

Department of

**SOCIAL SERVICES**

*Community Care Licensing*

**COMPLAINT INVESTIGATION REPORT**

Facility Number: 306006224

Report Date: 01/30/2026

Date Signed: 01/30/2026 04:26:07 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 **11/07/2025** and conducted by Evaluator Edward Kim

|  |   |
|--|---|
|  | <b>COMPLAINT CONTROL NUMBER: 22-AS-20251107104044</b> |
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|   |   |
|---|---|
| <b>FACILITY NAME:</b> OAKMONT OF FULLERTON        | <b>FACILITY NUMBER:</b> 306006224       |
| <b>ADMINISTRATOR:</b> SCHROEDER, LINDSAY          | <b>FACILITY TYPE:</b> 740               |
| <b>ADDRESS:</b> 433 W. BASTENCHURY ROAD           | <b>TELEPHONE:</b> (714) 869-1940        |
| <b>CITY:</b> FULLERTON                            | <b>ZIP CODE:</b> 92835                  |
| <b>CAPACITY:</b> 152                              | <b>DATE:</b> 01/30/2026                 |
| <b>MET WITH:</b> Executive Director- Maria Kauten | <b>UNANNOUNCED TIME BEGAN:</b> 02:30 PM |
|   | <b>TIME COMPLETED:</b> 03:30 PM         |

**ALLEGATION(S):**

|   |   |
|---|---|
| 1 | Staff spoke inappropriately to resident in care |
| 2 |   |
| 3 |   |
| 4 |   |
| 5 |   |
| 6 |   |
| 7 |   |
| 8 |   |
| 9 |   |

**INVESTIGATION FINDINGS:**

|    |  |
|----|--|
| 1  | On January 30, 2026, Licensing Program Analyst (LPA) Edward Kim conducted a subsequent complaint visit to deliver complaint investigation findings. LPA met with Executive Director (ED) Maria Kauten and explained the purpose of today's visit.  |
| 2  |  |
| 3  |  |
| 4  |  |
| 5  | The investigation consisted of the following: LPA Kim conducted a tour at the facility. LPA Kim obtained and reviewed copies of the resident and staff rosters, resident records which include the Physician's Reports, Appraisal/Needs and Services Plans, and other pertinent records for five staff. LPA Kim conducted interviews with seven residents, eight staff, and one witness. |
| 6  |  |
| 7  |  |
| 8  |  |
| 9  |  |
| 10 | Allegation: Staff Spoke inappropriately to resident in care  |
| 11 | It is alleged that facility staff #1 (S1) verbally abused resident #1 (R1).  |
| 12 |  |
| 13 | Continued on LIC9099C  |

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

**SUPERVISORS NAME:** Lourdes Montoya  
**LICENSING EVALUATOR NAME:** Edward Kim  
**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 01/30/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 01/30/2026

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, CA 92868

## COMPLAINT INVESTIGATION REPORT (Cont)

**FACILITY NAME:** OAKMONT OF FULLERTON

**FACILITY NUMBER:** 306006224

**VISIT DATE:** 01/30/2026

### NARRATIVE

- 1 Based on interviews conducted, four out of seven residents and eight out of eight staff denied the
- 2 allegation staff spoke inappropriately to resident in care. Three out of seven residents could not confirm
- 3 or deny the allegation. One witness confirmed the allegation. All staff, R4, R5, R6, and R7 stated they
- 4 have never heard or observed S1 speaking inappropriately to any residents. All staff stated they would
- 5 report to the Executive Director or other agencies if they observed any staff say any obscene or
- 6 inappropriate language.
- 7
- 8 Based on observations on November 13, 2025, LPA did not observe any staff speak inappropriately to
- 9 memory care residents. On January 30, 2026, LPA did not observe any staff speaking inappropriately to
- 10 memory care residents. Based on record reviews, there are no records of S1 in regards to complaints,
- 11 disciplinary actions, and facility charting notes stating S1 spoke inappropriately with R1. Based on
- 12 Facility Charting Notes for R1 dated from September 22, 2025, to December 28, 2025, there are no
- 13 notes stating that S1 spoke inappropriately or any complaints from R1 about S1 or any staff.
- 14
- 15 Based on observations, interviews, and records review, LPA did not find sufficient evidence to support
- 16 the above allegation that facility staff verbally abused a resident. Although the allegation may have
- 17 happened or is valid, there is not a preponderance of evidence to prove the alleged violations did or did
- 18 not occur, therefore the allegation is Unsubstantiated.
- 19
- 20 Exit interview was conducted, and a copy of the report was provided to Executive Director Maria Kauten.
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- 32

**SUPERVISORS NAME:** Lourdes Montoya  
**LICENSING EVALUATOR NAME:** Edward Kim  
**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 01/30/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 01/30/2026

LIC9099 (FAS) - (06/04)

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