2022

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

LICENSING INSPECTION REPORT

d/b/a Name and Address of Entity	*Signature of FLIS Staff*	
Crestwood Manor	Kathleen Plaskon, RN	
90 Broad Street	Daniel Tomascak, BFSI	
Norwich, CT 06360		

Licensure Category:
Residential Care Home

Licensed Bed/Bassinet Capacity: 22

Census: 22

Date(s) of onsite inspection: 10/6/22 and 12/12/22

Date(s) additional information obtained: _____

Personnel contacted: Debra Duch, Person-in-Charge

REVIEW/FINDINGS/PROCESS (Complete all applicable categories)

[X] Licensing Inspection [ ] *Initial* [X] *Renewal* [ ] *Other (e.g.strikes)*: _____

[ ] Visit **OR** Revisit for the purpose of _____

[ ] See Complaint Investigation _____

[X] 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 12/22/22

[ ] 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: Kathleen Plaskon RN **DATE OF REPORT: 10/6/22**

[X] Approval for issuance of license granted by: Karen Gworek, RN **DATE:** 12/12/22
Supervisor/Title

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Manisha Juthani, MD
Commissioner

Ned Lamont
Governor

Susan Bysiewicz
Lt. Governor

Healthcare Quality and Safety Branch

December 22, 2022

Debra Duch, Person-in-Charge
Crestwood Manor Inc
90 Broad Street
Norwich, CT 06360

Dear Ms Duch:

Unannounced visits were made to Crestwood Manor Inc on October 6, 2022 and December 12, 2022 by representatives of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting a licensure inspection.

Attached are the violations of the Regulations of Connecticut State Agencies and/or General Statutes of Connecticut which ere noted during the course of the visits. 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 January 5, 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.

Connecticut Department of Public Health

Phone: (860) 509-7400 • Fax: (860) 509-7543
Telecommunications Relay Service 7-1-1
410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
www.ct.gov/dph

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 violations and you may be provided with the opportunity to be heard. If the violations are not responded to by January 5, 2023 or if a request for a meeting is not made by the stipulated date, the violations shall be deemed admitted.

Please return your response to the Supervising Nurse Consultant and direct your questions concerning the instructions contained in this letter to the Supervising Nurse Consultant at (860) 509-7400.

If there are any questions, please do not hesitate to contact this office at (860) 509-7400.

Respectfully,

Karen Gworek, RN
Karen Gworek, RN, BSN
Supervising Nurse Consultant
Facility Licensing & Investigations Section

KEG

cc. Mairead Painter, LTC Ombudsman Program

The following is a violation of the Regulations of Connecticut State Agencies Section 19-13-D6 (c) Administration (1) and/or Connecticut General Statute 19a-495d.

1. Based on interview, the facility failed to have written policies that governed the administration of medications to include the types of medication administered, resident responsibilities, staff responsibilities, storage of medication and record keeping. The findings include:

    a. Interview with the Person-in-Charge on 10/6/22 at 11:00 AM identified the facility did not have a policy regarding medication administration. The Person-in-Charge indicated she would reach out to the pharmacy for assistance in developing a policy.

The following is a violation of the Regulations of Connecticut State Agencies Section 19-13-D6 (c) Administration (1) and/or (m) Administration of Medications (2).

2. Observations during tour of the facility on 10/6/22 identified in Room 6 a rescue inhaler medication (Combivent Respiratory inhaler) was located on the resident's bedside table and in Room 9 a rescue inhaler medication (Proair HFA inhaler) was located on the resident's bedside table. Interview with the Administrator on 10/6/22 at 11:00 AM identified the residents were self-administrating medications. Review of the resident record failed to identify an assessment was completed for each resident who was self-administering medications and a physician's order was obtained for the resident to self-administer medications. The Administrator identified she was unaware residents had to be assessed to be able to self-administer medications and a physician's order had to be obtained for each resident to self-administer medications. A policy regarding self-administration of medications was not provided.

CRESTWOOD MANOR, LLC
Residential Care Home

Approved 1/3/23 KEG

December 27, 2022

State of Connecticut
Department of Public Health
410 Capitol Avenue
PO Box 340308
Hartford, CT 06134-0308

Dear Ms. Gworek:

This is in regards to my inspection letter dated December 22, 2022. Please find the following corrections:

1. Regarding policy that governed the administration of medications: Effective 10/07/22, we have been using the protocol for medication certification as our policy regarding the types of medication that is administered, the staff responsibilities, the storage and record keeping of medications. The pharmacy never returned my call and I am still trying to get some answers from them. An audit of all procedures is being done on a monthly basis, unless otherwise needed. The administrator, Debra Duch, and assistant, Dawn Murphy, are overseeing the implementation of this policy.

2. Regarding rescue inhalers in resident's rooms: Orders from their physicians have been received to allow the keeping of these inhalers with them on their person. This is effective immediately.

If any further information is needed, please contact me. Thank you.

Sincerely yours,

Debra A Duch

Debra A. Duch
Owner-Administrator
Crestwood Manor, LLC

RECEIVED
JAN 03 2023
DEPT. OF PUBLIC HEALTH
FACILITY LICENSING & INVESTIGATIONS SECTION

90 BROAD STREET • NORWICH, CT 06360 • TEL. (860) 889-8800 • FAX: (860) 889-7817