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Department of

SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 306005908
Report Date: 07/08/2026
Date Signed: 07/08/2026 04:34:16 PM

Unsubstantiated

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

This is an official report of an unannounced visit/investigation of a complaint received in our office on **07/25/2023** and conducted by Evaluator Jenifer Tirre

	COMPLAINT CONTROL NUMBER: 22-AS-20230725155928

FACILITY NAME:	WESTMONT OF CYPRESS		**FACILITY NUMBER:**	306005908
ADMINISTRATOR:	PATRICK FRAZIER		**FACILITY TYPE:**	740
ADDRESS:	4889 & 4775 KATELLA AVE.		**TELEPHONE:**	(858) 729-6720
CITY:	LOS ALAMITOS	**STATE:** CA	**ZIP CODE:**	90720
CAPACITY:	152	**CENSUS:** 135	**DATE:**	07/08/2026
		UNANNOUNCED	**TIME BEGAN:**	11:00 AM
MET WITH:	Executive Director Nancy Rodriquez		**TIME COMPLETED:**	04:30 PM

ALLEGATION(S):

1	Staff failed to address bed bug infestation in residents room
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INVESTIGATION FINDINGS:

1	Licensing Program Analyst (LPA) Jenifer Tirre, met with Executive Director Nancy Rodriquez for the
2	purpose of delivering findings for the above allegations. The investigation consisted of records obtained,
3	observations and interviews conducted. On July 25, 2023, the department received allegations that Staff
4	failed to address bed bug infestation in residents room. The investigation was completed by the
5	department and revealed the following:
6	Per documents received and reviewed, The Department received an Incident Report dated 7/18/2023.
7	Incident report stated that inside Resident 1's (R1) room a bed bug was found in apartment. Report
8	stated that Staff contact pest control company which came out following day 7/19/2023 to collect
9	specimen, inspected room and found an additional bed bug. Facility worked with pest control and
10	scheduled additional heat treatments. Per pest control company Orkin's records: facility had an existing
11	contract with company and prior to incident pest control came out on 5/15/2023, 3/6/2023, 2/27/2023 to
12	do a service inspection on multiple rooms in which results showed no live bed bug evidence found, all
13	rooms negative for bed bug activity. CONTINUED ON 9099C

Unsubstantiated	**Estimated Days of Completion:**

SUPERVISORS NAME: Lourdes Montoya
LICENSING EVALUATOR NAME: Jenifer Tirre
LICENSING EVALUATOR SIGNATURE:
DATE: 07/08/2026

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

FACILITY REPRESENTATIVE SIGNATURE:
DATE: 07/08/2026

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

Control Number 22-AS-20230725155928

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

COMPLAINT INVESTIGATION REPORT (Cont)

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

FACILITY NAME: WESTMONT OF CYPRESS **FACILITY NUMBER:** 306005908
VISIT DATE: 07/08/2026

NARRATIVE

Per Orkin Services a Commercial Special Service Agreement conducted on 7/25/2023, pest control company completed full chemical treatments as well as proactive chemical protection treatments on multiple apartments surrounding R1's apartments. Per records, pest control came out again on 9/22/2023 and found negative activity for bed bugs.

Per observations Department conducted an initial 10 day visit on 8/1/2023, during visit multiple resident bedrooms were observed including R1's room, during visit, no bed bugs were found.

Per interviews conducted the following was revealed: Interviews conducted with three staff members stated that they were informed that R1 had bed bug found on residents body during night shift. Staff stated Pest Control company was contacted and came out following day. Staff interviews stated that Pest Control inspector came out and inspected R1's room as well as several other rooms. Per staff interviews only R1's room was found to have bed bug activity. Staff stated that pest control did service heat treatments for R1's room as well as surrounding rooms. Staff stated that pest control also conducted follow up treatments. Staff temporarily relocated R1 during treatments, bathed R1 as well as cleaned R1's bedding and clothing to prevent any additional spreading of eggs or bugs as per recommended by Pest Control.

Per interview conducted with Pest Control inspector, Inspector stated they conducted a visit the next day and confirmed R1's room was the only room they observed to have active bed bugs. Inspector stated they did heat treatments as well as preventative treatments to R1's room as well as additional rooms surrounding area. Inspector stated that source of bed bugs was R1's bed spring where eggs had hatched. Inspector stated notified staff and had box spring removed. Inspector stated they have conducted follow up treatments for R1's room and as part of protocol had K9 Dogs come out to sniff if any more bugs are active in area before having R1 move back to their room. Inspector stated that room was cleared. Inspector confirmed that only R1's room was impacted by bed bugs.

Based on information gathered from complaint investigation, the allegation of Staff failed to address bed bug infestation in residents room was deemed UNSUBSTANTIATED meaning that although the allegation may have happened or is valid, there is no preponderance of evidence to prove the alleged violation did or did not occur as reported.

An exit interview was conducted with Executive Director and copy of report was provided.

SUPERVISORS NAME: Lourdes Montoya
LICENSING EVALUATOR NAME: Jenifer Tirre
LICENSING EVALUATOR SIGNATURE:
DATE: 07/08/2026

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