

Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 374604300
Report Date: 08/18/2026
Date Signed: 08/18/2026 04:17:57 PM

Unsubstantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION SAN DIEGO RO, 7575 METROPOLITAN DR. #109 SAN DIEGO, CA 92108
COMPLAINT INVESTIGATION REPORT	

This is an official report of an unannounced visit/investigation of a complaint received in our office on 03/05/2025 and conducted by Evaluator Tiffany Holmes

	COMPLAINT CONTROL NUMBER: 08-AS-20250305093733
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FACILITY NAME:	OCEANSIDE SENIOR LIVING	FACILITY NUMBER:	374604300
ADMINISTRATOR:	JOHNSON, KRISTELANGELICA	FACILITY TYPE:	740
ADDRESS:	5508 AVENIDA PACIFICA WAY	TELEPHONE:	(760) 978-6602
CITY:	OCEANSIDE	STATE:	CA
CAPACITY:	165	ZIP CODE:	92057
		CENSUS:	115
		DATE:	08/18/2026
		UNANNOUNCED TIME BEGAN:	04:06 PM
MET WITH:	Wes Habner, Executive Director	TIME COMPLETED:	04:17 PM

ALLEGATION(S):

1	Licensee did not ensure the facility was free from pests
2	Food service did not meet residents needs
3	Staff did not respond to resident call buttons in a timely manner
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INVESTIGATION FINDINGS:

1	Licensing Program Analyst (LPA)Tiffany Holmes contacted the facility to deliver findings for a complaint
2	investigation via tele-virtual. LPA identified herself to, and explained the purpose of the visit and the basic
3	elements of the complaint with Wes Habner, Executive Director.
4	
5	LPA previously conducted interviews with residents, staff, and outside sources, made observations, and
6	obtained and reviewed pertinent records. LPA Borruda conducted the initial visits on March 13, 2025,
7	April 15, 2025, April 28, 2025 and May 01, 2025 and conducted tours of the facility. It was alleged that the
8	licensee did not ensure the facility was free from pests. Interviews and prior LPA observations revealed
9	that the LPA visually checked the flooring throughout the kitchen and LPA did not observe any food
10	particles on the kitchen floor. Observations revealed the dry food was stored on shelves that elevated the
11	food items off the floor. Dry food storage areas did not contain any litter or food particles on the floor, and
12	the facility walk in refrigerator door was maintained closed. In the facility loading dock/garage area, LPA
13	observed multiple cardboard boxes stored on shelves that elevated them from the floor. LPA did not
	observe any evidence of rodent activity or rodent droppings in either the facility kitchen or garage space.
	LPA also did not observe any rodent or insect traps in either location. LPA did not observe any trash cans
	that were overflowing, leaking, or contained a noticeable or foul odor. LPA did not detect any foul odors in
	either the kitchen or the garage. LPA did not observe any insects, flying or otherwise in the kitchen.

Unsubstantiated

Estimated Days of Completion:

SUPERVISORS NAME: Simon Jacob

LICENSING EVALUATOR NAME: Tiffany Holmes

LICENSING EVALUATOR SIGNATURE:

DATE: 08/18/2026

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 08/18/2026

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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Control Number 08-AS-20250305093733

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

COMPLAINT INVESTIGATION REPORT (Cont)

CALIFORNIA DEPARTMENT OF SOCIAL
SERVICES
COMMUNITY CARE LICENSING DIVISION
SAN DIEGO RO, 7575 METROPOLITAN DR. #109
SAN DIEGO, CA 92108

FACILITY NAME: OCEANSIDE SENIOR LIVING

FACILITY NUMBER: 374604300

VISIT DATE: 08/18/2026

NARRATIVE

- 1 It was alleged that the food service did not meet residents needs. Interviews revealed that they don't
- 2 have any complaints about the food. Interviews revealed that the food is good and that there is plenty.
- 3 Interviews revealed that there is enough food for seconds if they wanted. Interviews revealed that the
- 4 chef makes reasonable accommodations for the residents when needed or asked.
- 5
- 6 It was alleged that the staff did not respond to resident call buttons in a timely manner. Interviews
- 7 revealed that they have not had any issues with the call times of the staff responding. Interviews
- 8 revealed that the staff respond and assist them with what they called about. Interviews with staff
- 9 revealed them denying not responding to the residents call buttons.
- 10
- 11 The investigation did not produce supporting evidence or supporting witness statements to substantiate
- 12 the licensee did not ensure the facility was free from pests, the food service did not meet residents
- 13 needs and staff did not respond to resident call buttons in a timely manner. Based on the evidence
- 14 obtained from interviews, the complaint allegations are unsubstantiated. The allegation may have
- 15 happened or is valid, but there is not a preponderance of the evidence to prove that the alleged violation
- 16 occurred.
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- 18 An exit interview was conducted with Wes Habner, Executive Director and a copy of this report and
- 19 Licensee Rights (LIC 9058 03/22) were provided at the conclusion of the visit.
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SUPERVISORS NAME: Simon Jacob

LICENSING EVALUATOR NAME: Tiffany Holmes

LICENSING EVALUATOR SIGNATURE:

DATE: 08/18/2026

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