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

ALSA LICENSING INSPECTION REPORT

d/b/a Name and Address of Entity
Masonicare Home Health and Hospice
ALSA
110 South Turnpike Road
Wallingford, 06492
Tel: 203-679-6400
MKC - Virginia Connolly
Wells Country Village

Signature of FLIS Staff
Nurse Consultant
Michael J. Smith, RN
Karen Donato RN

Licensure Category: ALSA 185 Census: ____ Capacity: ____
Memory Care/Traditional memory ____

Date(s) of onsite inspection: October 3, 2024

Date(s) additional information obtained: _____

Personnel contacted: Rachael Laudano ExDirector
rlaudano@masonicare.org

REVIEW/FINDINGS/PROCESS (Complete all applicable categories)
[xx] Licensing Inspection [] *Initial* [xx] *Renewal* [ ] *Other (e.g.strikes)*:
2 Managed Communities : Virginia Connolly & Welles Country Village

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

[] See Complaint Investigation_____

[] 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.

[xx] 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.

[xx] Narrative report/additional information attached.

[ ] See Certification File.

[ ] Referral(s) to _____

[ ] Verification of Alzheimer's special care units or programs or [xx] Not applicable

[] 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: 10/3/24**

[X] Approval for issuance of license granted by: Elizabeth J Young RN SDC **DATE:** 10/21/24
Supervisor/Title

LICENSING INSPECTION NARRATIVE REPORT:

Re-Licensure survey consisted of a tour, review of Gov't Authority Minutes, Quality Assurance Meeting Minutes, Personnel folders, and Clinical Record Reviews.

Virginia Connolly : Congregate Facility 20 Clients
SALSA: Lori Sullivan, RN
RN Designee: Terri McCahill
Ex. Director: Christine Winters , Simsbury Housing Authority

Welles Country Village: MRC Facility 45 Clients
SALSA: Sue Bagcal, RN
RN Designee: Lucie Parisi
Ex. Director: Jeanne Murphy, Wells County Housing Authority