

Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 374600589
Report Date: 06/05/2025
Date Signed: 06/05/2025 11:06:47 AM

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 **05/29/2025** and conducted by Evaluator Janette Romero

PUBLIC	COMPLAINT CONTROL NUMBER: 18-AS-20250529101735
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FACILITY NAME:	TWIN OAKS GARDEN	FACILITY NUMBER:	374600589
ADMINISTRATOR:	SNEZANA LUKIC	FACILITY TYPE:	740
ADDRESS:	1965 EDWIN LANE	TELEPHONE:	(760) 471-8704
CITY:	SAN MARCOS	ZIP CODE:	92069
CAPACITY:	6	DATE:	06/05/2025
		UNANNOUNCED TIME BEGAN:	08:25 AM
MET WITH:	Administrator, Tanja Lukic	TIME COMPLETED:	11:10 AM

ALLEGATION(S):

1	Staff leaves residents unattended
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INVESTIGATION FINDINGS:

1	On 6/5/2025, Licensing Program Analyst (LPA) Janette Romero conducted an unannounced visit to the facility to investigate the allegation listed above. LPA met with Tanja Lukic who identified themselves as one of the administrators. Lukic was informed of the purpose of the visit. During today's visit, LPA toured the facility, conducted interviews, and obtained copies of pertinent records.
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6	Regarding the allegation, "Staff leaves residents unattended" it was alleged the facility is made up of two separate buildings and there is only one (1) staff providing care to the residents. It was further alleged when the staff leaves one (1) building to go to the next building, residents in the remaining building are left unattended. LPA reviewed the facility sketch which notes the facility is made of the "main house" and "house addition". LPA knocked on the door of the main house and was greeted by Lukic. LPA toured the facility with Lukic and observed Caregiver, Graciela Arreola and four (4) residents present in the main house and Resident 1 (R1) in their bedroom located in the house addition. Lukic was interviewed and reported the following information. The facility encourages the residents residing in the house addition to socialize and join the residents in the main house. Usually, all five (5) residents enjoy watching television and socializing in the main house. However, R1 has been battling a cough recently and has chosen to remain in their bedroom until they feel better.
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SUPERVISORS NAME: Anthony Perez

LICENSING EVALUATOR NAME: Janette Romero

LICENSING EVALUATOR SIGNATURE:

DATE: 06/05/2025

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 06/05/2025

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 2

Control Number 18-AS-20250529101735

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

COMPLAINT INVESTIGATION REPORT
(Cont)CALIFORNIA DEPARTMENT OF SOCIAL
SERVICES
COMMUNITY CARE LICENSING DIVISION
RIVERSIDE ASC, 1650 SPRUCE ST STE 200 MS29-
27
RIVERSIDE, CA 92507

FACILITY NAME: TWIN OAKS GARDEN

FACILITY NUMBER: 374600589

VISIT DATE: 06/05/2025

NARRATIVE

1 Caregiver Arreola was interviewed and reported they go back and forth between both buildings to check
2 on R1 every thirty minutes. LPA reviewed R1's physician's report dated 2/28/2025 noting R1 is
3 ambulatory, able to communicate their needs, administer their own oxygen and store their own
4 medications, and is not confused/disoriented. R1 was interviewed and reported two days ago, they
5 pressed their pendant due to experiencing a severe cough and four (4) staff immediately responded to
6 their bedroom and provided assistance. R1 reported staff supervise them throughout the day and staff
7 has immediately responded every time they have pressed their pendant. LPA observed R1 press their
8 pendant and heard a signal transmitted to a receiver/pager located in the kitchen, which is reportedly
9 used to alert staff that R1 requires assistance. LPA reviewed an Unusual Incident/Injury Report noting
10 on 6/3/2025, R1 experienced shortness of breath and staff responded and monitored R1 throughout the
11 night. LPA attempted to conduct an interview with two (2) additional residents in the home who were
12 unavailable at the time of the attempt. LPA also made several unsuccessful attempts to make contact
13 with the reporting party to obtain additional details regarding the allegation. Although the allegation may
14 have happened or is valid, there is no preponderance of evidence to prove the alleged violation did or
15 did not occur; therefore, the allegation is unsubstantiated. An exit interview was conducted, and a copy
16 of this report was reviewed and provided to Lukic along with a Confidential Names list (LIC 811).

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LICENSING EVALUATOR NAME: Janette Romero

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