# 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

August 4, 2020

Danielle Elliott-Jackson, Executive Director
Spring Village At Danbury
8 Glen Hill Road
Danbury, CT 06811

executive.director@springvillagedanbury.com

Dear Ms. Elliott-Jackson:

An unannounced visit was made to Spring Village At Danbury on July 13, 2020 by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting an investigation with additional information received through August 4, 2020.

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 violation 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 August 14, 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.

DATE(S) OF VISIT: July 13, 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 August 14, 2020 or if a request for a meeting is not made by the stipulated date, the violation shall be deemed admitted.

We do not anticipate making any practitioner referrals at this time.

If there are any questions, please do not hesitate to contact this office at Loan.Nguyen@ct.gov.
Respectfully,

Loan D Nguyen

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

CT # 27825

DATE(S) OF VISIT: July 13, 2020

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

The following are violations of the Regulations of Connecticut State Agencies Section D19-13-D105 Assisted living services agency (d) Governing authority of an assisted living services agency (4) (A) and/or (g) Supervisor of assisted living services (2) (D) and/or (h) Nursing Services (3) (C) and/or (D) and/or (k) Client service record (2) (H).

1. Based on review of the clinical record and interview with facility staff, the Assisted Living Services Agency (ALSA) RN (Registered Nurse) failed to update the plan of care following a change in condition and treatment changes. The findings include:
   a. Client #1 was admitted to the assisted living program on 12/16/2011 with diagnoses that included chronic obstructive pulmonary disease, hypertension, stage IV kidney disease and chronic urinary tract infections.
   The original plan of care addressed Client # 1's decreased fluid intake, and chronic urinary tract infections with interventions that included the provision of fluids every two hours while awake, incontinence care each shift and twice at night as needed.
   Interview with the former SALSA (RN #1) on 7/13/2020 indicated that on 8/30/19, Client # 1's next-of-kin administered to Client #1 a single dose antibiotic (Monurol) for a suspected urinary tract infection.
   Interview and review of the nursing documentation with LPN #1 on 7/13/2020 failed to identify the appropriate updates in the plan of care to reflect the change in condition, the antibiotic treatment and nursing interventions to address and monitor the change in condition and new treatment.
   Subsequent documentation by LPN #2 on 9/05/19 (5 days after the Monurol administration) indicated that Client #1 was transferred to the hospital per the next-of-kin's request after the client complained of lower abdominal pain and refused food and fluids. The client was admitted to the hospital with urinary tract infection and bacteremia.
   From the hospital the client was discharged to a nursing facility.

POC accepted
9-1-2020
MD

Spring Village at Danbury
A WoodBine Senior Living Community

**PLAN OF CORRECTION**

Developed in response to the visit made to Spring Village at Danbury on July 13, 2020 with a finding of a violation of the regulations of Connecticut State Agencies, Connecticut General Statute-Section D19-13-D105 Assisted living services agency (d) Governing authority of an assisted living services agency (4) (A) and/or (g) Supervisor of assisted living services (2) (D) and/or (h) Nursing Services (3) (C) and/or (D) and/or (k) Client service record (2) (H).

Presented to the State of CT-Department of Public Health by: **Spring Village at Danbury Assisted Living, LLC**

**Violation**

1. Based on review of the clinical record and interview with facility staff, the Assisted Living Services Agency (ALSA) RN (Registered Nurse) failed to update the plan of care following a change in condition and treatment changes. The findings include:
   a. Client #1 was admitted to the assisted living program on 12/16/2011 with diagnoses that included chronic obstructive pulmonary disease, hypertension, stage IV kidney disease and chronic urinary tract infections.
   The original plan of care addressed Client # 1's decreased fluid intake, and chronic urinary tract infections with interventions that included the provision of fluids every two hours while awake, incontinence care each shift and twice at night as needed.
   Interview with the former SALSA (RN #1) on 7/13/2020 indicated that on 8/30/19, Client # 1's next-of-kin administered to Client #1 a single dose antibiotic (Monurol) for a suspected urinary tract infection.
   Interview and review of the nursing documentation with LPN #1 on 7/13/2020 failed to identify the appropriate updates in the plan of care to reflect the change in condition, the antibiotic treatment and nursing interventions to address and monitor the change in condition and new treatment.
   Subsequent documentation by LPN #2 on 9/05/19 (5 days after the Monurol administration) indicated that Client #1 was transferred to the hospital per the next-of-kin's request after the client complained of lower abdominal pain and refused food and fluids. The client was admitted to the hospital with urinary tract infection and bacteremia.
   From the hospital the client was discharged to a nursing facility.

POC accepted 9-1-2020

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.

**Plan of correction:**

1. Residents with self-service pre-pouring of medication:
    a. Medication regime will be assessed every 120 days and upon order changes.
    b. Medication regime that includes Antibiotic, Antidiabetic, Cardiac/ Hypertensive or specific rate control drugs will be administered by a License Nurse.
    c. Vital signs will be assessed and monitored every shift.
    d. Residents Antibiotic therapy will be assessed, monitored every shift for side effects or adverse reactions and documented in resident chart. When ABT course is completed, assessment and monitoring will continue daily for 72 hrs.
    e. Nursing documentation in chart must be completed once daily.

2. Resident care plan must be updated to show all new medications or treatment orders within 24 hrs. of change order or new order.
3. Residents on self-service pre-pouring of medication and has change or new orders that require nurse management will have this service added and POA will be contacted.
4. There will be no deviation to this rule.
5. Moving forward, Spring Village admission booklet will be updated to include the above mentioned.
6. The overall responsibility for this care plan is the SALSA.