

Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 306005636
Report Date: 10/03/2025
Date Signed: 10/03/2025 03:38:48 PM

Unsubstantiated

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

This is an official report of an unannounced visit/investigation of a complaint received in our office on **03/21/2025** and conducted by Evaluator Alvaro Ramirez Jr.

PUBLIC	COMPLAINT CONTROL NUMBER: 22-AS-20250321131529
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FACILITY NAME: MAINPLACE SENIOR LIVING	FACILITY NUMBER: 306005636
ADMINISTRATOR: RHONWINN HIPOLITO	FACILITY TYPE: 740
ADDRESS: 1800 1832 W. CULVER AVENUE	TELEPHONE: (714) 978-2534
CITY: ORANGE	STATE: CA ZIP CODE: 92868
CAPACITY: 153	CENSUS: 109 DATE: 10/03/2025
MET WITH: Rhonwinn Hipolito-Executive Director	UNANNOUNCED TIME BEGAN: 01:00 PM
	TIME COMPLETED: 03:55 PM

ALLEGATION(S):

1	Facility staff did not provide adequate supervision resulting in a physical altercation between residents in care.
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INVESTIGATION FINDINGS:

1	Licensing Program Analyst (LPA) Alvaro Ramirez, Jr. conducted an unannounced visit to deliver findings on the above allegation received on March 21, 2025. LPA was greeted and granted entry into the facility and met with Executive Director (ED) Rhonwinn Hipolito. LPA explained the reason for the visit. This Department has investigated the complaint alleging that facility staff did not provide adequate supervision resulting in a physical altercation between residents in care. Regarding the allegation the following was revealed: During the course of the interviews with individuals one of eight individuals confirmed the allegation. During the course of the investigation LPA reviewed documents including the Unusual Incident/Injury Report (UIIR) dated March 25, 2025, for Resident 1 (R1). Per UIIR on March 21, 2025, R1 was involved in an unwitnessed incident. Per UIIR, R1 reported having an altercation with R2. During the course of the interviews with residents, R2 reported that he did not argue with R1 and stated that he never punched R1. CONTINUED ON LIC9099-C...
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Unsubstantiated

Estimated Days of Completion:

NAME OF LICENSING PROGRAM MANAGER: Sheila Santos
NAME OF LICENSING PROGRAM ANALYST: Alvaro Ramirez Jr.
LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 10/03/2025

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 10/03/2025

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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Control Number 22-AS-20250321131529

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CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
ORANGE COUNTY RO, 770 THE CITY DR., SUITE 7100
ORANGE, CA 92868

**COMPLAINT INVESTIGATION REPORT
(Cont)**

FACILITY NAME: MAINPLACE SENIOR LIVING

FACILITY NUMBER: 306005636

VISIT DATE: 10/03/2025

NARRATIVE

1 Per R3, she is not aware of an altercation between R1 and R2. R3 reported that if there is an altercation
2 between residents it is not due to staff not supervising the residents and stated that some residents are
3 difficult. During the course of the interviews with staff, Staff 1 (S1) reported that the altercation was not
4 due to inadequate staff supervision. Per S2, she disagrees with the statement that staff did not provide
5 adequate supervision resulting in a physical altercation between residents in care. During the course of
6 the interviews AD reported that the altercation was not due to lack of staff supervision. Per AD, staff
7 reported that R2 was in bed sleeping or resting when staff walked in. During the course of the interviews
8 with witnesses, Witness 1 (W1) reported that the facility staff provided adequate supervision and stated
9 that he does not expect staff to be checking on R1 24 hours per day.

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11 Based on the information gathered during the investigation and review of documents obtained, LPA is
12 unable to ascertain if the allegation occurred as reported due to conflicting information. Although the
13 allegation may have happened or is valid, there is not a preponderance of the evidence to prove or
14 refute the alleged violation occurred; therefore, this allegation is deemed UNSUBSTANTIATED.

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16 For today's visit, there were no citations issued per Title 22, Division 6 of the California Code of
17 Regulations.

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19 LPA conducted an exit interview with ED Hipolito, and a copy of this report was provided to the facility.
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NAME OF LICENSING PROGRAM MANAGER: Sheila Santos
NAME OF LICENSING PROGRAM ANALYST: Alvaro Ramirez Jr.
LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 10/03/2025

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FACILITY REPRESENTATIVE SIGNATURE:

DATE: 10/03/2025

LIC9099 (FAS) - (06/04)

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