

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
FACILITY LICENSING AND INVESTIGATIONS SECTION

Page 1 of 1

LICENSING INSPECTION REPORT

d/b/a Name and Address of Entity

Signature of FLIS Staff

BAL Rocky Hill
1160 Elm Street Extension
Rocky Hill, CT 06067
ME: mholmes@benchmarkquality.com

Karen Orsini Nurse Consultant

Licensure Category:

ALSA

Licensed Bed

Bassinet Capacity: 60

Census:

34

Date(s) of onsite inspection: 10/20/21 & 10/21/21

Date(s) additional information obtained: _____

Personnel contacted: ALSA - Martha Holmes; ES - Allyson Sweeney

REVIEW/FINDINGS/PROCESS (Complete all applicable categories)

☒ Licensing Inspection ☐ Initial ☒ Renewal ☐ Other (e.g. strikes): _____

☐ Visit OR Revisit for the purpose of _____

☒ See Complaint Investigation # 31007

☒ Violations of the General Statutes of Connecticut and/or regulations of Connecticut State Agencies were identified at the time of this inspection. See attached violation letter dated _____

☐ Desk Audit ☐ Amended Letter: _____ Original Ltr. _____

☐ Citation # _____ was issued to this facility as a result of this inspection.

☐ Violations of the General Statutes of Connecticut and/or the regulations of Connecticut State Agencies were not identified at the time of this inspection.

☐ Citation # _____ was/was not verified as corrected. See attached narrative report.

☐ Narrative report/additional information attached.

☐ See Certification File.

☐ Referral(s) to _____

REPORT SUBMITTED BY: Karen Orsini DATE OF REPORT: 10/21/21

☒ Approval for issuance of license granted by: [Signature] DATE: 10/21/21
Supervisor/Title

2