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**UNITED STATES BANKRUPTCY COURT  
CENTRAL DISTRICT OF CALIFORNIA  
LOS ANGELES DIVISION**

In re: ) Case No. 2:17-bk-13634 WB  
)  
) Chapter 11  
Baldwin Park Congregate Home, Inc. )  
) **FIFTH REPORT OF THE**  
) **PATIENT CARE OMBUDSMAN**  
)  
)  
Debtor. ) (No Hearing Required)

Pursuant to the order directing the appointment of a Patient  
Care Ombudsman entered by this court on June 12, 2017, Peter C.  
Anderson, the United States Trustee, duly appointed Joseph  
Rodrigues, the California State Long-Term Care Ombudsman, as the  
Patient Care Ombudsman in this case.

In compliance with the notice of appointment, the Patient Care  
Ombudsman is submitting his fifth 60-day report.

April 13, 2018

Respectfully submitted,

/s/Joseph Rodrigues

Joseph Rodrigues  
State Long-Term Care Ombudsman

**FIFTH REPORT OF THE PATIENT CARE OMBUDSMAN**

WISE & Healthy Aging is the designated Long-Term Care (LTC) Ombudsman Program for Los Angeles County and is the local representative of the Office of the State LTC Ombudsman. As mandated by the federal Older Americans Act (42 U.S.C. 3058g), LTC Ombudsman representatives identify, investigate and resolve complaints that are made by, or on behalf of residents of LTC facilities that relate to action, inaction or decisions that may adversely affect the health, safety, welfare or rights of residents. Lizette Arzola, MSW, MSG is the local Ombudsman representative assigned to this facility.

Baldwin Park Congregate Home is located at 3462 Vineland Avenue, Baldwin Park, California. The California Department of Public Health, Licensing and Certification, licenses this facility as a Congregate Living Health Facility (CLHF). CLHFs provide the following basic services: inpatient care including medical supervision, 24-hour skilled nursing and supportive care, pharmacy, dietary, social and recreational. The primary need of the CLHF resident shall be for availability of skilled nursing care on a recurring, intermittent, extended, or continuous basis. This care is less intense than that provided in general acute care hospitals but more intense than that provided in skilled nursing facilities.

1 The following information describes the number of visits made  
2 to the facility (complaint and non-complaint related), observations  
3 about staffing, food, supplies, the environment, the general status  
4 of the residents, any complaints made by or on behalf of residents  
5 to the LTC Ombudsman Program, and any changes in the census of the  
6 facility.  
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9 The licensed capacity of the facility is 12, with a current  
10 occupancy of 10 as of April 4, 2018. The facility has consistently  
11 had a resident census between 10-12 residents during facility  
12 visits. During unannounced visits and in review of the monthly  
13 staff schedules, the staffing appeared sufficient to meet the needs  
14 of the residents.  
15

16  
17 The local Ombudsman Program has not received any concerns  
18 involving vendors, utilities, or external support factors that may  
19 impact resident care.  
20

21  
22 On April 5, 2018, the Ombudsman representative made efforts to  
23 communicate with Lucita Hakes from the Department of Public Health,  
24 Los Angeles County Home Health Agency Unit, regarding the facility,  
25 however was unable to do so. According to the Department of Public  
26 Health's Health Facilities Consumer Information System website,  
27 <http://hfcis.cdph.ca.gov> the most recent complaint against the  
28

1 facility was in October 2017.

2  
3 The local Ombudsman Program has conducted three visits during  
4 this reporting period, covering March and April 2018. All visits  
5 during this reporting period were completed during the 7:00 a.m. to  
6 7:00 p.m. shift and occurred on March 1, March 23, and April 4,  
7 2018.  
8

9  
10 During the three visits, the facility appeared to have  
11 sufficient staff and there appeared to be sufficient fresh food, dry  
12 goods, water, and gastrostomy tube (G-tube) formula. The  
13 environment was clean, the facility was a comfortable temperature,  
14 and there were no safety hazards noted. Residents appeared  
15 comfortable and clean and did not express any concern regarding  
16 their care or supervision.  
17

18  
19 A report of suspected dependent adult/elder abuse was received  
20 regarding a resident who had a fall at the facility which resulted  
21 in the serious bodily injury and hospitalization of the resident.  
22 Per the report, the information was also sent to the Department of  
23 Public Health. The resident's conservator did not request Long-Term  
24 Care Ombudsman advocacy services.  
25

26  
27 During the unannounced visit on April 4, 2018, the Ombudsman  
28

1 representative observed an infection control concern. Multiple  
2 clean adult briefs and other supplies were left on top of a supply  
3 cart and were not properly stored. The Ombudsman representative  
4 expressed concern to a nearby facility staff member who immediately  
5 addressed it.  
6

7  
8 During the April 4, 2018 visit, the Ombudsman representative  
9 interacted with a resident who was new to the facility. The  
10 resident required assistance with orientation to the facility and  
11 expressed the need for assistance with linkages to community social  
12 services programs. The Ombudsman representative assisted with  
13 connecting the resident to the appropriate facility staff who would  
14 assist the resident with orientation to the facility as well as the  
15 other needs noted.  
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18 At this time, the Patient Care Ombudsman has no recommendations  
19 to the court.  
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21  
22 April 13, 2018

/s/Joseph Rodrigues  
Joseph Rodrigues  
State Long-Term Care Ombudsman