

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

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ALSA LICENSING INSPECTION REPORT

Signature of FLIS Staff

Maplewood at Southport ALSA

917 Mill Hill Terrace, Southport,
06890

tbtirri@maplewoodsl.com

Michael J. Smith, RN
Nurse Consultant

212

Licensure Category: ALSA

Census: 98 apts Capacity
32 Memory Clients, 66 ALSA

Date(s) of onsite inspection: 7/5/22

Date(s) additional information obtained:

Personnel contacted:

Thamara Barbosa-Tirri, Ex Director

Diane Pimentel, RN, SALSA

REVIEW/FINDINGS/PROCESS (Complete all applicable categories)

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

☐ Visit **OR** Revisit for the purpose of
And vaccinations update

☒ See Complaint Investigation Reviewed VL 3/24/22 and POC 4/1/22

☐ 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.

**STRIKE MONITORING SUPPLEMENT TO
LICENSING INSPECTION REPORT**

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Ixx 1 Violations of the General Statutes of Connecticut and/or the regulations of Connecticut



Violations -

State Agencies **were not** identified at the time of this inspection.

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- [] Citation # _____ was/was not verified as corrected. See attached narrative report.
- [] Narrative report/additional information attached.
- [] See Certification File.
- [] Referral(s) _____

[xx] Verification of Alzheimer's special care units or programs

[xx] ~~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:

Date of Report 7/5/22

[X] Approval for issuance of license granted by: Elizabeth T. New DATE: 8/20/22
Supervisor/Title GNC

