

Department of SOCIAL SERVICES

Community Care Licensing

FACILITY EVALUATION REPORT

Facility Number: 198603479

Report Date: 10/18/2025

Date Signed: 10/18/2025 01:20:53 PM

Document Has Been Signed on 10/18/2025 01:20 PM - It Cannot Be Edited

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
--	--

FACILITY NAME:	OAKMONT OF WHITTIER	FACILITY NUMBER:	198603479
ADMINISTRATOR/RUNGE, ADRIANE		FACILITY TYPE:	740
DIRECTOR:		TELEPHONE:	(562) 693-8222
ADDRESS:	13617 WHITTIER BLVD.	STATE: CA	ZIP CODE: 90605
CITY:	WHITTIER	CENSUS: 67	DATE: 10/18/2025
CAPACITY:	97	UNANNOUNCED TIME VISIT/	
TYPE OF VISIT:	Case Management - Annual Continuation	INSPECTION	10:42 AM
MET WITH:	Administrator Adriane Runge	BEGAN:	
		TIME VISIT/	
		INSPECTION	01:30 PM
		COMPLETED:	

NARRATIVE

1 Licensing Program Analyst (LPA) Kimberly Ramirez conducted an unannounced subsequent annual
2 inspection visit on 10/18/2025 and was greeted by Gina Alvarez- Business Office Director and discussed
3 the purpose of today's visit. LPA Ramirez conducted initial annual inspection on 10/02/2025.
4 Administrator Adriane Runge arrived shortly after to assist. LPA Ramirez identified herself and explained
5 the purpose of the visit.
6
7 **Operational Requirements:** The fire clearance is approved for ninety-seven (97) non- ambulatory
8 resident, of which seven (7) may be bedridden. This facility may retain no more than fifteen (15) hospice
9 residents. There were eight (8) residents under hospice care, during annual inspection.
10
11
12 **Staffing:** Administrator Certificate (7003384740) for Adriane Runge with an expiration date of
13 06/05/2027 was observed. Staff employed are over the age of 18 and are fingerprint cleared and
14 associated to the facility.
15 **Personnel Records Training:** Staff files are maintained at the facility. LPA Ramirez observed required
16 annual training, CPR and First Aid for six (6) out of the six (6) personnel record reviewed. LPA Ramirez
17 observed TB testing results, Health screening, fingerprint clearance and job application for six (6) out of
18 the six (6) personnel record reviewed.
19
20 **Resident Records/Incident Reports:** LPA reviewed resident records for six (6) residents in care.
21 Resident records are maintained at the facility. Admission Agreement, Physician's Report (including T.B
22 and Ambulatory Status), Consent for Medical Treatment, Preplacement Appraisal Information, Resident
23 Pre-Appraisal, Care Plan/Appraisal/Needs and Services Plan, Resident Rights were observed.
24
25 **Planned Activities:** LPA Ramirez observed board games, magazines, and other activities for residents.

Disaster Preparedness: The facility has the Emergency Disaster Plan (LIC610D/9 pages) in place. Last documented emergency drills were conducted on 09/27/2025. LPA Ramirez observed facility sketches with exits and emergency exits routes throughout various locations of the facility. LPA Ramirez observed emergency food supply located in pantry.

Health Related Services/Incidental Medical Services: The medications are centrally stored in the medication room and in bubble packs and/or original containers. LPA Ramirez observed Centrally Stored Medication and Destruction Record. The facility provides incidental medical services. No deficiencies were observed during this visit. Exit interview conducted. A copy of this report was provided.

NAME OF LICENSING PROGRAM MANAGER: Fernando Fierros

NAME OF LICENSING PROGRAM ANALYST: Kimberly Ramirez

LICENSING PROGRAM ANALYST SIGNATURE:



DATE: 10/18/2025

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

FACILITY REPRESENTATIVE SIGNATURE:



DATE: 10/18/2025

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

FACILITY EVALUATION REPORT California law requires a public report of each licensing visit/inspection. This report is a record for the facility and the licensing agency. This report is available for public review; therefore, care is taken not to disclose personal or confidential information. Inquiries concerning the location, maintenance, and contents of these reports may be directed to the Licensing Program Analyst or Regional Office whose address and telephone number are listed on the front of this form.

DEFICIENCIES A deficiency is an instance of noncompliance with licensing requirements, including applicable statutes, regulations, interim licensing standards, operating standards, and written directives. Applicants/ licensees must be notified in writing of all licensing deficiencies. Deficiencies are listed on the left side of this form, and the applicable licensing requirement upon which the deficiency is identified. There are two types of deficiencies:

- Type A deficiencies are violations of licensing requirements that, if not corrected, have a direct and immediate risk to the health, safety, or personal rights of persons in care.
- Type B deficiencies are violations of licensing requirements that, without correction, could become a risk to the health, safety, or personal rights of persons in care, a recordkeeping violation that could impact the care of said persons and/or protection of their resources, or a violation that could impact those services required to meet the needs of persons in care.

PLANS OF CORRECTION (POCs) The licensing agency is required to establish a reasonable length of time to correct a deficiency. In order to set the time, the licensing agency must take into consideration the seriousness of the violation, the number of persons in care involved, and the availability of equipment and personnel necessary to correct the violation. Applicants/licensees are requested to provide a specific plan for each violation on the right side of the form across from each deficiency. The more specific the plan, the less chance exists for any misunderstanding in setting time limits and reviewing corrections. The applicant/licensee who encounters problems beyond their control in completing the corrections within the specified time frame may request and may be granted an extension of the correction due date by the licensing agency.

CORRECTION NOTIFICATION The applicant/licensee is responsible for completing all corrections and promptly notifying the licensing agency of corrections. Applicants/licensees are advised to keep a dated copy of any correspondence sent to the licensing agency concerning corrections, or if corrections are telephoned to the licensing agency, the date, person contacted, and information given.

CIVIL PENALTIES The licensing agency is required by law to issue a Penalty Notice, when applicable, to all facilities holding a license issued by the licensing agency, or subject to licensure, except Certified Family Homes, Resource Families, and Foster Family Homes, or any governmental entity.

PENALTY NOTICE GIVEN The statement concerning civil penalties serves as a penalty notice on this Licensing Report and failure to correct cited licensing deficiencies will result in civil penalties. Applicants/ licensees are required to pay civil penalties when administrative appeals have been exhausted and in accordance with any payment arrangements made with the licensing agency.

APPEAL RIGHTS The applicant/licensee has a right without prejudice to discuss any disagreement in this report with the licensing agency concerning the proper application of licensing requirements. The applicant/ licensee may request a formal review by the licensing agency to amend or dismiss the notice of deficiency and/ or civil penalty. Requests for review shall be made in writing within 15 business days of receipt of a deficiency notification or civil penalty assessment. Licensing deficiencies may be appealed pursuant to the procedures in the LIC 9058 Applicant/Licensee Rights.

AGENCY REVIEW The licensing agency review of an appeal may be conducted based upon information provided in writing by the applicant/licensee. The applicant/licensee may request an office meeting to provide additional information. The applicant/licensee will be notified in writing of the results of the agency review within 60 business days of the date when all necessary information has been provided to the licensing agency.

EMAIL REQUIREMENT Adult Community Care Facilities, Residential Care Facilities for the Chronically Ill, and Residential Care Facilities for the Elderly are required to provide and maintain an active email address of record with the licensing agency.