

# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

Deidre S. Gifford, MD, MPH  
Acting Commissioner



Ned Lamont  
Governor  
Susan Bysiewicz  
Lt. Governor

### Healthcare Quality And Safety Branch

September 29, 2020

Beth Prevo, Supervisor of Assisted Living Services Agency  
Addison Place in Glastonbury  
1177 Hebron Avenue  
Glastonbury, CT 06033

Bprevo@hallkeen.com

Dear Ms. Prevo:

An unannounced visit was made to Addison Place in Glastonbury on September 6, 2020 by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting a licensing inspection.

Attached is the violation of the Regulations of Connecticut State Agencies and/or General Statutes of Connecticut which was noted during the course of the visit. The state violations cannot be edited by the provider in any way.

In accordance with Connecticut General Statutes, section 19a-496, upon a finding of noncompliance with such statutes or regulations, the Department shall issue a written notice of noncompliance to the institution. Not later than ten days after such institution receives a notice of noncompliance, the institution shall submit a plan of correction to the Department in response to the items of noncompliance identified in such notice.

### **The plan of correction is to be submitted to the Department by October 9, 2020**

The plan of correction shall include:

- (1) The measures that the institution intends to implement or systemic changes that the institution intends to make to prevent a recurrence of each identified issue of noncompliance;
- (2) the date each such corrective measure or change by the institution is effective;
- (3) the institution's plan to monitor its quality assessment and performance improvement functions to ensure that the corrective measure or systemic change is sustained; and
- (4) the title of the institution's staff member that is responsible for ensuring the institution's compliance with its plan of correction.

The plan of correction shall be deemed to be the institution's representation of compliance with the identified state statutes or regulations identified in the department's notice of noncompliance. Any institution that fails to submit a plan of correction to Loan.Nguyen@ct.gov may be subject to disciplinary action. Please do not send another copy via US mail.



Phone: (860) 509-7400 • Fax: (860) 509-7543  
Telecommunications Relay Service 7-1-1  
410 Capitol Avenue, P.O. Box 340308  
Hartford, Connecticut 06134-0308  
[www.ct.gov/dph](http://www.ct.gov/dph)

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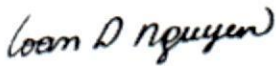
DATE(S) OF VISIT: September 6, 2020

THE FOLLOWING VIOLATION(S) OF THE REGULATIONS OF CONNECTICUT  
STATE AGENCIES AND/OR CONNECTICUT GENERAL STATUTES  
WERE IDENTIFIED

You may wish to dispute the violation and you may be provided with the opportunity to be heard. If the violation is not responded to by October 9, 2020 or if a request for a meeting is not made by the stipulated date, the violation shall be deemed admitted.

If there are any questions, please do not hesitate to contact this office at [Loan.Nguyen@ct.gov](mailto:Loan.Nguyen@ct.gov).

Respectfully,

A handwritten signature in black ink that reads "Loan D. Nguyen". The signature is written in a cursive, flowing style.

Loan Nguyen MSN, RN, C  
Supervising Nurse Consultant  
Facility Licensing and Investigations Section

LDN:lst



DATE(S) OF VISIT: September 6, 2020

THE FOLLOWING VIOLATION(S) OF THE REGULATIONS OF CONNECTICUT  
STATE AGENCIES AND/OR CONNECTICUT GENERAL STATUTES  
WERE IDENTIFIED

The following is a violation of the Regulations of Connecticut State Agencies Section 19-13-D105 (e)  
General requirements for an assisted living services agency (1)

1. Based on review of the agency documentation and interview with agency personnel, the Assisted Living Services Agency (ALSA) failed to ensure all staff were tested on a weekly basis before determining negative status for a minimum of 14 days and entering a pause of testing, in accordance with the Governor's Executive Order. The findings include:

Connecticut Executive Orders 7UU and 7AAA issued on 6/1/2020 and 6/17/2020 by the Governor directed the mandatory testing of the staff in Assisted Living Services Agencies (ALSA) and Managed Residential Communities (MRC) for all staff that had not previously tested positive for COVID-19, with ongoing weekly testing for the duration of the public health and civil preparedness emergency, or until testing identified no new cases of COVID-19 among residents or staff over at least 14 days since the most recent positive result, whichever occurred first.

Interview and review of the ALSA documentation with the Executive Director (ED) on 9/6/2020 indicated that prior to the gubernatorial Executive Orders that mandated the weekly testing of staff in ALSA and MRC for COVID-19, the ALSA and the MRC had one employee who tested positive on 5/21/2020 and the employee was not included in further testing.

The facility subsequently conducted testing of staff on 6/29/2020, 7/6/2020 and 7/13/2020 with no further staff testing scheduled after 7/13/2020.

- a. Interview and review of the staff listing and the testing roster with the Executive Director on 9/6/2020 failed to identify the inclusion of three employees during the tests conducted on 7/6/2020;
- b. Interview and review of the staff listing and the testing roster with the Executive Director on 9/6/2020 failed to identify the inclusion of six employees during the test conducted on 7/13/2020;
- c. Interview and review of the staff listing and the testing roster with the Executive Director on 9/6/2020 failed to identify the accurate tracking and the comprehensive weekly testing of all employees before determining that all employees tested negative for a minimum of 14 days

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prior to reaching a pause in testing on 7/13/2020.

The following is a violation of the Regulations of Connecticut State Agencies Section 19-13-D105 € General requirements for an assisted living services agency (1)

Based on review of the agency documentation and interview with agency personnel, the Assisted Living Service Agency (ALSA) failed to ensure all staff were tested on a weekly basis before determining negative status for a minimum of 14 days and entering a pause of testing, in accordance with the Governor's Executive Order.

As stated to the representative of the Facility Licensing and Investigations section of the Department of Public Health we have complied with the State of CT in regards to mandated COVID-19 testing with all active employees. These procedures and measures have been in place and will continue to stay in place to ensure the institution's compliance with the Governor's Executive Order.

Circumstances leading to no testing: a. aide #1 resigned, housekeeper #2 Out due to non COVID illness, PDA #3 used third party testing.

Circumstances leading to no testing: b. aide #1 resigned, manager #2 PTO, RN #3 PTO, aide #4 PTO, Receptionist #5 resigned, LPN #6 PTO.

Weekly comprehensive testing of all employees was completed for 14 days with negative results prior to a pause in testing after the 7/13 test date.

The Community Services Coordinator and Supervisor of Assisted Living Services Agency reviewed the community protocols and practices pertaining to documentation of COVID 19 testing, specifically active vs non-active employees to ensure the institutions compliance with its plan of correction. This has been completed and in place for future compliance.