

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

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ALSA LICENSING INSPECTION REPORT

Signature of FLIS Staff

Brighton Gardens of Stamford, ALSA
Sunrise Senior Living Services
Brighton Gardens Wilton MRC
Brighton Gardens Fairfield MRC

69 Roxbury Road, Stamford, 06902

Michael J. Smith, RN
Nurse Consultant

stamfordbg.rcd@sunriseseniorliving.com

Licensure Category: ALSA MRC #1

Census:

114apts Capacity
24 Memory Clients, 90 ALSA

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Date(s) of onsite inspection: 6/9/22, 6/27/22, 6/28/22

Date(s) additional information obtained:

Personnel contacted: AJ Caporino, Ex Director

Mary Kay Polacek, RN, SALSA

REVIEW/FINDINGS/PROCESS (Complete all applicable categories)

[xx] Licensing Inspection [] Initial [xx] Renewal [] Other (e.g. strikes):

[] Visit **OR** Revisit for the purpose of
And vaccinations update

[] See Complaint Investigation

[] 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.

**STRIKE MONITORING SUPPLEMENT TO
LICENSING INSPECTION REPORT**

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- ☐ 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) _____
- ☒ Verification of Alzheimer's special care units or programs
- ☒ Full Time Infection Prevention and Control Specialist and other requirements of P.A. 21-185

REPORT SUBMITTED BY: Michael J. Smith, RN
Date of Report 6/28/22

DATE OF REPORT:

☒ Approval for issuance of license granted by Elizabeth Henry SNC **DATE:** 6/30/22
Supervisor/Title