

# Department of SOCIAL SERVICES

Community Care Licensing

## COMPLAINT INVESTIGATION REPORT

Facility Number: 435202895

Report Date: 03/04/2026

Date Signed: 03/04/2026 04:38:00 PM

**Unfounded**

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CENTRAL COAST CR/RES, 2580 N. FIRST STREET, STE. 350 SAN JOSE, CA 95131
<b>COMPLAINT INVESTIGATION REPORT</b>	

This is an official report of an unannounced visit/investigation of a complaint received in our office on **12/17/2025** and conducted by Evaluator Chihhsien Chang

	<b>COMPLAINT CONTROL NUMBER: 26-AS-20251217162749</b>
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<b>FACILITY NAME:</b> MORNINGSTAR ASSISTED LIVING OF WEST SAN JOSE	<b>FACILITY NUMBER:</b> 435202895
<b>ADMINISTRATOR:</b> HALL, STEPHANIE	<b>FACILITY TYPE:</b> 740
<b>ADDRESS:</b> 1380 S DEANZA BLVD	<b>TELEPHONE:</b> (669) 295-6500
<b>CITY:</b> SAN JOSE	<b>ZIP CODE:</b> 95129
<b>CAPACITY:</b> 149	<b>DATE:</b> 03/04/2026
<b>MET WITH:</b> Melissa Desterhouse	<b>UNANNOUNCED TIME BEGAN:</b> 01:23 PM
	<b>TIME COMPLETED:</b> 01:53 PM

### ALLEGATION(S):

1	Due to lack of supervision, resident engaged in sexual relations with another resident.
2	Staff do not ensure residents laundry is done.
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8	
9	

### INVESTIGATION FINDINGS:

1	Licensing Program Analyst (LPA) Steve Chang conducted an unannounced investigation visit to deliver the investigation finding and met with Regional Coordinator Specialist Melissa Desterhouse (RCS)..
2	
3	
4	On 12/17/2025, the Department received a complaint with the allegation that due to lack of supervision, resident engaged in sexual realtions with another resident.
5	
6	
7	On 12/23/2025 and 01/06/2026, the Deaprtment conducted investigation visits.
8	
9	LPA interviewed 3 staff, 6 residents, and toured risedent rooms. LPA requested schedule of laundry, the incident report, physician reports and care plans of residents R1 and R2.
10	
11	
12	Continue on LIC9099-C. Page 1 of 4.
13	

<b>Unfounded</b>	<b>Estimated Days of Completion:</b>
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**SUPERVISORS NAME:** Romeo Manzano  
**LICENSING EVALUATOR NAME:** Chihhsien Chang  
**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 03/04/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 03/04/2026

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** 26-AS-20251217162749

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES  
COMMUNITY CARE LICENSING DIVISION  
CENTRAL COAST CR/RES, 2580 N. FIRST STREET, STE. 350  
SAN JOSE, CA 95131

## COMPLAINT INVESTIGATION REPORT (Cont)

**FACILITY NAME:** MORNINGSTAR ASSISTED LIVING OF WEST SAN JOSE

**FACILITY NUMBER:** 435202895

**VISIT DATE:** 03/04/2026

### NARRATIVE

- 1 **Due to lack of supervision, resident engaged in sexual relations with another resident:**  
2 On 11/17/2025, around 7:12PM, facility staff received a notice from surveillance video system that a fall  
3 in a resident room in memory care unit. Facility staff went to the resident room to check and found  
4 resident R1 and R2 were undressed from the waist down. R1 was on the floor and was assisted by staff  
5 to get off the floor. R1 and R2 were assessed and both were found without injuries and were not under  
6 distress. Staff S1 reviewed the camera footage, the video showed that R2 and R1 potentially engaged in  
7 intercourse. Both residents R1 and R2 were then separated and put into their respective apartments.  
8  
9 On 11/19/2025, the Department received the incident report from the facility. LPA called the facility and  
10 interviewed previous Wellness Director (PWD). R1 and R2 do not recall what happened. R1 and R2's  
11 families, police, and LTCO were notified. PWD stated, this was the first time that both R1 and R2 have  
12 exhibited these behaviors. LPA requested R1 and R2's Physician Report, and Care Plans.  
13  
14 On 12/23/2025, LPA interviewed Vice President of Wellness from corporate (VPW). VPW stated resident  
15 R1 went to resident R2's room, both R1 and R2 are memory caret residents. VPW stated staff  
16 responded to surveillance video system because R1 was found on the floor. VPW stated staff entered  
17 R2's room to check and found R1 and R2 were without underpants. R1 was on the floor. R1 and R2  
18 were assessed and no injuries were found. R1 and R2 were not under distress. R1 was on R2's bed and  
19 had engaged in intercourse which led to R1's falling off the bed. The sex appeared to be consensual. R2  
20 was unable to remember what happened. R1 denied any sexual abuse or coercion. The facility notified  
21 LTCO, police and CCL office. The facility notifies R1 and R2's families. Both families do not have any  
22 concern about the incident. LTCO and police came to the facility on 11/18/2025 to investigate. The  
23 facility did not receive any accusation from Police and LTCO. VPW stated R1 and R2 were observed  
24 talking to each other before several times. VPW stated R1 and R2 seems to be friends. VPW stated  
25 after the incident, R1 and R2 still talk to each other and nothing seems strange. VPW stated this is the  
26 only one case between R1 and R2. VPW stated R1 and R2 talk to each other very often on common  
27 area. VPW stated R1 did not went to any other rooms before and after the incident.  
28  
29 LPA interviewed staff S1. S1 stated he/she received notice from surveillance video system for a resident  
30 fell on the floor and went to check resident R2's room and found R1 and R2 were naked from wrist to  
31 bottom. S1 stated from the camera footage, R1 and R2 had intercourse. S1 stated the sex appears to  
32 be consensual.  
Continue on LIC9099-C. Page 2 of 4.

**SUPERVISORS NAME:** Romeo Manzano  
**LICENSING EVALUATOR NAME:** Chihhsien Chang  
**LICENSING EVALUATOR SIGNATURE:**

**DATE:** 03/04/2026

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

**FACILITY REPRESENTATIVE SIGNATURE:**

**DATE:** 03/04/2026

LIC9099 (FAS) - (06/04)

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**Control Number** 26-AS-20251217162749

**COMPLAINT INVESTIGATION REPORT  
(Cont)****FACILITY NAME:** MORNINGSTAR ASSISTED LIVING OF  
WEST SAN JOSE**FACILITY NUMBER:** 435202895**VISIT DATE:** 03/04/2026**NARRATIVE**

1 S1 stated on 11/17/25 after dinner, around 7:20PM, he/she was distributing medications to residents in  
2 memory care unit, and caregivers were helping residents to prepare to go to beds. S1 stated there were  
3 4 caregivers on duty for memory care unit. S1 stated he/she did not see R1 entered R2's room. S1  
4 stated there were no noise, no screaming, and no shouting at that time period. S1 stated R1 does not  
5 complain anything. S1 stated both families do not have any complaint and no concerns. S1 stated R1  
6 and R2 are friends.

7

8 Based on the interview and record reviewed, the facility notified the incident to LTCO, Police, CCL office,  
9 and families. The facility did not receive accusation for the incident.

10

11 **Staff do not ensure residents laundry is done:**

12 On 12/23/2025, LPA interviewed Vice President of Wellness (VPW) from the corporate. VPW stated the  
13 facility provide laundry service once per week and as needed. VPW stated the laundry including  
14 resident's clothes, bed sheet, and linens. VPW stated if the residents need more laundry service they  
15 can notify the facility. VPW stated the resident family needs to provide the laundry basket, and the  
16 resident's soiled clothes can be put in. VPW stated the facility has scheduled laundry for residents. VPW  
17 stated caregivers conduct the laundry and will put the clean clothes back to resident room and fold them  
18 into closet. VPW provided the copy of the laundry schedule.

19

20 LPA toured 11 resident rooms with VPW, LPA did not see soiled clothes piled in the resident rooms.  
21 VPW stated caregivers can help to put the soiled clothes in basket, but only when caregivers enter the  
22 resident room.

23

24 LPA interviewed 6 residents. 6 Out of 6 residents did not complain the facility laundry service.

25

26

27 On 01/06/2026, LPA interviewed Operational Specialist (OS) from corporate. OS stated memory care  
28 unit residents have 2 laundries per week and assisted living unit residents have a laundry per week. OS  
29 stated each resident room has closets to put resident's clothes, bedding and linens. OS stated residents  
30 can bring their furniture in their rooms OS stated usually the closet space is big enough for resident to  
31 put their clothes and bedding/linen. OS stated some residents bring their cabinet/furniture to place their  
32 extra clothes and linens.

Continur on LIC9099-C. Page 3 of 4.

**SUPERVISORS NAME:** Romeo Manzano**LICENSING EVALUATOR NAME:** Chihhsien Chang**LICENSING EVALUATOR SIGNATURE:****DATE:** 03/04/2026**I acknowledge receipt of this form and understand my licensing appeal rights as explained and  
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LIC9099 (FAS) - (06/04)

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**Control Number** 26-AS-20251217162749**COMPLAINT INVESTIGATION REPORT  
(Cont)****FACILITY NAME:** MORNINGSTAR ASSISTED LIVING OF  
WEST SAN JOSE**FACILITY NUMBER:** 435202895**VISIT DATE:** 03/04/2026**NARRATIVE**

1 LPA toured all the 34 bedrooms in memory care unit with OS and Maintenance Director (MD). LPA did  
2 not observe any resident laundry basket with "overflow" soiled clothes. LPA did not observe resident  
3 room was unorganized or messed up with soiled clothes.

4

5 LPA observed room #201 with clean and organized linens piled on a sofa. LPA checked resident rooms'  
6 closet and cabinet with OS, and found some closets/cabinets of resident rooms were full. OS explained  
7 if resident has too many clothes and linens for caregiver to put in closet and cabinet, they can bring their  
8 own closet or furniture.  
9  
10 LPA observed some rooms having blankets on the chair or sofa which are believed that residents used  
11 them when they sat or slept on chair/sofa before, and residents left the blanks there on purpose.  
12  
13 The Department has investigated the above allegations. Based on the investigation, records reviewed,  
14 and interviews conducted, the Department found that the above allegation is **UNFOUNDED**, meaning  
15 that the allegation is false, could not have happened and/or is without a reasonable basis.  
16  
17 No citations noted at today's compliant investigation visit. Exit interview was conducted with RCS. This  
18 report was provided to review and for signature. A copy of this report was provided to RCS.  
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21 Page 4 of 4.  
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