

Section
3

2016

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

Page 1 of ____

LICENSING INSPECTION REPORT

D/B/A Name and Address of Entity

Signature of Survey Staff

Masonicare Home Health & Hospital Care
104 South Turnpike Rd
Wassersford CT 06492
Licensure Category: 203-679-5300
Assisted Living Services Agency
Licensed Bed/Bassinet Capacity: Melissa J. Sanborn RN Home Consultant
Census: _____

Date(s) of onsite inspection: 11/03/16, 11/04/16, 11/07/16, 11/08/16

Date(s) additional information obtained: _____

Personnel contacted: Diana Santos RN, Regional Director

REVIEW/FINDINGS/PROCESS (Complete all applicable categories)

- ☒ Licensing Inspection [] Initial [☒] Renewal [] Other: (e.g. Strike) _____
- [] 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 October 4, 2017
- [] Desk Audit _____ [] Amended Letter date: _____
- [] 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.
- [] Referred to: _____

REPORT SUBMITTED BY: Melissa J. Sanborn RN DATE OF REPORT: 12/02/16

☒ Approval for issuance of license granted by: Joan D. Nguyen DATE: 12-5-16
Supervisor/Title

ENTITY: Moonrise Home Health & Hospice ALSA

DATE(S) OF VISIT: 11/07/14, 11/08/14

LICENSING INSPECTION NARRATIVE REPORT

Number of ALSA clients: 43

Number of home visits: 2 Number of records reviewed: 4

SALSA: Sharon D'Alencastre RN

SALSA Designee: Victoria Oldham RN

Home health care contracts/contracts:

Name: Mrs. Soriano 104 South Turnpike Rd

Address: 33 Deep Plains Industrial Rd

Wallingford CT 06492

Phone: 203-679-5300

Name: _____

Address: _____

Phone: _____

Managed Residential Community visited: Welles County Village 46 Welles Rd

Service Coordinator: Daryl Xheraj Vernon CT

Policy review was done relative to record reviews and/or violations cited as appropriate. ✓

SIGNATURE: Melanie J. S. [Signature]

ENTITY: Mansueta Home Health & Hospice ALSA

DATE(S) OF VISIT: 11/03/16, 11/04/16

LICENSING INSPECTION NARRATIVE REPORT

Number of ALSA clients: 55

Number of home visits: 2 Number of records reviewed: 3

SALSA: Natalie C Sweetser RN

SALSA Designee: Charmaine Boothe - Todd RN

Home health care contracts/contracts:

Name: Mansueta

Address: 104 South Turpide Rd

Wassersford CT 06492

Phone: 203-679-5300

Name: _____

Address: _____

Phone: _____

Managed Residential Community visited: Mansueta Home 15 Woodland St

Service Coordinator: Karen Dean Hartford CT

Policy review was done relative to record reviews and/or violations cited as appropriate. ✓

SIGNATURE: Morgan J. Sac. Jones RN

DEPARTMENT OF PUBLIC HEALTH
HOSPITAL AND MEDICAL CARE DIVISION

INSPECTION MATERIALS CHECKLIST
ASSISTED LIVING SERVICES AGENCY

Assisted Living Services Agency Masonicare
Address 15 Woodland St 33104 South Turnpike Rd
City Hartford Wallingford State CT Zip Code 06105
06492

The Inspection Materials Checklist is to be used to identify any new or revised agency materials since the last licensure inspection. Please complete as appropriate for your agency and have any materials so identified available for review.

Agency Materials	New	Revised
<u>BY-LAWS OR RULES OF ORDER</u>		
<u>POLICIES/PROCEDURES</u>		
Client Care Policies/Procedures		
o Admission		
o Assisted Living Aide Program		
o Discharge		
o Emergency		
o Administration of Medications		
o Complaint Procedure		
Nursing Service		
<u>PERSONNEL POLICIES</u> -for the assisted living services agency		
Orientation		
In-service education		
Required health examinations		
Annual performance evaluation policy		
Job description-supervisor of assisted living services		
Job description-assisted living aide		
<u>QUALITY ASSURANCE PROGRAM/PLAN</u>		
<u>BILL OF RIGHTS</u>		
<u>PUBLIC INFORMATION MATERIALS</u>		

PLEASE IDENTIFY ANY OTHER NEW MATERIALS DEVELOPED

No new policies - all in line c headquarters
in Wallingford

Supervisor of Assisted Living Services Signature: Natalie Cusack RN

Date: 11/4/16

