

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

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ALSA LICENSING INSPECTION REPORT

d/b/a Name and Address of Entity

Elmbrook Village at Bozrah
380 Salem Turnpike Bozrah, CT 06334
AWatrous@elmbrookvillage.com

Signature of FLIS Staff

Karen Donato
Elizabeth Heiney

Nurse Consultant
Nurse Consultant

Licensure Category: ALSA 241

Census: ☐ Capacity: ☐
Memory Care/Traditional 21/

Date(s) of onsite inspection: 12/18/24

Date(s) additional information obtained: 12/19/24

Personnel contacted: ED: Kristin Mangual; SALSA: Alison Watrous

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 #38047

☒ 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 12/27/25

☐ 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 _____

☒ Verification of Alzheimer's special care units or programs or ☐ Not applicable

☒ Full Time Infection Prevention and Control Specialist and other requirements of P.A. 21-185

REPORT SUBMITTED BY: Karen Donato RNC DATE OF REPORT: 12/19/24

☒ Approval for issuance of license granted by: Elizabeth Heiney RNC DATE: 12/27/25
Supervisor/Title SAC