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Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 198603267
Report Date: 08/21/2026
Date Signed: 08/21/2026 04:57:04 PM

Unsubstantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY **COMPLAINT INVESTIGATION REPORT**	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION MONTEREY PARK ASC, 1000 CORPORATE CNTR DR. ST 500 MONTEREY PARK, CA 91754

This is an official report of an unannounced visit/investigation of a complaint received in our office on **08/20/2026** and conducted by Evaluator Bonnie Tao

PUBLIC	COMPLAINT CONTROL NUMBER: 28-AS-20260820112700

FACILITY NAME:	SILVERADO SENIOR LIVING-SIERRA VISTA			**FACILITY NUMBER:**	198603267
ADMINISTRATOR:	GWINN, VIDA			**FACILITY TYPE:**	740
ADDRESS:	125 E. SIERRA MADRE AVE			**TELEPHONE:**	(626) 812-9777
CITY:	AZUSA	**STATE:** CA		**ZIP CODE:**	91702
CAPACITY:	87	**CENSUS:** 73		**DATE:**	08/21/2026
		UNANNOUNCED		**TIME BEGAN:**	08:00 AM
MET WITH:	Vida Gwinn, Administrator			**TIME COMPLETED:**	04:30 PM

ALLEGATION(S):

1	Staff member worked while under the influence of alcohol, impairing their ability to provide adequate care and supervision, which presents a risk to residents in care.
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INVESTIGATION FINDINGS:

1	Licensing Program Analyst (LPA) Tao conducted an unannounced 10-day complaint visit to the facility.
2	Upon arriving at the facility, LPA met with Administrator Vida Gwinn. LPA explained the purpose of today's
3	visit and discussed the allegation with Administrator Gwinn.
4	
5	The investigation consisted of six (6) resident interviews, eight (8) staff interviews, physical plant tour,
6	and facility records reviews of the obtained records, including resident roster, staff roster, staff#4 (S4)
7	Personnel Record, S4's annual review, Human Resource email correspondence, Handbook on Alcohol
8	and Substance Abuse Policy, FMLA/Leave of Absence Claim, and Employee Assistance Program (EAP).
9	
10	The investigation revealed the following:
11	
12	(-continued on LIC 9099C-)
13	

Unsubstantiated	Estimated Days of Completion:

SUPERVISORS NAME: Lisa Hicks
LICENSING EVALUATOR NAME: Bonnie Tao
LICENSING EVALUATOR SIGNATURE:
DATE: 08/21/2026

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

FACILITY REPRESENTATIVE SIGNATURE:
DATE: 08/21/2026

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

Control Number 28-AS-20260820112700

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION MONTEREY PARK ASC, 1000 CORPORATE CNTR DR. ST 500 MONTEREY PARK, CA 91754
COMPLAINT INVESTIGATION REPORT (Cont)	

FACILITY NAME: SILVERADO SENIOR LIVING-SIERRA VISTA **FACILITY NUMBER:** 198603267

VISIT DATE: 08/21/2026

NARRATIVE

Regarding allegation: Staff member worked while under the influence of alcohol, impairing their ability to provide adequate care and supervision, which presents a risk to residents in care. It is alleged that a staff was drunk at work which impaired the staff's ability to provide care and supervision and present a risk to residents. Per resident interviews, six (6) out of eight (6) interviewed could not corroborate the allegation.

Per staff interviews, all eight (8) staff interviewed could not corroborate the allegation. The staff interview revealed that no staff were observed to be drunk on the job. The incident of staff who was under the influence of alcohol occurred outside of the facility after work hours. Per record review, the alleged staff had a very minimal interaction with residents due to staff's job nature. The facility policy has zero tolerance on alcohol and substance abuse. Per Administrator's interview, Administrator Gwinn would provide professional psychological support, consultation and Employee Assistance Program (EAP) to staff who need the support. The facility would follow up with the staff and be more aware of staff's psychological well-being.

Based on the information obtained during the investigation, interviews with staff and residents, review of resident files and LPA's observation, the investigation did not reveal any evidence to support the allegations mentioned above.

Although the allegations may have happened or are valid, there is no preponderance of evidence to prove the alleged violations did or did not occur, therefore, the allegations are UNSUBSTANTIATED.

An exit interview was conducted with Administrator Vida Gwinn. The findings were discussed and a copy of this report was provided.

SUPERVISORS NAME: Lisa Hicks
LICENSING EVALUATOR NAME: Bonnie Tao
LICENSING EVALUATOR SIGNATURE:
DATE: 08/21/2026

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