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 31, 2020

Dorothy Wall, Supervisor of Assisted Living Services Agency
The Roses At Guilford House
109 West Lake Avenue
Guilford, CT 06437

salsa@theguilfordhouse.com

Dear Ms. Wall:

An unannounced visit was made to The Roses At Guilford House on July 30, 2020 by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting an infection control 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 September 10, 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.

You may wish to dispute the violation and you may be provided with the opportunity to be heard. If the

DATE(S) OF VISIT: July 30, 2020

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

violation is not responded to by September 10, 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.

Respectfully,

Loan D Nguyen

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

DATE(S) OF VISIT: July 30, 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, surveyor observation and interview with agency staff, for one of two clients in the survey sample (Client #1) , the Assisted Living Services Agency (ALSA) failed to maintain the appropriate posting of signage outside the room of a client on quarantine during the covid-19 pandemic. The findings include:

   a. Client #1 was admitted to the ALSA program on 6/18/20 with diagnoses that included chronic combined systolic and diastolic heart failure, dyslipidemia, multiple strokes, hypertension, impacted cerumen of left ear, irritable bladder, lung nodule, moderate mitral stenosis, vascular dementia without behavioral disturbance, a history of adenomatous polyps of the colon, and status-post bilateral knee arthroplasty.

      Client # 1 was placed on a 14-day quarantine after admission to the facility on 6/18/2020. Then on 7/20/2020, Client # 1 sustained an unwitnessed fall, and evaluation at the Emergency Department identified a fractured left wrist. On 7/22/2020, Client # 1 went out with the family to an audiology appointment for a hearing aide fitting.

      As a result of the medical evaluations outside the facility, Client # 1's quarantine was re-instated from 7/23/2020 through 8/6/2020.

      i. On7/30/20 at 10 AM, during a monitoring visit for covid-19 infection control, the surveyor and one guardsman (National Guard #1) found no signage posted outside Client #1's room.

         Interview with the Supervisor of Assisted Living Services (SALSA) on 7/30/2020 indicated that during the client's quarantine, a sign should be posted at the door about transmission precautions, to alert the staff to the need of donning personal protective equipment (PPE) prior to entering the client's room, and failed to identify proper signage in conformance with quarantine recommendations;

   b. The surveyor and the guardsman also observed the presence of the visiting nurse from Home Health Agency # 1 in Client # 1's room. The visiting nurse wore personal glasses and a disposable surgical mask, without the benefit of additional PPE.

      The surveyor inquired with the SALSA, who entered Client # 1's room without the benefit of donning PPE or performing hand hygiene, and informed the visiting nurse that the resident was on isolation, thus the visiting nurse needed to don proper PPE;

      i. The visiting nurse exited Client # 1's room without proper hand hygiene and without the SALSA reminding the visiting nurse to perform hand hygiene. Outside the client's room, the visiting nurse accessed clean gown and gloves, and brought them into the client's room to don, without the SALSA reminding the visiting nurse of the proper protocol.

DATE(S) OF VISIT: July 30, 2020

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

Interview and review of the ALSA policies with the SALSA on 7-30-2020 failed to identify conformance with the posting of signage during Client # 1's quarantine, and education to ALSA staff and other healthcare worker on hand hygiene and the appropriate steps for donning and doffing PPE.

for accepted
10-1-2020
LNguyen

September 3, 2020

Loan Nguyen

Supervisor Nurse Consultant

Facility Licensing and Investigations Section

Dear Ms Nguyen,

Please accept the following as plan of correction subsequent to an unannounced visit on July 30, 2020.

Section 19-13-D105(e)General requirements for an assisted living service agency(1)

a. No resident or staff member suffered any ill effects related to no signage posted outside of Client #1's room during quarantine on 7/30/2020.

1. On July 30, upon departure of the survey team, a sign was reposted at the doorway of Client#1. Salsa/designee will audit every shift for signs outside of all quarantine rooms for sign and restock PPE carts. A list of residents on precautions and dates will remain in office of ALF.

b. No client or staff suffered any ill effects from failure to follow appropriate infection control measures.

1 On July 30th,2020 the visiting nurse exiting client #1 room, was provided education on proper hand hygiene and donning and doffing PPE for residents on quarantine by the SALSA>

2. Inservice education for ALSA and contracted staff will be provided on appropriate infection control measures for quarantine isolation by 9/9/20. All new staff will also be provided the same on an ongoing basis. SALSA/designee to provide.

3. All contracted agencies/staff will be contacted by the SALSA /designee as to facility policy of reviewing any resident on isolation, of which a list is maintained in ALSA office by 9/9/2020. SALSA/designee will monitor.

Respectfully submitted,

D A Wall

Dorothy Wall RN SALSA

The Roses at The Guilford House