

Department of SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 198601646
Report Date: 08/28/2025
Date Signed: 08/28/2025 11:39:46 AM

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 **04/14/2025** and conducted by Evaluator Felisa Shirley

	COMPLAINT CONTROL NUMBER: 11-AS-20250414155636
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FACILITY NAME: BELMONT VILLAGE RANCHO PALOS VERDES	FACILITY NUMBER: 198601646
ADMINISTRATOR: BALBIN, RALPH	FACILITY TYPE: 740
ADDRESS: 5701 CRESTRIDGE RD	TELEPHONE: (310) 377-9977
CITY: RANCHO PALOS VERDES	STATE: CA
CAPACITY: 150	ZIP CODE: 90275
	CENSUS: UNANNOUNCED
MET WITH: Ralph Balbin, Executive Director	DATE: 08/28/2025
	TIME BEGAN: 11:02 AM
	TIME COMPLETED: 11:30 AM

ALLEGATION(S):

1	Staff did not provide resident with laundry service
2	Staff did not provide resident with housekeeping service
3	Staff did not assist resident with showering
4	Staff did not ensure facility was maintained sanitary
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6	
7	
8	
9	

INVESTIGATION FINDINGS:

1	*This report serves as an amendment to clarify findings. It does not supersede the complaint
2	investigation findings reflected on the report created 4/24/25.
3	
4	On 4/24/25 at 8:50 am, Licensing Program Analyst (LPA) Felisa Shirley, conducted an unannounced
5	complaint visit to the address listed above. LPA Shirley arrived and spoke to the Executive Director,
6	Ralph Balbin and the purpose of the visit was discussed. LPA was granted access to the facility.
7	
8	The investigation consisted of the following:
9	On 4/24/25 LPA requested and reviewed copies of the following records: Staff Roster, Resident Roster,
10	Admission Agreement, Physician's report, Assessments, Service Plan, Schedules of bathing,
11	housekeeping and laundry. LPA Felisa Shirley toured the facility and interviewed Staff #1 – 10 and
12	Residents #2 – 10. R1 was not available due to diagnosis.
13	Con'd on 9099-C

Unsubstantiated

Estimated Days of Completion:

NAME OF LICENSING PROGRAM MANAGER: Stephanie Cifuentes

NAME OF LICENSING PROGRAM ANALYST: Felisa Shirley

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 08/28/2025

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 08/28/2025

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

LIC9099 (FAS) - (06/04)

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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
(Cont)**

FACILITY NAME: BELMONT VILLAGE RANCHO PALOS VERDES

FACILITY NUMBER: 198601646

VISIT DATE: 08/28/2025

NARRATIVE

1 The investigation revealed the following:

2
3 Allegation: Staff did not provide resident with laundry service.
4

5
6 The details of the complaint allege that staff improperly stored soiled garments within the
7 resident's closet. LPA Shirley reviewed PAL Approach Chart and Service Plan for R1, July 2024
8 through December 2024. During review, LPA Shirley observed that R1's laundry day was
9 Fridays. LPA Shirley observed the initials of the caregivers providing the laundry service for
10 the week and that laundry service was consistent. LPA Shirley did not observe soiled
11 garments in the closet as R1 transferred out of this facility on 12/27/25.
12
13

14 LPA Shirley interviewed staff-1 thru staff-10 (S-1 thru S-10). LPA asked, how often does staff
15 wash the resident's clothes. Of those interviewed, 10 out of 10 staff answered twice a week.
16 LPA interviewed Resident-2 thru Resident-10 (R-2 thru R-10). LPA asked, how often does staff
17 clean your clothes. Of those interviewed, 7 out of 9 answered once a week, and 2 had other
18 answers.
19
20

21
22 Based on records review, interviews and observations, LPA did not find sufficient evidence to
23 support the above allegation. Although the allegations may have happened or are valid, there
24 is not a preponderance of evidence to prove the alleged violations did or did not occur,
25 therefore the allegation is **Unsubstantiated**.
26
27

28 Allegation: Staff did not provide resident with housekeeping services

29
30 The details of the complaint allege that R1's room was unclean. Per review of the Admissions
31 Agreement signed 5/30/14, Belmont Village will provide weekly housekeeping services for
32 the

Con'd on 9099-C

NAME OF LICENSING PROGRAM MANAGER: Stephanie Cifuentes

NAME OF LICENSING PROGRAM ANALYST: Felisa Shirley

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 08/28/2025

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

FACILITY REPRESENTATIVE SIGNATURE: **DATE:** 08/28/2025

LIC9099 (FAS) - (06/04)

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Control Number 11-AS-20250414155636

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY 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
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FACILITY NAME: BELMONT VILLAGE RANCHO PALOS VERDES

FACILITY NUMBER: 198601646

VISIT DATE: 08/28/2025

NARRATIVE

1 the residents. LPA Shirley reviewed PAL Approach Chart and Service Plan for R1, July 2024
2 through December 2024. During review, LPA Shirley observed that R1's housekeeping day was
3 Fridays. During review, LPA Shirley observed that there were specific areas of R1's room that
4 were tidied up daily. Per the Executive Director's interview, the rooms are deep cleaned
5 weekly. Per review of the PAL Approach Chart and Service Plan, LPA Shirley observed the
6 initials of the staff members providing housekeeping services consistently. LPA Shirley did not
7 observe an unkept room as R1 transferred out of this facility on 12/27/25.
8
9
10
11 LPA Shirley interviewed staff-1 thru staff-10 (S-1 thru S-10). LPA asked, how often does the
12 housekeeping staff clean the resident's rooms. Of those interviewed, 9 out of 10 staff
13 answered once a week, one answered 2 or 3 times a week. LPA interviewed Resident-2 thru
14 Resident-10 (R-2 thru R-10). LPA asked, how often does staff clean your room. Of those
15 interviewed, 3 out of 9 answered once a week, and 6 had other answers.
16
17
18 Based on records review, interviews and observations, LPA did not find sufficient evidence to
19 support the above allegation. Although the allegations may have happened or are valid, there
20 is not a preponderance of evidence to prove the alleged violations did or did not occur,
21 therefore the allegation is **Unsubstantiated**.
22
23
24 Allegation: Staff did not assist resident with showering
25
26
27 The details of the complaint allege that facility staff stopped giving R1 showers. LPA reviewed
28 R1's Physicians Report signed, 10/24/23 and observed that R1 was not able to bathe herself.
29 LPA reviewed R1's assessment dated, 12/12/24. The assessment stated that R1 needed hands
30
31
32 Con'd on 9099-C

NAME OF LICENSING PROGRAM MANAGER: Stephanie Cifuentes
NAME OF LICENSING PROGRAM ANALYST: Felisa Shirley
LICENSING PROGRAM ANALYST SIGNATURE: **DATE:** 08/28/2025

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

FACILITY REPRESENTATIVE SIGNATURE: **DATE:** 08/28/2025

LIC9099 (FAS) - (06/04)

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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 EL SEGUNDO ASC, 400 CONTINENTAL BLVD, STE 340 EL SEGUNDO, CA 90245
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FACILITY NAME: BELMONT VILLAGE RANCHO PALOS VERDES

FACILITY NUMBER: 198601646

VISIT DATE: 08/28/2025

NARRATIVE

1 on assistance with showers. LPA Shirley reviewed the PAL Approach Chart and Service Plan for
 2 R1, July 2024 through December 2024. During review, LPA Shirley observed that R1's assigned
 3 shower days were Mondays, Wednesdays and Fridays. Upon further review of the PAL
 4 Approach Chart and Service Plan, LPA Shirley observed the initials of the caregivers assisting
 5 R1 with her showers and that this service continued until the day R1 moved out 12/27/25.
 6
 7
 8 LPA Shirley interviewed staff-1 thru staff-10 (S-1 thru S-10). LPA asked, does staff assist
 9 residents with their showering needs. Of those interviewed, 10 out of 10 staff answered yes.
 10 LPA interviewed Resident-2 thru Resident-10 (R-2 thru R-10). LPA asked, does staff assist you
 11 with your showering needs. Of those interviewed, 8 out of 9 answered that they are
 12 independent, and 1 resident did not answer.
 13
 14
 15 Based on records review, interviews and observations, LPA did not find sufficient evidence to
 16 support the above allegation. Although the allegations may have happened or are valid, there
 17 is not a preponderance of evidence to prove the alleged violations did or did not occur,
 18 therefore the allegation is **Unsubstantiated**.
 19
 20
 21 Allegation: Staff did not ensure facility was maintained sanitary
 22
 23
 24 The details of the complaint allege that Belmont Village failed to fulfill the terms of their care
 25 agreement as the carpet in R1's room #205 was unclean. LPA Shirley toured the facility to
 26 observe the carpeting in room #205 and observed that the room had been upgraded for the
 27 next resident. There was no longer carpet in the room. Room #205 now has vinyl wood
 28 flooring. LPA reviewed pictures provided and observed that there was a rug covering a soiled
 29 area near where the bed used to be situated. This area was not observed until the resident
 30 transferred out 12/27/25.
 31
 32
 Con'd on 9099-C

NAME OF LICENSING PROGRAM MANAGER: Stephanie Cifuentes
NAME OF LICENSING PROGRAM ANALYST: Felisa Shirley
LICENSING PROGRAM ANALYST SIGNATURE: _____ **DATE:** 08/28/2025

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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 EL SEGUNDO ASC, 400 CONTINENTAL BLVD, STE 340 EL SEGUNDO, CA 90245
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FACILITY NAME: BELMONT VILLAGE RANCHO PALOS VERDES **FACILITY NUMBER:** 198601646

VISIT DATE: 08/28/2025

NARRATIVE	
1	LPA Shirley interviewed staff-1 thru staff-10 (S-1 thru S-10). LPA asked, does staff maintain a
2	sanitary facility. Of those interviewed, 10 out of 10 staff answered yes. LPA interviewed
3	Resident-2 thru Resident-10 (R-2 thru R-10). LPA asked, does staff maintain a sanitary facility.
4	Of those interviewed, 8 out of 9 answered yes, and 1 resident did not answer.
5	
6	
7	Based on records review, interviews and observations, LPA did not find sufficient evidence to
8	support the above allegation. Although the allegations may have happened or are valid, there
9	is not a preponderance of evidence to prove the alleged violations did or did not occur,
10	therefore the allegation is Unsubstantiated .
11	
12	

13 Regarding the allegations, the Department found no evidence to support the allegations
14 mentioned above. Although the allegation may have happened or is valid, there is not a
15 preponderance of evidence to prove the alleged violation did or did not occur, as a result, the
16 allegations are Unsubstantiated.
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19 No deficiencies were cited for these allegations.
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22 An exit interview was conducted and a copy of this report was provided to the Executive
23 Director, Ralph Balbin.
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NAME OF LICENSING PROGRAM MANAGER: Stephanie Cifuentes

NAME OF LICENSING PROGRAM ANALYST: Felisa Shirley

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 08/28/2025

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