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

LICENSING INSPECTION REPORT

Facility DBA and Address

Whitney Center
DBA
153 Leeder Hill Drive
Street Address
Hamden CT 06517
Municipality *ZIP Code*
M: russellk@whitneycenter.com

Signature of FLIS Staff

Laura Boggio — Nurse Consultant

Survey Team Leader:
Supervisor: Elizabeth Heiney

Licensure Category: ALSA
License Number:
Licensed Bed Capacity:
Licensed Bassinet Capacity:
Census: 55

Date(s) of onsite inspection: 12/14/2022

Date(s) additional information obtained: 12/15/2022

Personnel contacted: Karen Russell Executive Director, Michelle Stocking SALSA

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 # 33435

☑ 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 12/29/22

☐ 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

☐ CMP fund verification
☐ CRF grant verification
☐ Shift Coach
☐ Full Time Infection Prevention and Control Specialist

STRIKE MONITORING SUPPLEMENT TO LICENSING INSPECTION REPORT

REPORT SUBMITTED BY: Laura Boggio **DATE OF REPORT:** 12/15/22

☐ Approval for issuance of license granted by: Elizabeth Henry SDC **DATE:** 12/18/22
Supervisor/Title