: 07/23/2026
Date Signed: 07/23/2026 04:45:24 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 **03/26/2025** and conducted by Evaluator Perchui Khurshudyan

	COMPLAINT CONTROL NUMBER: 31-AS-20250326120738

FACILITY NAME:	IVY PARK AT WEST HILLS			**FACILITY NUMBER:**	197610501
ADMINISTRATOR:	LIDIA CAUCHI			**FACILITY TYPE:**	740
ADDRESS:	9012 TOPANGA CANYON ROAD			**TELEPHONE:**	(818) 701-9550
CITY:	WEST HILLS	**STATE:** CA		**ZIP CODE:**	91304
CAPACITY:	90	**CENSUS:** 66		**DATE:**	07/23/2026
		UNANNOUNCED		**TIME BEGAN:**	02:15 PM
MET WITH:	Lidia Cauchi - Executive Director			**TIME COMPLETED:**	03:30 PM

ALLEGATION(S):

1	Staff are not mitigating the spread of infectious outbreaks in the facility
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INVESTIGATION FINDINGS:

1	On 7/23/2026 Licensing Program Analyst (LPA) Perchui Milena Khurshudyan conducted subsequent
2	complaint visit to investigate the above allegation and to deliver the final findings. Upon arrival, LPA met
3	with the Executive Director (ED) Lidia Cauchi and explained the reason for the visit.
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5	During the initial complaint visit conducted by LPA Khurshudyan on 4/4/2025, LPA requested copies of
6	resident and staff roster. LPA also requested copies of pertinent information which include, but not limited
7	to Admission Agreement, Appraisal Needs and Services, Physician Report, Unusual Incident Reports,
8	copy of Medication Administration Record (MAR), copy of staff training, copy of Department of Public
9	Health summary, and other documents relevant to the investigation. At approximately 09:15am, LPA
10	conducted a physical plant tour, to ensure health and safety of the residents are protected.
11	
12	Continue on LIC9099-C
13	

Unsubstantiated	**Estimated Days of Completion:**

SUPERVISORS NAME: Nichelle Gillyard
LICENSING EVALUATOR NAME: Perchui Khurshudyan
LICENSING EVALUATOR SIGNATURE:
DATE: 07/23/2026

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

FACILITY REPRESENTATIVE SIGNATURE:
DATE: 07/23/2026

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

Control Number 31-AS-20250326120738

FACILITY NAME: IVY PARK AT WEST HILLS **FACILITY NUMBER:** 197610501
VISIT DATE: 07/23/2026

NARRATIVE

Between 10:00am – 3:30pm, LPA conducted interviews with the Executive Director, Memory Care Director, Health Care Director, three (3) staff/caregivers, six (6) out of forty-five (45) residents residing at Assisted Living, two (2) family members of residents residing at Memory Care unit and attempted to speak with six (6) out of 15 residents residing at Memory Care unit.
During today's visit, at approximately 2:15pm, LPA Khurshudyan requested residents and staff rosters. LPA also conducted a physical plant tour to ensure health and safety of the residents are protected. No health and safety hazards noted during the visit.

Allegation: Staff are not mitigating the spread of infectious outbreaks in the facility.

It was reported that Resident 1 (R1), who resides in the facility's Memory Care "Evergreen" Unit, developed skin rash in September 2024 and was subsequently diagnosed with scabies by primary care physician. R1 received treatment, and the rash resolved. However, the rash and itching recurred in January 2025, and R1 received a second course of treatment. At the time of the investigation, R1 was symptom free, however, there was a concern that the rash could recur. To investigate the allegation, LPA interviewed the Executive Director (ED), Memory Care Director (MCD), Health Care Director - HCD, staff, residents, and family members/witnesses. Interviews with ED, MCD, Staff, and two family members, confirmed that two (2) residents in the Memory Care Unit experienced skin rash and itching consistent with scabies. Staff reported that responsible parties were promptly notified regarding the residents' skin condition, and the affected residents were evaluated by their primary care physicians, who prescribed appropriate treatment. Additionally, ED and MCD confirmed that the facility implemented Universal Precautions on a daily basis to reduce the risk of an outbreak throughout the facility. Interview with residents residing in the Assisted Livening denied having any skin issues, rash or itching. LPA reviewed the Incident Reports submitted to Community Care Licensing Division CCLD, physician documents, treatment records, and the facility's infection control and Universal Precaution policies. Documentation confirmed that the facility promptly reported the residents' skin condition to CCLD, notified responsible parties, and reported the outbreak to the Los Angeles Couty Department of Public Health. The facility received recommendations outlining corrective measures to immediately address and contain the outbreak and implemented those recommendations. According to the ED, the facility temporarily closed new admissions and residents' transfers, placed affected residents on contact isolation precautions, removed affected staff members from work duties until they were symptoms free and medically cleared to return to work.

Continue on LIC9099-C

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Control Number 31-AS-20250326120738

NARRATIVE

Facilities also conducted enhanced environmental cleaning and disinfection of affected areas, provided daily treatment and hygiene care to affected residents in accordance with physician's orders, and closely monitored residents and staff for any additional signs or symptoms of infection.

Based on interviews conducted, records reviewed, and documentation obtained during the course of investigation, LPA confirmed that although some residents were diagnosed with scabies, sufficient evidence demonstrated that the facility promptly implemented appropriate infection prevention and control measures to mitigate the spread of the outbreak. The facility followed physician recommendations, complied with public health and safety of residents and staff. Therefore, the allegation is deemed Unsubstantiated at this time.

No Deficiency issued during today's visit.

Exit interview conducted and copy of this report delivered.

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