

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198601778
Report Date: 07/09/2021
Date Signed: 07/09/2021 04:51:38 PM

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STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 1000 CORPORATE CNTR DR. ST 500 MONTEREY PARK, CA 91754
FACILITY EVALUATION REPORT	

FACILITY NAME: BROOKDALE UPTOWN WHITTIER	FACILITY NUMBER: 198601778
ADMINISTRATOR: MAGPAY, PRECIOSA (SUZIE)	FACILITY TYPE: 740
ADDRESS: 13250 E PHILADELPHIA ST	TELEPHONE: (562) 945-3904
CITY: WHITTIER	STATE: CA
CAPACITY: 280	ZIP CODE: 90601
TYPE OF VISIT: Required - 1 Year	CENSUS: 111
MET WITH: Suzie Mgpayo- Administrator	DATE: 07/09/2021
	UNANNOUNCED TIME BEGAN: 08:20 AM
	TIME COMPLETED: 12:45 PM

NARRATIVE	
1	Licensing Program Analyst (LPA) Christine Wong conducted an annual required visit. LPA met with
2	Maintenance Director Jonathan Renojo and explained the reason for the visit. Shortly after, the
3	administrator Suzie Magpayo arrived and assisted with the visit. LPA used the infection control tool to
4	evaluate the facility. LPA observed the facility plant, COVID-19 procedures, reviewed residents'
5	medications, observed food supply, and reviewed resident and staff files. Facility has submitted a
6	mitigation plan and approved on 04/03/21,
7	
8	The facility is located at the city downtown area. The facility building consists of four (4) floors. LPA
9	inspected dining area, lobby area, activity room and room#105, #106, #108, #207, #241, #245, #301,
10	#303, #343, #416, #419 and #423. Each resident's apartment/bedroom has required furniture, linen,
11	sufficient closet space, dresser and lighting. Each bathroom has required grab bars and non-skid mats
12	in the shower and near the toilet. The hot water temperature was measured at each bathroom from
13	107.6 and 119.1 and met Title 22 regulations. There is a signal/call system in each resident apartment
14	and it is functioning properly. The facility kitchen was observed for the ability to prepare and serve food.
15	LPA observed an appropriate food supply of two (2) days perishable and one week (7 days) of non-
16	perishables. Smoke detectors were tested and most were functioning properly. Carbon monoxide
17	detectors were observed and tested.
18	
19	LPA's reviewed 10 resident files to confirm emergency contact is updated. LPA's also reviewed staff files
20	to confirm health screenings and fingerprint clearances and they all have required documents in file.
21	LPA's reviewed 10 residents' medication and are centrally stored, locked and the records are current.
22	
23	No deficiencies issued under California Code of Regulations of Regulations Title 22.
24	
25	Exit interview conducted and the copy of the report was provided to Suzie Mgpayo

Christine Yee
Christine Wong



DATE: 07/09/2021

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 07/09/2021

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