

Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 565850615
Report Date: 05/07/2026
Date Signed: 05/07/2026 02:55:21 PM

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 10/15/2025 and conducted by Evaluator Mark Jeffries

	COMPLAINT CONTROL NUMBER: 29-AS-20251015104115
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FACILITY NAME: PALMS AT BONAVENTURE, THE	FACILITY NUMBER: 565850615
ADMINISTRATOR: MCCAULEY, BRANDY	FACILITY TYPE: 740
ADDRESS: 111 NORTH WELLS ROAD	TELEPHONE: (805) 647-0616
CITY: VENTURA	ZIP CODE: 93004
CAPACITY: 121	DATE: 05/07/2026
	UNANNOUNCED TIME BEGAN: 08:00 AM
MET WITH:	TIME COMPLETED: 03:05 PM

ALLEGATION(S):

1	Staff are not following residents' special diet.
2	Staff are not safeguarding the residents' personal belongings.
3	Staff is retaliating against resident.
4	Facility does not have sufficient staff to meet the needs of residents in care.
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INVESTIGATION FINDINGS:

1	On 05/07/2026, Licensing Program Analyst (LPA) Jeffries arrived unannounced at the facility to issue
2	final findings to the allegations to this complaint, as well as this facility annual inspection on a separate
3	report.. LPA noted that this visit included issuing final findings to all allegation of a separate complaint
4	(29-AS-20251024145127) at the same facility location under a different Community Care Licensing
5	(CCL) facility file number (565802467) that is was closed on 06/13/2025 and last updated on 10/28/2025.
6	LPA met with Administrator, Brandy McCauley, announced who he is and the reason for the visit.
7	As to the allegation of, "Staff are not following residents' special diet." It was alleged that facility continues
8	to feed the resident (R1) pasta, potatoes and bread. And, R1 had asked for a cheeseburger with no bun
9	and the staff told him they don't know how to use the new stove to cook him a cheeseburger. On
10	10/23/2025 Licensing Program Analyst (LPA) Emily Peraldi conducted interviews with Staff 1-6 (S1, S2,
11	S3, S4, S5, and S6). All staff stated that residents with a modified diet are facilitated with a modified diet
12	on a daily basis. On 10/23/2025, CONTINUED on LIC9099-C
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Unsubstantiated	Estimated Days of Completion:
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SUPERVISORS NAME: Kelly Burley	
LICENSING EVALUATOR NAME: Mark Jeffries	
LICENSING EVALUATOR SIGNATURE:	DATE: 05/07/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 05/07/2026

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 3
Control Number 29-AS-20251015104115

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COMPLAINT INVESTIGATION REPORT	
(Cont)	

FACILITY NAME: PALMS AT BONAVENTURE, THE	FACILITY NUMBER: 565850615
	VISIT DATE: 05/07/2026

NARRATIVE	
1	LPA Peraldi conducted an interview with facility Executive Director (ED), Brandy McCauley, who stated
2	that R1 was determined by his physician to be capable of managing their own medications and diet. ED
3	stated that R1 “mostly follows (R1’s) special diet but once in a blue moon R1 has crackers and cookies.
4	ED stated they have communication with his doctor.” On 03/20/2026, LPA Mark Jeffries conducted
5	interviews with Residents 1-6 (R1, R2, R3, R4, R5, and R6). R1 stated that the facility is good about
6	providing restrictive diet menus. R1 stated that the facility community activities there are prizes that
7	consist of candy, and the facility does provide sugar free candy, but sometime R1 likes to eat the regular
8	candy as well. R1 stated that occasionally R1 will eat menu choices that are not part of the special diet
9	by choice. R2, R3, R4, R5, and R6 all stated, “facility is good about menu choices. And facility is good at
10	providing special diets that are needed for residents. On 03/20/2026, LPA conducted an interview with
11	facility Chief (S6) S6 demonstrated to LPA how special diets are identified in the facility kitchen so that
12	the staff deliver special diets to residents that have special dietary needs, and requirements. Residents
13	that are identified with special diets are posted on the kitchen wall with the resident’s name and what
14	special diet is identified to a specific resident. S6 stated that these special diets are always available and
15	presented to the residents that are identified. S6 stated that if those residents request additional food
16	items or off the menu items they are provided with and the care staff is notified that the special diet was
17	not followed. Based on documentation of special diet screening, interviews of resident stating availability
18	of special diets provided by the facility, and interviews of residents exercising specific dietary choices,
19	there is not enough evidence at this time to support the allegation of, “Staff are not following the
20	residents” special diet.” and is unsubstantiated at this time.
21	As to the allegation of, “Staff are not safeguarding the residents’ personal belongings.” and “Staff is
22	retaliating against residents.” It was alleged that R1 lost 3 sets of pajamas in laundry and staff were
23	retaliating against R1 due to not returning R1’s pajamas from laundry and not properly folding cleaned
24	laundry. On 10/23/2025 LPA Peraldi conducted interviews with S1 - S6, all staff stated that there were no
25	concerns regarding residents’ items being safeguarded by facility. S3 stated that, “Sometimes laundry
26	gets mixed up and they check other rooms and linen closet. Usually, missing items are found.” However,
27	R1’s missing items were never found over one year ago. On 03/20/2026, LPA Jeffries conducted
28	interviews with R1-R6, R1 stated that the there was only one set of pajamas that were lost and, “never
29	found or maybe I misplaced them.” R1 also stated that they have no issue with facility safeguarding
30	personal property. R2-R6 all stated that they had no issues with facility safeguarding residents’ property.
31	CONTINUE on LIC9099-C
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SUPERVISORS NAME: Kelly Burley	
LICENSING EVALUATOR NAME: Mark Jeffries	
LICENSING EVALUATOR SIGNATURE:	DATE: 05/07/2026
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LIC9099 (FAS) - (06/04) Page: 2 of 3
Control Number 29-AS-20251015104115

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**COMPLAINT INVESTIGATION REPORT
(Cont)**

#250
WOODLAND HILLS, CA 91364

FACILITY NAME: PALMS AT BONAVENTURE, THE

FACILITY NUMBER: 565850615

VISIT DATE: 05/07/2026

NARRATIVE

1 On 10/23/2025 LPA Peraldi conducted an interview with ED who stated, "staff have been trained on
2 resident's personal rights. She said they use Relias training. She said residents' personal rights are
3 posted on the wall. She said staff wouldn't retaliate against residents. She said staff are loving and they
4 know about personal rights." On 03/20/2026, LPA Jeffries reviewed care giver training records for the
5 facility and noted that all caregivers had current "Residents Personal Rights" training through Relias
6 training program. Based on interviews, and records review, at this time there is not enough evidence to
7 support the allegation of, "Staff are not safeguarding the residents' personal belongings." and "Staff is
8 retaliating against residents." and both are unsubstantiated at this time.
9 As to the allegation of, "Facility does not have sufficient staff to meet the needs of residents in care." It
10 was alleged that staff are getting fired or leaving and there are no staff available for R1. On 10/23/2025
11 LPA Peraldi conducted an interview with ED who stated, "that they have enough staff to meet needs.
12 She said there are no staff concerns or staffing shortage. In Memory Care (MC) there are three (3)
13 caregivers and three (3) in Assisted Living (AL). She said there are medication technician (med-techs)
14 on each shift." On 10/23/2025 LPA Peraldi conducted interviews with S1-S6, all stated no concerns with
15 staffing ratios. On 03/20/2026, LPA Jeffries conducted interviews with R1-R6. All stated they had no
16 issues with staffing to resident ratios. R1 – R6 all stated that their needs are met on a daily basis and
17 have no concerns. R1 stated that staff do a great job attending to (R1's) needs. LPA Jeffries reviewed
18 current facility staff schedules which showed care giver coverage that reflected staff converge in staff
19 and resident interviews. At this time there is not enough evidence to support the allegation of, "Facility
20 does not have sufficient staff to meet the residents needs." and is unsubstantiated at this time.
21 Exit interview, report read, and report provided.
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SUPERVISORS NAME: Kelly Burley

LICENSING EVALUATOR NAME: Mark Jeffries

LICENSING EVALUATOR SIGNATURE:

DATE: 05/07/2026

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DATE: 05/07/2026