

MRC #2

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

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ALSA LICENSING INSPECTION REPORT

d/b/a Name and Address of Entity

Signature of FLIS Staff

Motif by Monarch - MRC
655 Main St South, Southbury Ct 06488

Megan Edson-Sawyer

Nurse Consultant

09/19/2022
Date(s) of onsite inspection:

09/20/2022
Date(s) additional information obtained:

Personnel contacted: SALSA Mary Napomiceno mnapomiceno@sb.monarchcommunities.com/motif

REVIEW/FINDINGS/PROCESS (Complete all applicable categories)

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

☒ Visit **OR** Revisit for the purpose of: Monitoring Visit due to change in ownership

☒ See Complaint Investigation: CT#32952

☒ 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 10/4/22

☐ 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 _____

☒ Verification of Alzheimer's special care units or programs or ☐ Not applicable

☐ Full Time Infection Prevention and Control Specialist and other requirements of P.A. 21-185

REPORT SUBMITTED BY: Megan Edson-Sawyer DATE OF REPORT: 09.19.2022

☐ Approval for issuance of license granted by: Elizabeth Toney DATE: 9/30/22
Supervisor/Title

LICENSING INSPECTION NARRATIVE REPORT:

