

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Manisha Juthani, MD
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

Healthcare Quality and Safety Branch

October 10, 2023

Theresa Williams, Executive Director
The Residence At Ferry Park
60 Cold Spring Rd
Rocky Hill, CT 06067
Via Email: twilliams@residenceferrypark.com

Dear Ms. Williams:

An unannounced visit was made to The Residence At Ferry Park on September 28, 2023 by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting a re-licensure survey.

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 violation 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 October 20, 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



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The Residence At Ferry Park
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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 October 20, 2023, or if a request for a meeting is not made by the stipulated date, the violation shall be deemed admitted.

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

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.

Respectfully,

/s/

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

EH:csf

c. VL

The following are violations of the Regulations of Connecticut State Agencies Section 19-13-D105 (e)
General requirements for an assisted living services agency (1).

1. Based on interviews with agency personnel, review of agency documentation and clinical records, the agency failed to employ a part-time Infection Preventionist in accordance with the Substitute House Bill No. 5500 Public Act No. 22-58. The findings included:
 - a. Interview and review of agency documentation with the Supervisor of Assisted Living Services Agency (SALSA) identified the agency had a total client capacity of seventy-five (75) with a current census of forty-eight (48) clients. The secure memory care unit had a current census of twelve (12) clients. The agency currently has eight (8) Covid positive clients in the secure memory care unit. Additionally, the SALSA identified the Memory Care Director was the infection preventionist but had not been employed by the agency since August 2023. During the vacancy, the agency failed to employee a part-time infection prevention and control specialist. Public act No 22-58 indicated a dementia special care unit with more than sixty residents would employ a full-time infection prevention and control specialist and a dementia special care unit with sixty clients or less would employ a part-time infection prevention and control specialist.

Plan of Correction for Violation #1:

Poc Accepted
11/13/23 - mes

October 19, 2023

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

Dear Ms. Heiney,

The following plan of correction is being submitted on behalf of the Residence at Ferry Park in response to an unannounced audit by your department representative on September 28, 2023, for the purpose of conducting a licensing renewal inspection. The plan of correction is set forth not as an admission of any wrongdoing, but rather as an opportunity to comply with the alleged violation.

The Residence at Ferry Park
Plan of Correction
October 19, 2023

The following are violations of the Regulations of Connecticut State Agencies Section 19-13-D105 (e) General requirements for an assisted living services agency (1).

1. Based on interviews with agency personnel, review of agency documentation and clinical records, the agency failed to employ a part-time Infection Preventionist in accordance with the Substitute House Bill No. 5500 Public Act No. 22-58.

The measure that the institution intends to implement or systemic changes that the institution intends to make to prevent a recurrence of each identified issues of noncompliance.

In conjunction with Public Act No 22-58, the Executive Director of The Residence at Ferry Park will identify an individual to serve in the capacity of Infection Control Practitioner [ICP].

The date for each such measure or change by the institution is effective.

The ICP designee will complete the CDC 50-hour training program and fully assume the role no later than January 1, 2024.

POC Accepted
6/13/23 mes

The institution's plan to monitor its quality assessment and performance improvement function to ensure the corrective measure or systemic measure or systemic change is sustained.

The Executive Director shall be responsible for ensuring the community continues to meet the requirements outlined in Public Act No 22-58.

The Title of the institution's staff members responsible for ensuring its institution's compliance with the plan of correction.

-Executive Director

Respectfully Submitted,

Theresa Williams

Executive Director

The Residence at Ferry Park