

Section
3

2018

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

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LICENSING INSPECTION REPORT

d/b/a Name and Address of Entity

FLIS Staff

Masonicare Ashlar Village @ Mystic
45 Clara Drive
Mystic, CT 06355
M: Robin Barrin Trina Curcio

Licensure Category:

Licensed Bed

Census:

Assisted Living

Bassinet Capacity: _____

Date(s) of onsite inspection: 8/23/18

Date(s) additional information obtained: _____

Personnel contacted: Julie Balsley SALA Perry Phillips EDREVIEW/FINDINGS/PROCESS (Complete all applicable categories)
☐ Licensing Inspection ☐ Initial ☒ Renewal ☐ Other (e.g. strikes): _____
☐ Visit OR Revisit for the purpose of _____☒ See Complaint Investigation # 23078☒ 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 _____☐ 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 _____REPORT SUBMITTED BY: Robin Barrin DATE OF REPORT: 8/23/18Approval for issuance of license granted by: Joan D Nguyen DATE: 8-27-18
Supervisor/Title

