STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Renée D. Coleman-Mitchell, MPH
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

Healthcare Quality and Safety Branch

January 7, 2020

Debra Duch, Person-in-Charge
Crestwood Manor Inc
90 Broad Street
Norwich, CT 06360

Dear Ms Duch :

An unannounced visit was made to Crestwood Manor Inc on November 12, 2019 by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting a licensure 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 January 20, 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 may be subject to disciplinary action.

Connecticut Department of Public Health

Phone: (860) 509-7400 • Fax: (860) 509-7543
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Hartford, Connecticut 06134-0308
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Affirmative Action/Equal Opportunity Employer

Debra Duch, Person-in-Charge
Crestwood Manor

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 January 20, 2020 or if a request for a meeting is not made by the stipulated date, the violation shall be deemed admitted.

Please return your response to the Supervising Nurse Consultant via email at dph.flisadmin@ct.gov or right fax number 860-622-2655. Please direct your questions concerning the instructions contained in this letter to the Supervising Nurse Consultant at (860) 509-7400. Please do not send another copy via US mail.

If there are any questions, please do not hesitate to contact this office at (860) 509-7400.

Respectfully,

Karen Gworek, RN

Karen Gworek, RN
Supervising Nurse Consultant
Facility Licensing and Investigations Section

KEG

c. Mairead Painter, LTC Ombudsman Program

Debra Duch, Person-in-Charge
Crestwood Manor

The following are a violation of the Regulations of Connecticut State Agencies Section 19-13-D6 (c) Administration (1) and/or (4)(A)(B) and/or (c) Administration (5).

1. Based on review of personnel files and interviews, the facility failed to conduct annual performance evaluations, an orientation program for new hires and annual in-services on general safety to include fire safety, emergency procedures, resident rights and the policies and procedures of the facility. The findings include:
   a. Interview and review of personnel files with the Person-in-Charge on 11/12/19 identified for Staff Attendants #1, #2, #3, #4, #5, #6, and #9 the files failed to reflect documentation that annual performance evaluations were completed in 2018. Upon further review, the personnel files identified there were no performance evaluations for Staff Attendants #1, #2, #4 and #5 and performance evaluations for Staff Attendants #3, #6 and #9 were last conducted back in 2017.
   b. Interview and review of personnel files with the Person-in-Charge on 11/12/19 identified Staff Attendant, date of hire 9/20/19 and Staff Person #2, date of hire 11/4/19, the files failed to reflect documentation that general education in-services including fire safety were completed upon hiring and were conducted during the initial orientation process.
   c. Interview and review of personnel files with the Person-in-Charge on 11/12/19 for Staff Persons #1, #2, #3 #4, #5, #6, #7, #8, and #9 identified that the files failed to reflect documentation of educational in-services on general safety, fire safety, emergency procedures and resident rights conducted in 2018.

CRESTWOOD MANOR, LLC

Residential Care Home

Approved
1/30/20
KEG

January 13, 2020

State of Connecticut

Department of Public Health

[redacted]

Re: Plan of Correction Letter

[redacted]

I received my Plan of Correction Letter dated January 7, 2020. I am responding to you as to my plan of correction.

Violation #1a. – I have completed 4 annual performance evaluations as of this date. I plan to complete all evaluations before the end of January , 2020.

b. Fire safety in-services have been completed. It was in my training packet given to all new hires. I had 2 new hires on the date of my inspection and orientation was on-going at that time.

c. A new educational in-service program is being put together as of this writing. All staff will be involved in completing and signing off on these in-services.

[redacted], Administrator of Crestwood Manor, will be responsible for implementing all changes and staying in compliance with the plan of correction.

If you need further information, please do not hesitate to contact me.

Sincerely yours,

Debra A Duch

Debra A. Duch

Owner - Administrator

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