

# Department of SOCIAL SERVICES

Community Care Licensing

## COMPLAINT INVESTIGATION REPORT

Facility Number: 306000289  
Report Date: 02/11/2026  
Date Signed: 02/11/2026 12:08:28 PM

**Unsubstantiated**

|  |   |
|--|---|
| STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY | CALIFORNIA DEPARTMENT OF SOCIAL SERVICES<br>COMMUNITY CARE LICENSING DIVISION<br>ORANGE COUNTY RO, 770 THE CITY DR., SUITE 7100<br>ORANGE, CA 92868 |
| <b>COMPLAINT INVESTIGATION REPORT</b>                  |   |

This is an official report of an unannounced visit/investigation of a complaint received in our office on **09/27/2024** and conducted by Evaluator Alvaro Ramirez Jr.

|               |   |
|---------------|---|
| <b>PUBLIC</b> | <b>COMPLAINT CONTROL NUMBER: 22-AS-20240927170807</b> |
|---------------|---|

|   |   |
|---|---|
| <b>FACILITY NAME:</b> LAGUNA PALMS          | <b>FACILITY NUMBER:</b> 306000289       |
| <b>ADMINISTRATOR:</b> MICHAEL MILO          | <b>FACILITY TYPE:</b> 740               |
| <b>ADDRESS:</b> 24571 KINGS ROAD            | <b>TELEPHONE:</b> (949) 859-7929        |
| <b>CITY:</b> LAGUNA NIGUEL                  | <b>ZIP CODE:</b> 92677                  |
| <b>CAPACITY:</b> 6                          | <b>DATE:</b> 02/11/2026                 |
| <b>MET WITH:</b> Julieta Milo-Administrator | <b>UNANNOUNCED TIME BEGAN:</b> 09:11 AM |
|   | <b>TIME COMPLETED:</b> 12:20 PM         |

**ALLEGATION(S):**

|   |  |
|---|--|
| 1 | Staff did not adequately supervise resident resulting in a medical condition |
| 2 | Staff did not assist resident with toileting needs                           |
| 3 | Staff left resident in wet briefs for extended periods of time               |
| 4 | Staff refused to allow resident to return to facility after hospital stay    |
| 5 | Staff withheld resident's personal belongings                                |
| 6 |  |
| 7 |  |
| 8 |  |
| 9 |  |

**INVESTIGATION FINDINGS:**

|    |   |
|----|---|
| 1  | Licensing Program Analyst (LPA) Alvaro Ramirez, Jr. conducted an unannounced visit to deliver findings on the above allegations received on September 27, 2024. LPA was greeted and granted entry into the facility and met with Administrator (AD) Julieta Milo. LPA explained the reason for the visit.   |
| 2  |   |
| 3  |   |
| 4  |   |
| 5  | This Department has investigated the complaint alleging that staff did not adequately supervise resident resulting in a medical condition. Regarding the allegation the following was revealed: During the course of the interviews with individuals three of five individuals interviewed denied the allegations. LPA reviewed documents including the Preplacement Appraisal Information dated May 6, 2024, for Resident 1 (R1). Per Preplacement Appraisal R1 had Pneumonia in January 2024 and states that R1 is prone to Urinary Tract Infections (UTIs). During the investigation LPA reviewed the San Juan Hills Healthcare Center summary report dated May 6, 2024, for R1. Per San Juan Hills Healthcare Center summary report it states diagnosis, Encephalopathy. Per healthdirect.gov.au, encephalopathy refers to the group of symptoms that you |
| 6  |   |
| 7  |   |
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| 9  |   |
| 10 |   |
| 11 |   |
| 12 |   |
| 13 | CONTINUED ON LIC9099-C...   |

|                        |                                      |
|------------------------|--------------------------------------|
| <b>Unsubstantiated</b> | <b>Estimated Days of Completion:</b> |
|------------------------|--------------------------------------|

**SUPERVISORS NAME:** Sheila Santos  
**LICENSING EVALUATOR NAME:** Alvaro Ramirez Jr.  
**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 02/11/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 02/11/2026

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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ORANGE COUNTY RO, 770 THE CITY DR., SUITE 7100  
ORANGE, CA 92868

## COMPLAINT INVESTIGATION REPORT (Cont)

**FACILITY NAME:** LAGUNA PALMS

**FACILITY NUMBER:** 306000289

**VISIT DATE:** 02/11/2026

### NARRATIVE

- 1 experience when your whole brain is not functioning normally. During the interviews with residents, R2  
2 reported that staff check on her often and stated that staff adequately supervise her. During the  
3 interviews with staff, Staff 1 (S1) reported that staff adequately supervise the residents in order to  
4 prevent wounds and UTIs.  
5  
6 Regarding the allegation that staff did not assist resident with toileting needs, the following was  
7 revealed: During the investigation LPA reviewed the Care Plan for R1. Per Care Plan, it states R1 is  
8 bowel incontinent and states ask R1 if he wants to use the urinal during a diaper change. During the  
9 interviews with residents, R3 reported that she does need assistance with incontinence care. During the  
10 interviews with staff, S1 reported that staff always assist the residents with their toileting needs. Per AD,  
11 staff always assist the residents with their toileting needs.  
12  
13  
14 Regarding the allegation that staff left resident in wet briefs for extended periods of time, the following  
15 was revealed: During the investigation LPA reviewed the Physician Report dated May 1, 2024, for R1.  
16 Per Physician Report under Care or Service Plan it states incontinence of bowel and/or bladder. During  
17 the interviews with residents, R3 reported that she is not aware if some residents wear a diaper. Per R3,  
18 staff are helpful. During the interviews with staff, S1 reported that the diapers get changed three times  
19 per day or as needed. Per S1, the residents are not left in wet diapers for extended periods of time.  
20  
21 Regarding the allegation that staff refused to allow resident to return to facility after hospital stay, the  
22 following was revealed: During the investigation LPA reviewed the San Juan Hills Healthcare Center  
23 summary for R1. Per San Juan Hills Healthcare Center summary report, R1 was discharged on May 6,  
24 2024. Per San Juan Hills Healthcare Center summary report, it states R1 will be discharging to Laguna  
25 Palms located at 24571 Kings Road Laguna Niguel, CA 92677. During the interviews with staff, S1  
26 reported that the R1 returned to the facility and was here for another two weeks before leaving. Per AD,  
27 staff did not refused to allow the resident to return to the facility after a Hospital stay.  
28  
29 Regarding the allegation that staff withheld resident's personal belongings, the following was revealed:  
30 During the initial visit on October 3, 2024, LPA tour the facility and did not observe personal belongings  
31 for R1.  
32

CONTINUED ON LIC9099-C...

**SUPERVISORS NAME:** Sheila Santos  
**LICENSING EVALUATOR NAME:** Alvaro Ramirez Jr.  
**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 02/11/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 02/11/2026

LIC9099 (FAS) - (06/04)

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(Cont)**

ORANGE COUNTY RO, 770 THE CITY DR., SUITE  
7100  
ORANGE, CA 92868

**FACILITY NAME:** LAGUNA PALMS

**FACILITY NUMBER:** 306000289

**VISIT DATE:** 02/11/2026

**NARRATIVE**

1 During the interviews with staff, S1 reported that staff have never withheld the resident's personal  
2 belongings and stated that staff do no touch the resident's personal belongings. Per AD, R1's personal  
3 belongings were given to R1's wife the same day she requested them. During the interviews with  
4 residents, R3 reported that she has no issues with her personal belongings and stated that staff are  
5 respectful.  
6  
7 Based on the information gathered during the investigation and review of documents obtained, LPA is  
8 unable to ascertain if the allegations occurred as reported due to conflicting information. Although the  
9 allegations may have happened or are valid, there is not a preponderance of the evidence to prove or  
10 refute the alleged violations occurred; therefore, these allegations are deemed UNSUBSTANTIATED.  
11  
12 For today's visit, there were no citations issued per Title 22, Division 6 of the California Code of  
13 Regulations.  
14  
15 LPA conducted an exit interview with facility representative, and a copy of this report was provided to the  
16 facility.  
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**SUPERVISORS NAME:** Sheila Santos  
**LICENSING EVALUATOR NAME:** Alvaro Ramirez Jr.  
**LICENSING EVALUATOR SIGNATURE:** **DATE:** 02/11/2026

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**FACILITY REPRESENTATIVE SIGNATURE:** **DATE:** 02/11/2026