

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

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LICENSING INSPECTION REPORT

Facility DBA and Address

Bridges By Epoch (Norwalk)

123 Richards Ave Norwalk, Ct 06854

M: gcambre@bridgesbyepoch.com

Signature of FLIS Staff

Megan Edson-Sawyer

Nurse Consultant

Survey Team Leader: Megan Edson-Sawyer

Supervisor: Elizabeth Heiney

Licensure Category: ALSA

License Number: 190

Licensed Bed Capacity: _____

Licensed Bassinet Capacity: _____

Census: _____

Date(s) of onsite inspection: 01/02/2025

Date(s) additional information obtained: _____

Personnel contacted: Executive Director Gina Cambre and SALSA Brittany Pettway

Email Address: gcambre@bridgesbyepoch.com

REVIEW/FINDINGS/PROCESS (Complete all applicable categories)

☐ Licensing Inspection ☐ Initial ☐ Renewal ☐ Other (e.g. strikes): _____

☐ Visit **OR** Revisit for the purpose of _____

☒ See Complaint Investigation # 42314

☒ 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 1/15/25

☐ 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 _____

REPORT SUBMITTED BY: Megan Edson-Sawyer DATE OF REPORT: 01/02/2025

☐ Approval for issuance of license granted by: Elizabeth Heiney RN DATE: 1/15/25
SNC