

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Renée D. Coleman-Mitchell, MPH
Commissioner-Designate

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

Healthcare Quality and Safety Branch

March 10, 2020

Amy Katz, Person-in-Charge
Tidelawn Manor
97 Seaside Avenue
Westbrook, CT 06498

Dear Ms. Katz:

An unannounced visit was made to Tidelawn Manor on February 5, 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 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 March 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 may be subject to disciplinary action.



Phone: (860) 509-7400 • Fax: (860) 509-7543
Telecommunications Relay Service 7-1-1
410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
www.ct.gov/dph

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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 March 24, 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 and direct your questions to the Supervising Nurse Consultant at (860) 509-7400.

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:mb

c. Mairead Painter, LTC Ombudsman Program

Complaint #26595

The following are a violation of the Regulations of Connecticut State Agencies Section 19-13-D6 (c) Administration (1) and/or (m) Administration of Medications (1)(2).

1. Based on review of the facility policy, facility documentation, personnel files and interviews for one of ten sampled employees (Staff Attendant #6) who was a recent new hire, the facility failed to ensure the Staff Attendant had completed the medication administration training and was certified to administer medication according to the Department of Public Health Code. The findings include:
 - a. Review of the staff schedule identified that Staff Attendant #6 was scheduled to work the 3-11PM shift starting 12/9/19. Review of Staff Attendant #6's personnel file identified Staff Attendant #6 medication administration certification was completed when the attendant was working for a different state health agency. Review of the facility policy for administration of medications identified that the staff must achieve competency and be certified every three (3) years by a course that has been approved by the State of Connecticut Department of Public Health to administer medications. Interview with the Person-in-Charge on 2/5/20 at 12:30 PM identified that Staff Attendant #6 was hired in December of 2019 to work part time on the 3-11PM shift and was administering scheduled medications to residents. The Person-in-Charge stated that Staff Attendant #6 was assessed and trained by her and she felt Staff Attendant #6 was appropriate to administer medications. The Person-in-Charge indicated that Staff Attendant #6 does not administer as needed medications.

