

Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 565802462
Report Date: 11/26/2024
Date Signed: 11/26/2024 04:36:00 PM

Substantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION WOODLAND HILLS N.ASC, 21731 VENTURA BLVD. #250 WOODLAND HILLS, CA 91364
COMPLAINT INVESTIGATION REPORT	

This is an official report of an unannounced visit/investigation of a complaint received in our office on **09/12/2023** and conducted by Evaluator Esther Cortez

	COMPLAINT CONTROL NUMBER: 29-AS-20230912151611
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FACILITY NAME: SAGE MOUNTAIN SENIOR LIVING	FACILITY NUMBER: 565802462
ADMINISTRATOR: JANELLE LOPEZ	FACILITY TYPE: 740
ADDRESS: 3499 GRANDE VISTA DR	TELEPHONE: (805) 375-0695
CITY: THOUSAND OAKS	STATE: CA ZIP CODE: 91320
CAPACITY: 145	CENSUS: 94 DATE: 11/26/2024
MET WITH: Christian Castillo-ED	UNANNOUNCED TIME BEGAN: 12:35 PM
	TIME COMPLETED: 04:35 PM

ALLEGATION(S):

1	Staff does not respond to resident's call button in a timely manner.
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INVESTIGATION FINDINGS:

1	At 12:35 p.m. Licensing Program Analyst (LPA) Esther Cortez conducted an unannounced subsequent
2	complaint visit at the facility regarding the above allegation. The LPA met with Executive Director
3	Christian Castillo and explained the reason for the visit.
4	
5	On 09/18/2023, LPA Elsie Campos conducted interviews with witness at 10:45 a.m., Executive Director
6	at 11:10 a.m. and collected and reviewed pertinent records beginning at 12:20 p.m. On 11/25/2024,
7	starting at 11:00 a.m. LPA Cortez conducted a file review and conducted four (4) staff and one (1) phone
8	interview with Phillips Lifeline Technical Support. During today's visit starting at 1:00 p.m. the LPA
9	conducted three (3) resident and two (2) staff interviews. Report will continue on LIC9099-C, 2nd page.
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Substantiated

Estimated Days of Completion:

NAME OF LICENSING PROGRAM MANAGER: Kasandra Lopez

NAME OF LICENSING PROGRAM ANALYST: Esther Cortez

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 11/26/2024

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 11/26/2024

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 29-AS-20230912151611

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
WOODLAND HILLS N.A.S.C, 21731 VENTURA BLVD. #250
WOODLAND HILLS, CA 91364

COMPLAINT INVESTIGATION REPORT (Cont)

FACILITY NAME: SAGE MOUNTAIN SENIOR LIVING

FACILITY NUMBER: 565802462

VISIT DATE: 11/26/2024

NARRATIVE

1 On the allegation " Staff does not respond to resident's call button in a timely manner"; it is the concern
 2 of the reporting party that residents experienced long wait times and on 09/11/23, Resident #1's (R1's)
 3 caregiver called out and they had no one to assist them for one and a half hours to get out of bed and
 4 dressed. It was further reported that R1 was up at 7:00 a.m. and called and no one came until 8:30 a.m.
 5 To investigate the allegation the LPA conducted a file review and interviews. A report of residents
 6 Personal Help Buttons (PHB) calls made between 09/10/2023 starting at 12:59:00 a.m. and ending on
 7 09/11/23, 11:18:00 p.m. revealed that on 09/11/2023, R1 had a registered pendant call at 7:21:28 a.m.
 8 Per the report, R1 has two (2) different noted times for how long it took for the resident's call to be
 9 answered; one being 29 minutes with 55 seconds and the second being 30 minutes and 9 seconds. The
 10 report also noted two reset times: 5 minutes with 45 seconds (which is how long it took the staff to reach
 11 the resident after claiming the call) and the second noted time being 35 minutes with 54 seconds (which
 12 is the total time from when the resident pressed their pendant to when the staff contacted the resident).
 13 Staff revealed that the "answer" times is how long it took the staff to claim the pendant call on their iPad,
 14 the reset time is when the resident is reached and the staff can reset the call, and the complete time is
 15 when the staff goes back and presses complete button on their iPad and would be the overall time it
 16 took the staff to complete the call. LPA Cortez conducted a phone interview with the Technical Support
 17 team from Phillips Lifeline, whose pendant system was used in the community in 2023. Tech Support
 18 revealed that whenever there is two different times reflecting under the "Answer" time, the bottom time is
 19 ultimately the time it took for staff to claim a call. Based on the information gathered, on 9/11/2023, at
 20 7:21:28 a.m. it took staff 35 minutes and 54 seconds to reach R1 to assist them with their call. In
 21 addition, R1 had to wait to be assisted for over 15 minutes when pressing their pendant call in eight (8)
 22 out of nineteen (19) pendant calls made between 09/10/2023 starting at 12:59:00 a.m. and ending on
 23 09/11/23, 11:18:00 p.m., with the highest wait time being 43 minutes and 34 seconds. Furthermore, the
 24 average reset time for residents noted on the report was 38 minutes and 12 seconds.

26 Based on the information gathered through file review, the allegation Staff does not respond to resident's
 27 call button in a timely manner is deemed **Substantiated** at this time.

29 Pursuant to Title 22, California Code of Regulations, the following deficiencies are
 30 cited (refer to LIC 9099-D).
 31
 32

Exit interview conducted, appeal rights discussed, and a copy of this report issued.

NAME OF LICENSING PROGRAM MANAGER: Kasandra Lopez

NAME OF LICENSING PROGRAM ANALYST: Esther Cortez

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 11/26/2024

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

FACILITY REPRESENTATIVE SIGNATURE: _____ **DATE:** 11/26/2024

Control Number 29-AS-20230912151611

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY COMPLAINT INVESTIGATION REPORT (Cont)	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION WOODLAND HILLS N.ASC, 21731 VENTURA BLVD. #250 WOODLAND HILLS, CA 91364
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FACILITY NAME: SAGE MOUNTAIN SENIOR LIVING

FACILITY NUMBER: 565802462

DEFICIENCY INFORMATION FOR THIS PAGE:

VISIT DATE: 11/26/2024

Deficiency Type POC Due Date / Section Number	DEFICIENCIES	PLAN OF CORRECTIONS(POCs)
Type B 12/10/2023 Section Cited CCR 87468.2(a)(4)	1 87468.2(a)(4)residents...shall have all 2 of the following personal rights: To care, 3 supervision, and services that meet 4 their individual needs and are delivered 5 by staff that are sufficient in numbers, 6 qualifications, and competency to meet 7 their needs.This requirement is not met as evidence by:	1 ED agreed to have an in service with all 2 staff regarding how to respond resident 3 calls in a timely manner. Will submit 4 proof of inservice to CCL by 12/10/23 5 6 7
	8 Based on records review, the licensee 9 did not comply with the section cited 10 above as Staff did not respond to R1's 11 call for assistance in a timely manner, 12 which posed a potential health and 13 safety risk to residents in care. 14	8 9 10 11 12 13 14
	1 2 3 4 5 6 7	1 2 3 4 5 6 7
	1 2 3 4 5 6 7	1 2 3 4 5 6 7

Failure to correct the cited deficiency(ies), on or before the Plan of Correction (POC) due date, may result in a civil penalty assessment.

NAME OF LICENSING PROGRAM MANAGER: Kasandra Lopez
NAME OF LICENSING PROGRAM ANALYST: Esther Cortez
LICENSING PROGRAM ANALYST SIGNATURE: _____ **DATE:** 11/26/2024

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

FACILITY REPRESENTATIVE SIGNATURE: _____ **DATE:** 11/26/2024