

Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 565850424
Report Date: 06/27/2025
Date Signed: 06/27/2025 11:43:03 AM

Unsubstantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CCLD Regional Office, 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 **06/18/2025** and conducted by Evaluator Brian Balisi

	COMPLAINT CONTROL NUMBER: 29-AS-20250618085349
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FACILITY NAME: IVY PARK AT WOOD RANCH	FACILITY NUMBER: 565850424
ADMINISTRATOR: LILIT E MNATSAKANYAN	FACILITY TYPE: 740
ADDRESS: 190 TIERRA REJADA WAY	TELEPHONE: (805) 584-8881
CITY: SIMI VALLEY	STATE: CA ZIP CODE: 93065
CAPACITY: 100	CENSUS: 79 DATE: 06/27/2025
MET WITH: Lilit Mnatsakanyan	UNANNOUNCED TIME BEGAN: 09:45 AM
	TIME COMPLETED: 12:00 PM

ALLEGATION(S):

1	Staff did not keep the facility free of bedbugs.
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INVESTIGATION FINDINGS:

1	Licensing Program Analyst (LPA) Brian Balisi conducted an unannounced complaint visit to investigate
2	the allegation listed above. Upon arrival LPA met with Executive Director Lilit Mnatsakanyan and
3	explained the reason for the visit.
4	At approx 09:50 a.m. LPA conducted physical plant, interviewed staff and reviewed and obtained copies
5	of pertinent documentation relevant to the investigation.
6	
7	It was reported that "Staff did not keep the facility free of bedbugs" as it was alleged that there continues
8	to be a recurring bed bug problem in multiple rooms. On 05/12/2025, LPA conducted an investigation on
9	control # 29-AS-20250509152429, for the allegation "Staff does not keep resident's room free from bed
10	bugs", it was confirmed that there was an occurrence of bed bugs, however that allegation was found to
11	be Unsubstantiated due to information received stating that the occurrence had been contained to one
12	room and the facility demonstrated a proactive preventative approach by having Ecolab conduct
13	additional visits outside of their normal monthly visits.

Unsubstantiated

Estimated Days of Completion:

NAME OF LICENSING PROGRAM MANAGER: Desaree Perera

NAME OF LICENSING PROGRAM ANALYST: Brian Balisi

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 06/27/2025

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

FACILITY REPRESENTATIVE SIGNATURE:

DATE: 06/27/2025

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-20250618085349

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CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
COMMUNITY CARE LICENSING DIVISION
CCLD Regional Office, 21731 VENTURA BLVD.
#250
WOODLAND HILLS, CA 91364

COMPLAINT INVESTIGATION REPORT (Cont)

FACILITY NAME: IVY PARK AT WOOD RANCH

FACILITY NUMBER: 565850424

VISIT DATE: 06/27/2025

NARRATIVE

1 Continued from 9099

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3 Since then, interviews conducted and records review revealed Ecolab has conducted additional visits for
4 preventative measures on 05/09/2025, 05/30/2025 where no new bed bug activity was found. On
5 06/09/2025 during an Ecolab service call, one (1) bed bug was found in room 227. The room was
6 treated on 06/13/2025. Since 06/09/2025, no additional bed bug activity has been reported by staff.

7 During the LPA's physical inspection of rooms, 226, 225, 227, 223, 217, 231, surrounding rooms, and
8 adjacent areas, no evidence of bed bugs was observed. Based on the information obtained during the
9 investigation, the Department does not have sufficient evidence to corroborate the allegation. Although
10 the allegation may have happened or is valid, there is not a preponderance of evidence to prove the
11 alleged violations did or did not occur, therefore the above allegation "Staff did not keep the facility free
12 of bedbugs" is deemed Unsubstantiated at this time.

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14 Exit interview conducted and copy of report issued.

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NAME OF LICENSING PROGRAM ANALYST: Brian Balisi

LICENSING PROGRAM ANALYST SIGNATURE:

DATE: 06/27/2025

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FACILITY REPRESENTATIVE SIGNATURE:

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LIC9099 (FAS) - (06/04)

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