2023

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

LICENSING INSPECTION REPORT

Facility DBA and Address

Bridges by Epoch (Trumbull)
DBA
2415 Reservior Ave
Street Address
Trumbull CT 06611
Municipality *ZIP Code*
M:

Signature of FLIS Staff

Megan Edson-Sawyer — Nurse Consultant
Elizabeth Heiney

Survey Team Leader: Megan Edson-Sawyer
Supervisor: Elizabeth Heiney

Licensure Category: ALSA
License Number:
Licensed Bed Capacity: ___
Licensed Bassinet Capacity: ___
Census: ___

Date(s) of onsite inspection: 08/07/23, 08/08/23 and 08/09/23

Date(s) additional information obtained:

Personnel contacted: Executive Director Trish McKay, SALSA Marie Aman and RN Designee Djenie Fabre

REVIEW/FINDINGS/PROCESS (Complete all applicable categories)

- [x] Licensing Inspection ☐ *Initial* ☑ *Renewal* ☐ *Other (e.g.strikes):*
- [ ] Visit **OR** Revisit for the purpose of
- [x] See Complaint Investigation # 35243 and #35244
- [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 10/4/23
- [ ] 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
- [x] Full Time Infection Prevention and Control Specialist

STRIKE MONITORING SUPPLEMENT TO LICENSING INSPECTION REPORT

REPORT SUBMITTED BY: Megan Edson-Sawyer **DATE OF REPORT:** 8/9/23

☒ Approval for issuance of license granted by: Elizabeth J Henry **DATE:** 10/2/23
Supervisor/Title SNC