

Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 198204069
Report Date: 04/07/2026
Date Signed: 04/07/2026 03:46:56 PM

Unsubstantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION EL SEGUNDO ASC, 400 CONTINENTAL BLVD, STE 340 EL SEGUNDO, CA 90245
COMPLAINT INVESTIGATION REPORT	

This is an official report of an unannounced visit/investigation of a complaint received in our office on 11/17/2025 and conducted by Evaluator Bernadette Allen

	COMPLAINT CONTROL NUMBER: 11-AS-20251117102758
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FACILITY NAME:	IVY PARK AT SANTA MONICA	FACILITY NUMBER:	198204069
ADMINISTRATOR:	CLIFTON DOUYON	FACILITY TYPE:	740
ADDRESS:	1312 15TH ST	TELEPHONE:	(310) 899-1976
CITY:	SANTA MONICA	ZIP CODE:	90404
CAPACITY:	100; 100	DATE:	04/07/2026
	STATE: CA	UNANNOUNCED TIME BEGAN:	03:37 PM
MET WITH:	Clifton Douyon-Administrator	TIME COMPLETED:	04:00 PM

ALLEGATION(S):

1	Licensee does not ensure that residents are able to sleep at night
2	Licensee does not ensure facility plumbing is maintained in good repair
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INVESTIGATION FINDINGS:

1	***This report supersedes the original report delivered on 11/21/2025. On 4/7/2026, Licensing Program Analyst (LPA) Bernadette Allen arrived at the facility to deliver the corrected 9099, providing clarification on the original report issued on 11/21/2025. ***
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5	On 11/21/2025, at 9:45AM, Licensing Program Analyst (LPA) Bernadette Allen conducted an
6	unannounced visit to conduct a complaint investigation and deliver findings for the alleged allegations.
7	LPA identified herself and met Clifton Douyon -Administrator who was informed of the purpose of the
8	visit.
9	On 11/21/2025 LPA requested and obtained a staff roster dated 8/27/2025 and resident roster dated
10	11/19/2025. LPA conducted interviews with staff members 1-5 (S1-S5) and Residents 1-8 (R1-R8)
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12	The Investigation consisted of the following:
13	Continued.....

Unsubstantiated	Estimated Days of Completion:
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SUPERVISORS NAME: Stephanie Cifuentes	
LICENSING EVALUATOR NAME: Bernadette Allen	
LICENSING EVALUATOR SIGNATURE:	DATE: 04/07/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 04/07/2026

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 4
Control Number 11-AS-20251117102758

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COMPLAINT INVESTIGATION REPORT (Cont)	

FACILITY NAME: IVY PARK AT SANTA MONICA	FACILITY NUMBER: 198204069
	VISIT DATE: 04/07/2026

NARRATIVE	
1	LPA requested copies of the following documents for Resident 1(R1) admissions agreement dated
2	6/30/2025, customer agreement dated 7/7/2025, physicians report dated 6/23/2025, plumbing invoice
3	for repairs dated 10/6/2025 and 10/18/2025, and proof of credit/refund for inconvenience for R1 dated
4	10/16/2025.
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6	LPA reviewed email correspondence reviewed between residents and/or responsible parties regarding
7	renovations being conducted with details of changes, projected timeline 7PM- 3AM, and floor order of
8	work dated 9/23/2025,10/24/2025 and a copy of the Notice dated 9/23/2025. LPA also toured the facility
9	and observed renovations had been done throughout the facility painted walls and new carpet/flooring.
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11	The investigation revealed the following:
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13	Allegation 1: Licensee does not ensure that residents are able to sleep at night
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15	On 11/21/2025, LPA interviewed staff members S1–S5. All five staff confirmed that residents and their
16	responsible parties were informed about the renovations both verbally and through written
17	correspondence/email. They also received the Executive Director’s update notice dated 9/23/2025,
18	which outlined the details of the building changes, the projected timeline (7:00 PM–3:00 AM) to minimize
19	disruption and foot traffic), and the work schedule for each floor.
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21	Staff acknowledged that there was intermittent noise during the renovation hours of 7:00 PM–3:00 AM,
22	and some residents expressed complaints. However, residents indicated they understood the
23	circumstances and did not report being unable to sleep; staff confirmed that residents were able to rest
24	despite the noise and efforts were made to minimize disruptions during nighttime hours to ensure
25	residents could sleep.
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27	The interviews with Resident 1-8 (R1-R8) were as follows, LPA attempted to interview R1 who no longer
28	reside at the facility, R2 stated that they had no problems with sleeping in the evening, R3 was on their
29	way to an appointment and unwilling to talk.
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	Continued

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COMPLAINT INVESTIGATION REPORT
(Cont)

CALIFORNIA DEPARTMENT OF SOCIAL
SERVICES
COMMUNITY CARE LICENSING DIVISION
EL SEGUNDO ASC, 400 CONTINENTAL BLVD, STE
340
EL SEGUNDO, CA 90245

FACILITY NAME: IVY PARK AT SANTA MONICA

FACILITY NUMBER: 198204069
VISIT DATE: 04/07/2026

NARRATIVE	
1	Based on interviews, documents reviewed and observation during the investigation, the above allegation
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4	is found to be Unsubstantiated; meaning that although the allegation may have happened or is valid,
5	there is not a preponderance of evidence to prove the alleged violation did or did not occur.
6	An exit interview was conducted where this report was discussed and provided to Clifton Douyon - Administrator at conclusion of the visit with appeal rights.
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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

COMPLAINT INVESTIGATION REPORT
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FACILITY NAME: IVY PARK AT SANTA MONICA

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VISIT DATE: 04/07/2026

NARRATIVE	
1	Residents R4, R5, R6, R7, and R8 reported that their sleep was occasionally interrupted due to the renovations. However, they understood the reason for the disturbance and stated that although there was some nighttime noise, they were still able to sleep. They also noted that staff and workers made efforts to minimize disruptions during the night.
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5	Allegation 2- Licensee does not ensure facility plumbing is maintained in good repair
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On 11/21/2025 LPA conducted interviews with staff members 1-5 (S1-S5) and 5 out of 5 staff members stated when plumbing issues occur in the building the plumber is called and scheduled for service.

LPA also received documentation of the plumbing service conducted on 9/2/2025, 9/3/2025, 9/13/2025, 9/16/2025, and 10/3/2025 including correspondence confirming relocation of R1 into another room along with refund/credit for concession/ inconvenience dated 10/27/2025.

The interviews with Resident 1-8 (R1-R8) were as follows. LPA attempted to interview R1 who no longer reside at the facility, R2 stated that they could not remember having any plumbing problems and R3 was on their way to an appointment and unwilling to talk.

The interviews with R4, R5, R6, R7 and R8 stated that they have not had any problems with plumbing in their rooms and if they did have plumbing problems management would be informed and they all expressed confidence that repairs would be made immediately.

CONTINUED

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