STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Manisha Juthani, MD
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

Healthcare Quality and Safety Branch

February 1, 2023

Wayne Dixon, SALSA
Via Email: wayne.dixon@atriaseniorliving.com
Atria Larson Place
1450 Whitney Avenue
Hamden, CT 06517

Dear Mr. Dixon,

An unannounced visit was made to Atria Larson Place on October 4, 2022 by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting a Re-Licensure.

Attached is the violation of the Regulations of Connecticut State Agencies and/or General Statutes of Connecticut which was noted during the course of the visit. The state violations cannot be edited by the provider in any way.

In accordance with Connecticut General Statutes, section 19a-496, upon a finding of noncompliance with such statutes or regulations, the Department shall issue a written notice of noncompliance to the institution. Not later than ten days after such institution receives a notice of noncompliance, the institution shall submit a plan of correction to the Department in response to the items of noncompliance identified in such notice.

The plan of correction is to be submitted to the Department by February 11, 2023.

The plan of correction shall include:
(1) The measures that the institution intends to implement or systemic changes that the institution intends to make to prevent a recurrence of each identified issue of noncompliance;
(2) the date each such corrective measure or change by the institution is effective;
(3) the institution's plan to monitor its quality assessment and performance improvement functions to ensure that the corrective measure or systemic change is sustained; and

(4) the title of the institution's staff member that is responsible for ensuring the institution's compliance with its plan of correction.

The plan of correction shall be deemed to be the institution's representation of compliance with the identified state statutes or regulations identified in the department's notice of noncompliance. Any institution that fails to submit a plan of correction may be subject to disciplinary action.

You may wish to dispute the violation and you may be provided with the opportunity to be heard. If the violation is not responded to by **February 11, 2023**, or if a request for a meeting is not made by the stipulated date, the violation shall be deemed admitted.

Please return your response to Elizabeth Heiney, Supervising Nurse Consultant, at Elizabeth.Heiney@ct.gov. Please direct your questions concerning the instructions contained in this letter to Elizabeth Heiney directly at (860) 509-8059. Please do not send another copy via US mail.

We do not anticipate making any practitioner referrals at this time.

Respectfully,

/s/

Elizabeth Heiney, RN
Supervising Nurse Consultant
Facility Licensing and Investigations Section

EL:csf

c. VL

POC accepted 2/16/23 ws

The following are violations of the Regulations of Connecticut State Agencies Section 19-13-D105 (d) Governing authority of an assisted living services agency (4)(C) and (e) General requirements for an assisted living services agency (1) and (l) Quality assurance program for an assisted living services agency (1).

1. Based on a review of agency documentation and interview with agency personnel, the Governing Authority failed to select and appoint a social worker on the quality assurance committee. The finding includes:

    a. Interview and review of the Quality Assurance meeting minutes dated 2/09/22, 4/21/22 and 7/21/22 with the Executive Director on 10/04/22 at 11:30 AM failed to identify documentation of the appointment and/or input from a social worker on the quality assurance committee meetings.

Plan of Correction for Violation #1:

Atria LARSON PLACE

poc accepted 2/10/23 WS

Preparation, execution, and submission of this Plan of Correction does not constitute an admission of fault or liability on the part of Atria Larson Place ("Atria" or the "community") nor an agreement by Atria Larson Place as to the truth of the facts alleged or conclusions drawn in the letter or violation or any specific statement of non-compliance. Atria Larson Place prepares a submits this Plan of Correction to comply with state laws and regulatory provisions.

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Plan of Correction for Violation #1:

As of October 4, 2022, Atria Larson Place added Licensed Clinical Social Worker (LCSW) Patti Smith to the Governing Authority Committee.

Moving forward Patti will be a part of all quality assurance committee meetings and a member of the quality assurance committee.

If Patti is not available to participate for any reason, our home care agency, Constellation Home Care will provide a Licensed Clinical Social Worker to ensure that we remain in compliance with the regulatory requirement.

The Executive Director and the Resident Services Director (SALSA) or designee will be responsible for monitoring and ensuring compliance going forward.