

# Department of SOCIAL SERVICES

*Community Care Licensing*

## COMPLAINT INVESTIGATION REPORT

Facility Number: 198603553

Report Date: 10/07/2025

Date Signed: 10/07/2025 10:10:08 AM

### Substantiated

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
<b>COMPLAINT INVESTIGATION REPORT</b>	

This is an official report of an unannounced visit/investigation of a complaint received in our office on **07/17/2025** and conducted by Evaluator Elizabeth Irra

<b>PUBLIC</b>	<b>COMPLAINT CONTROL NUMBER: 28-AS-20250717092352</b>
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<b>FACILITY NAME:</b> TIMERS RESIDENTIAL CARE	<b>FACILITY NUMBER:</b> 198603553
<b>ADMINISTRATOR:</b> WILLIAMS, SHAUNDA	<b>FACILITY TYPE:</b> 740
<b>ADDRESS:</b> 452 PEMBROOK AVENUE	<b>TELEPHONE:</b> (424) 457-9771
<b>CITY:</b> POMONA	<b>ZIP CODE:</b> 91766
<b>CAPACITY:</b> 6	<b>DATE:</b> 10/07/2025
<b>MET WITH:</b> Shaunda Williams	<b>UNANNOUNCED TIME BEGAN:</b> 09:40 AM
	<b>TIME COMPLETED:</b> 10:15 AM

#### ALLEGATION(S):

1	Personal Rights/Conduct inimical- S1's conduct poses a health and safety concern.
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#### INVESTIGATION FINDINGS:

1	Licensing Program Analysts (LPAs) Elizabeth Irra and Nune Margaryan conducted a subsequent visit to deliver findings for the above allegation. LPA was allowed entry by Shaunda Williams (Administrator).
2	LPAs discussed the purpose of today's visit.
3	
4	
5	On 07/18/25, LPA Nune Margaryan conducted the initial visit. During this visit, LPA Margaryan conducted a tour of the living room, dining area, kitchen, outside of facility, common areas and resident rooms. The kitchen had sufficient perishable and non-perishable food. Resident rooms and common areas were properly furnished. LPA did not observe any signs of neglect, abuse or other immediate health and safety threats. LPA Margaryan requested copies of staff and resident roster along with other pertinent documentation.
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7	
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12	Refer to LIC 9099C for the continuation of this report.
13	

<b>Substantiated</b>	<b>Estimated Days of Completion:</b>
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**SUPERVISORS NAME:** Wei Siew Ho  
**LICENSING EVALUATOR NAME:** Elizabeth Irra  
**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 10/07/2025

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 10/07/2025

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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MONTEREY PARK ASC, 1000 CORPORATE CNTR  
DR. ST 500  
MONTEREY PARK, CA 91754

## COMPLAINT INVESTIGATION REPORT (Cont)

**FACILITY NAME:** TIMERS RESIDENTIAL CARE

**FACILITY NUMBER:** 198603553

**VISIT DATE:** 10/07/2025

### NARRATIVE

1 During this investigation, Michele Salant (Department of Social Services Community Care Licensing  
2 Investigation Branch) interviewed Individual #1 (I-1) through Individual #3 (I-3), Resident #1 (R-1) and  
3 Resident #2 (R-2), S1, obtained police reports from the Pomona Police Department, obtained video  
4 footage and photos of S1 pertaining to this incident, obtained a copy from the Pomona Courthouse.  
5  
6 **Allegation: Personal Rights/Conduct inimical- S1's conduct poses a health and safety concern.** It  
7 has been alleged that on 07/15/25, S-1 was involved in a physical altercation at a park with other  
8 individuals and was observed to use a baseball bat with the intent of hitting the individuals involved and  
9 also used a baseball bat to vandalized a vehicle. Interviews revealed that on 07/15/25, S1, was involved  
10 in a physical altercation with a group of individuals at a park. S1 confirmed participating in this fight.  
11 Reports and interviews revealed that S1 arrived at the park, instigated the fight, returned to their car and  
12 returned back to the park with a baseball bat and ski mask. Reports and interviews revealed that S1 was  
13 observed to be swinging the baseball bat with force towards the individuals in the fight and was  
14 observed to be intentionally vandalizing a vehicle with the baseball bat. Reports and interviews revealed  
15 that S1 fled the scene and was apprehended by Pomona Police Department shortly after. Reports  
16 revealed that S1 had the baseball bat on the back seat of their vehicle with glass still lodged on it and  
17 observed to have a ski mask as well. Reports, interviews and documentation corroborate this allegation.  
18  
19 This case may be referred to CCLD's Legal Division. Such referral may result in the filing of  
20 administrative action before the Office of Administrative Law.  
21  
22 Deficiency cited. Refer to LIC 9099D.  
23  
24 Based on record review and interviews conducted, the preponderance of evidence standard has been  
25 met, therefore the above allegation is found to be **SUBSTANTIATED**.  
26  
27 An exit interview was conducted. A copy of this report and appeals rights were provided to Shaunda  
28 Williams.  
29  
30  
31  
32

**SUPERVISORS NAME:** Wei Siew Ho  
**LICENSING EVALUATOR NAME:** Elizabeth Irra  
**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 10/07/2025

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LIC9099 (FAS) - (06/04)

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**COMPLAINT INVESTIGATION REPORT  
(Cont)**

DR. ST 500  
MONTEREY PARK, CA 91754

**FACILITY NAME:** TIMERS RESIDENTIAL CARE  
**DEFICIENCY INFORMATION FOR THIS PAGE:**

**FACILITY NUMBER:** 198603553  
**VISIT DATE:** 10/07/2025

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
Type A 10/08/2025 Section Cited HSC 1569.50(a)(3)	1 (a) The department may deny an 2 application for a license or may 3 suspend or revoke a license issued 4 under this chapter upon any of the 5 following grounds and in the manner 6 provided in this chapter: (3) Conduct 7 that is inimical to the health, morals, welfare, or safety of either an individual in or receiving	1 Licensee shall develop a written plan of 2 correction to ensure compliance with 3 Health and Safety Code 1569.50 (a)(3) 4 and submit to LPA Irra by POC due 5 date of 10/08/25. 6 7
	8 services from the facility or the people 9 of the State of California. This standard 10 is not met as evidence by: Evidence 11 collected via interviews, records, video 12 footage and photos corroborate the 13 alleged incident that occurred at the 14 park as noted on this report.	8 9 10 11 12 13 14
	1 2 3 4 5 6 7	1 2 3 4 5 6 7
	1 2 3 4 5 6 7	1 2 3 4 5 6 7

**Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.**

<b>SUPERVISORS NAME:</b> Wei Siew Ho <b>LICENSING EVALUATOR NAME:</b> Elizabeth Irra <b>LICENSING EVALUATOR SIGNATURE:</b>		<b>DATE:</b> 10/07/2025
<b>I acknowledge receipt of this form and understand my appeal rights as explained and received.</b>		
<b>FACILITY REPRESENTATIVE SIGNATURE:</b>		<b>DATE:</b> 10/07/2025