

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

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ALSA LICENSING INSPECTION REPORT

Signature of FLIS Staff

Residence at South Windsor

200 Deming Road
South Windsor 06074
emoore@residencesouthwindsor.com

Michael J. Smith, RN Nurse
Consultant

Licensure Category: ALSA

Census: 82

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Date(s) of onsite inspection: March 4, 2024

Date(s) additional information obtained:

Personnel contacted: _____

Eileen Moore, Ex. Director Tammie Szedlacsek, RN, SALSA

REVIEW/FINDINGS/PROCESS (Complete all applicable categories)

☐ Licensing Inspection ☐ Initial ☐ Renewal ☐ Other (Monitoring Visit)

☐

☒ Complaint # 37021

☐ 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.

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☒ 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.

☐

☐ Verification of Alzheimer's special care units or programs

☐ Part Time Infection Prevention and Control Specialist and other requirements of P.A. 21-185

REPORT SUBMITTED BY: _____ Michael J. Smith, RN _____

DATE OF REPORT: _____

Date of Report 3/4/24

☐ Approval for issuance of license granted by: Elizabeth J. Henry, SMC **DATE:** 3/5/24
Supervisor/Title

**STRIKE MONITORING SUPPLEMENT TO
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LICENSING INSPECTION NARRATIVE REPORT:

Review of ALSA record , Gov. Authority, QA Committee, Staff Review, Homecare Contract, Tour.

