

Approved for 12/22 - 12/30/2024
 4+ multiple visits CTW 12/30/22

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

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LICENSING INSPECTION REPORT

Facility DBA and Address

Signature of FLIS Staff

Spring Village at Danbury

Megan Edson-Sawyer Nurse Consultant

DBA

8 Glen Hill Rd

Street Address

Danbury CT 06811

Municipality

ZIP Code

M: executive.director@springvillagedanbury.com

Survey Team Leader: Megan Edson-Sawyer

Supervisor: Cheryl Davis

Licensure Category: ALSA ☒

Licensed Bed Capacity: _____

Census: _____

License Number: _____

Licensed Bassinet Capacity: _____

Date(s) of onsite inspection: 11/01/2021

Date(s) additional information obtained: _____

Personnel contacted: Executive Director Maryellen Wallin email: executive.director@springvillagedanbury.com

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 # _____
- ☒ 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 11/15/2021
- ☐ 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**

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REPORT SUBMITTED BY: Megan Edson-Sawyer **DATE OF REPORT:** 11/1/21



Approval for issuance of license granted by: Elizabeth T. Kelley **DATE:** 12/1/21
Supervisor/Title SWC