

Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 331800223
Report Date: 08/28/2026
Date Signed: 08/28/2026 03:23:37 PM

Unsubstantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION RIVERSIDE ASC, 1650 SPRUCE ST STE 200 MS29-27 RIVERSIDE, CA 92507
COMPLAINT INVESTIGATION REPORT	

This is an official report of an unannounced visit/investigation of a complaint received in our office on 08/18/2026 and conducted by Evaluator Seo Jeon

PUBLIC	COMPLAINT CONTROL NUMBER: 18-AS-20260818123856
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FACILITY NAME:	YORKSHIRE VILLAGE	FACILITY NUMBER:	331800223
ADMINISTRATOR:	TERESA MAPILIS	FACILITY TYPE:	740
ADDRESS:	26933 CORNELL ST	TELEPHONE:	(951) 658-1068
CITY:	HEMET	ZIP CODE:	92544
CAPACITY:	100	DATE:	08/28/2026
	STATE: CA	TIME BEGAN:	03:00 PM
	CENSUS: 86	TIME	03:35 PM
	UNANNOUNCED	COMPLETED:	
MET WITH:	Nicole Anguiano, Business Office Manager		

ALLEGATION(S):

1	Staff did not notice resident's change in condition
2	Staff did not obtain timely medical attention for resident
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INVESTIGATION FINDINGS:

1	Licensing Program Analyst (LPA) Seo Jeon conducted an unannounced visit to the facility to deliver
2	findings of the above allegations. LPA met with Nicole Anguiano, Business Office Manager, and informed
3	them of the purpose of the LPA's visit. The Department's investigation involved interviews with staff and
4	review of records.
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6	On August 18, 2026, Community Care Licensing (The Department) received a complaint report with the
7	following allegation.
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9	It was alleged that staff did not notice resident's change in condition. Information received indicated that
10	staff did not test Resident #1's (R1) glucose level regularly, and it was measured at 395 mg/dL on April 4,
11	2026, by R1's relevant party (RP). R1 was subsequently transferred to an emergency hospital, where
12	they were diagnosed with a Urinary Tract Infection (UTI).
13	Continued on LIC9099-C....

Unsubstantiated	Estimated Days of Completion:
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SUPERVISORS NAME: Jacob Garber	
LICENSING EVALUATOR NAME: Seo Jeon	
LICENSING EVALUATOR SIGNATURE:	DATE: 08/28/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 08/28/2026

This report must be available at Child Care and Group Home facilities for public review for 3 years.
LIC9099 (FAS) - (06/04) Page: 1 of 3
Control Number 18-AS-20260818123856

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COMPLAINT INVESTIGATION REPORT (Cont)	

FACILITY NAME: YORKSHIRE VILLAGE	FACILITY NUMBER: 331800223
	VISIT DATE: 08/28/2026

NARRATIVE	
1	LPA conducted R1's records review. R1 was admitted on March 26, 2026, and moved out on April 6,
2	2026. According to the facility assessment dated March 31, 2026, R1 required maximum assistance with
3	bathing, dressing, toileting, transferring, mobility, and special care needs, including assistance with
4	glucose monitoring. However, because the relevant parties could not meet to finalize the details, R1's
5	formalized care plan was never executed. R1 was ultimately discharged from the facility before the care
6	plan could be mutually agreed upon and signed.
7	
8	Regarding the glucose monitoring, the facility received a physician's order for blood sugar checks on
9	March 31, 2026. The facility's Medication Administration Records (MAR) demonstrate that staff
10	performed these glucose checks twice daily from March 31, 2026, through April 4, 2026. All logged
11	readings during this period remained within normal range. R1's glucose level reading at 395 mg/dL was
12	not performed by the facility staff and was not documented. Therefore, LPA could not verify the reading.
13	Furthermore, a review of R1's progress notes spanning March 27, 2026, to April 3, 2026, revealed no
14	documentation of R1 expressing pain or exhibiting any clinical symptoms associated with a UTI.
15	
16	Based on records review, R1 did have UTI during their residency at the facility. However, the evidence
17	found during the investigation did not meet the preponderance of evidence standard required to confirm
18	staff neglect. Therefore, this allegation is unsubstantiated at this time.
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23	It was alleged that staff did not obtain timely medical attention for resident. Information received
24	indicated that Resident #1's (R1) glucose level reached 395 mg/dL on April 4, 2026, and R1's relevant
25	party called 911 to transport R1 to emergency room.
26	
27	LPA conducted R1's records review. According to the facility assessment dated March 31, 2026, R1
28	required maximum assistance with bathing, dressing, toileting, transferring, mobility, and special care
29	needs, including assistance with glucose monitoring. However, because the relevant parties could not
30	meet to finalize the details, R1's formalized care plan was never executed. R1 was ultimately discharged
31	from the facility before the care plan could be mutually agreed upon and signed.
32	
	The facility's Medication Administration Records (MAR) demonstrate that staff performed these glucose
	checks twice daily from March 31, 2026, through April 4, 2026. All logged readings during this period
	remained within normal range.
	Continued on LIC9099-C....

SUPERVISORS NAME: Jacob Garber	
LICENSING EVALUATOR NAME: Seo Jeon	
LICENSING EVALUATOR SIGNATURE:	DATE: 08/28/2026
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FACILITY REPRESENTATIVE SIGNATURE:	DATE: 08/28/2026

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COMPLAINT INVESTIGATION REPORT (Cont)	

FACILITY NAME: YORKSHIRE VILLAGE	FACILITY NUMBER: 331800223
	VISIT DATE: 08/28/2026

NARRATIVE	
1	Furthermore, a review of R1's progress notes spanning March 27, 2026, to April 3, 2026, revealed no
2	documentation of R1 expressing pain or exhibiting any symptoms associated with UTI. R1's glucose
3	level reading at 395 mg/dL was not performed by the facility staff and was not documented. It was
4	performed by R1's relevant party at 2:27 PM on April 4, 2026, which was not within prescribed time
5	frame. Therefore, LPA could not verify the reading.
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7	Based on records review, R1 was transported to emergency room after high glucose level reading by
8	R1's relevant party. However, staff documented that R1 did not show any signs of illness that would
9	cause staff to obtain medical attention. The evidence found during the investigation did not meet the
10	preponderance of evidence standard required to confirm staff neglect. Therefore, this allegation is
11	unsubstantiated at this time.
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15	A finding that the complaint is UNSUBSTANTIATED means the allegation may have happened or is
16	valid, but there is not a preponderance of the evidence to prove that the alleged violation occurred.
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18	An exit interview was conducted where a copy of this report was provided.
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