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

December 30, 2020

Ron Bucci, Executive Director
The Greens At Cannondale
435 Danbury Road
Wilton, CT 06897

rbucci@thegreensatcannondale.com

Dear Mr. Bucci:

An unannounced visit was made to The Greens At Cannondale on January 2, 2020 by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting an investigation.

Attached is a 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 January 10, 2021.

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 at Karen.Donato@ct.gov may be subject to disciplinary action. Please do not send another copy via US mail.

DATE OF VISIT: January 2, 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 January 10, 2021 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 Karen.Donato@ct.gov.

Respectfully,

Loan D Nguyen

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

CT # 26741

LDN:lst

DATE OF VISIT: January 2, 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 (d) Governing authority of an assisted living services agency (4)(A) and/or (m) Client's bill of rights and responsibilities (5)

1. Based on clinical record review and staff interview, for one of one client (Client #1) who was at risk for falls and required safety checks every two hours, the Assisted Living Services Agency (ALSA) staff failed to provide the necessary safety checks. The findings include:

   a. Client #1 was admitted to the Memory Care assisted living program on 10/07/19 for a respite stay, with diagnoses that included hypertension, memory loss and rheumatoid arthritis. The client service program dated 10/07/19 identified the need for assistance with bathing, dressing, meal setup, grooming, transfers, walking with walker, and with occasional incontinence.

   The nursing assessment included a fall risk score of 26 indicative of an increased risk for falls, and the plan of care included safety checks every 2 hours.

   The ALSA documentation indicated that on 10/18/19 at 11:45 PM Client #1 slipped and fell in bedroom while ALSA Aide #1 was in the room, but ALSA Aide had the back turned to the client.

   The client verbalized having slipped on the floor and hit head against the wall.

   The client complained of right hip and leg pain, and was transferred to the hospital.

   The hospital record showed and acute left subdural hematoma and right femur comminuted displaced oblique fracture, with loosening of the femoral stem of the right hip prosthesis.

   Review of the ALSA documentation from 10/07/10 to 10/18/19 with the RN Designee on 1/02/2020 failed to indicated that the ALSA aides were completing safety checks on Client # 1 every 2 hours as directed by the client service program, and failed to identify safe care provided to a client at high risk for falls.

accepted
IE
1/8/2021

The CANNONDALE CAMPUS
The Greens at Cannondale – Wilton Meadows

Loan Nguyen, M.S.N., R.N., C.
Supervising Nurse Consultant
Facility Licensing and Investigations Section
410 Capitol Avenue
PO Box 340308
Hartford, CT 06134-0308

January 8, 2021

Dear Ms. Nguyen,

In response to your letter dated December 30, 2020, please note the enclosed Plan of Correction for The Greens at Cannondale.

The filing of this Plan of Correction does not constitute an admission that the deficiencies alleged did in fact exist. The plan is filed as evidence of the facility's desire to continue to provide high quality care. This Plan of Correction constitutes the facility's credible allegation of substantial compliance.

We continue to enjoy our partnership with the Department in the spirit of providing high quality, safe and dignified care for our seniors.

Please do not hesitate to contact me should you have any questions or concerns.

Sincerely,

Michelle DelValle, RN
Director of Wellness and
Supervisor of Assisted Living Services Agency
The Greens at Cannondale

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The Greens at Cannondale
Plan of Correction – Connecticut State Agencies / or General Statutes of CT

Survey completed January 2, 2020

1) Alleged violation - Section 19-13-D105 (d):

The filing of this Plan of Correction does not constitute an admission in any forum by The Greens at Cannondale, or its officers, directors, employees or contractors, as to the Department's findings or as to the specific violations alleged. The Greens at Cannondale files these Plans of Correction in the spirit of maintaining optimal resident care.

1) The facility shall ensure safe care for residents with a high risk for fall. Non - licensed ALSA staff will be re-inserviced on the performance and documentation of safety checks.

2) This corrective measure will be effectuated by February 5, 2021

3) Random audits will be conducted no less than quarterly to ensure that this corrective measure is sustained.

4) The SALSA will be responsible for monitoring this individual Plan of Correction.