38227

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Manisha Juthani, MD
Commissioner

Ned Lamont
Governor

Susan Bysiewicz
Lt. Governor

Healthcare Quality And Safety Branch

May 9, 2024

Accepted
5/20/24
CTullery SNC

Maryellen Hankey, Executive Director
Spring Village At Danbury
8 Glen Hill Road
Danbury, CT 06811
Via Email: executive.director@springvillagedanbury.com

Dear Ms. Hankey:

An unannounced visit was made to Spring Village At Danbury on April 22, 2024, by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting a complaint investigation.

Attached is the violation of the Regulations of Connecticut State Agencies and/or General Statutes of Connecticut which was noted during the course of the visit. The state violations cannot be edited by the provider in any way.

In accordance with Connecticut General Statutes, section 19a-496, Upon a finding of noncompliance with such statutes or regulations, the department shall issue a written notice of noncompliance to the institution. Not later than ten days after such institution receives a notice of noncompliance, the institution shall submit a plan of correction to the department in response to the items of noncompliance identified in such notice.

The plan of correction is to be submitted to the Department by May 19, 2024.

The plan of correction shall include:

(1) The measures that the institution intends to implement or systemic changes that the institution intends to make to prevent a recurrence of each identified issue of noncompliance;

(2) the date each such corrective measure or change by the institution is effective;

(3) the institution's plan to monitor its quality assessment and performance improvement functions to ensure that the corrective measure or systemic change is sustained; and

(4) the title of the institution's staff member that is responsible for ensuring the institution's compliance with its plan of correction.

Connecticut Department of Public Health

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Hartford, Connecticut 06134-0308
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Affirmative Action/Equal Opportunity Employer

DATE OF VISIT: April 22, 2024

THE FOLLOWING VIOLATION OF THE REGULATIONS OF CONNECTICUT STATE AGENCIES AND/OR CONNECTICUT GENERAL STATUTES WAS IDENTIFIED

The plan of correction shall be deemed to be the institution's representation of compliance with the identified state statutes or regulations identified in the department's notice of noncompliance. Any institution that fails to submit a plan of correction may be subject to disciplinary action.

You may wish to dispute the violation and you may be provided with the opportunity to be heard. If the violation is not responded to by May 19, 2024, or if a request for a meeting is not made by the stipulated date, the violation shall be deemed admitted.

PLEASE CONTACT ME AT YOUR EARLIEST CONVENIENCE TO ARRANGE FOR A VIRTUAL CONFERENCE TO DISCUSS THE VIOLATIONS WITH AN ASTERISK. Should you wish legal representation, please feel free to have an attorney accompany you to this meeting.

Alternate remedies to violations identified in this letter may be discussed at the office conference. In addition, please be advised that the preparation of a Plan of Correction and/or its acceptance by the Department of Public Health does not limit the Department in terms of other legal remedies, including but not limited to, the issuance of a Statement of Charges or a Summary Suspension Order and it does not preclude resolution of this matter by means of a Consent Order.

We do not anticipate making any practitioner referrals at this time.

Please return your original violation letter, along with your response and Plan of Correction, to Elizabeth Heiney, Supervising Nurse Consultant, at Elizabeth.Heiney@ct.gov. Please direct your questions concerning the instructions contained in this letter to Elizabeth Heiney directly at (860) 509-8059. Please do not send another copy via US mail.

Respectfully,

/s/

Elizabeth Heiney, BS, RN, BC
Supervising Nurse Consultant
Facility Licensing and Investigations Section

EH:csf

c. Director of Nurses
Medical Director
President
vl
Complaint #38227

THE FOLLOWING VIOLATION OF THE REGULATIONS OF CONNECTICUT STATE AGENCIES AND/OR CONNECTICUT GENERAL STATUTES WAS IDENTIFIED

The following is a violation of the Regulations of Connecticut State Agencies Section 19-13-D105 (m)(5) Bill of Rights.

1. Based on clinical record review, interview with facility personnel, and review of agency policy, for one of one client (Client #1), that was serviced by an Assisted Living service Agency (ALSA), for personal care and safety monitoring, the ALSA failed to ensure the client was treated with respect, dignity and was free from verbal and physical abuse by a staff member during the performance of care. The findings included:
   a. Client #1 had a move in date to the Assisted Living Community on 1/27/23. The admitting diagnoses included schizoaffective disease, dementia with behavioral disturbances, chronic A-Fib and hemiparesis following a Cerebral Vascular Accident (CVA) that affected the left side of Client #1's body and type II diabetes.

      The Client Service program dated 1/27/24 indicated that Client #1 required assistance with showers, grooming, hygiene, dressing, 2-hour body re-positioning while in bed by staff, transfer of 1 staff from bed to chair, and staff cueing to utilize a rolling walker while ambulating.

      Interview with the Executive Director (ED) on 3/19/24 at 9:20am identified that on 2/22/24 at 2:10pm, Client #1's Family Member reported to the ED that she observed on a video recording device, positioned in Client #1's room, in the ALSA facility, an ALSA aide staff members (later identified as Aide #1) being verbally and physically abused to her family member during personal care in the client's bed.

      Review of the agency investigative report timeline with the ED on 3/19/24 at 9:20am, identified that the Executive Director was made aware of the incident on 2/22/24 at 2:30pm by a family member of Client #1. Due to the gravidity of the video recording observed of ALSA aide #1 caring for the client, a decision was made to relieve ALSA aide #1 of his duties. An ALSA agency investigation was initiated, that included a referral to the State Department of Social Services-Elder Protective Services. The local Police Department was contacted at 5:30pm, and a police investigation was conducted. The ED indicated that at the completion of the agency staff interviews, no other staff member had witnessed or heard any abusive behavior toward Client #1, or any other client in the building involving Aide #1. On 2/22/24, an Abuse re-education for all direct and non-direct care staff members, all 3 shifts were initiated, with its completion on 2/24/24. An in-servicing with all department heads for enhanced oversight techniques/strategies of all direct and non-direct caregivers was completed on 2/24/24 by the ED. The ED further identified that a communication was mailed and/or hand delivered to all residents, and/or representative for the residents, explaining what had happened and the agencies resolution.

DATE OF VISIT: April 22, 2024

THE FOLLOWING VIOLATION OF THE REGULATIONS OF CONNECTICUT STATE AGENCIES AND/OR CONNECTICUT GENERAL STATUTES WAS IDENTIFIED

ALSA aide #1 was arrested onsite at the facility by the local Police Department on 2/22/24 at 11:05pm, for Abuse of Person -Elderly 2nd degree (Class D Felony), Assault 3rd degree (Class A Misdemeanor), and Threatening 2nd degree -Physical Threat (Class A Misdemeanor).

Request was made by ALSA agency for a copy of the Police department report, but at this time the case file in pending, and not available for release, due to the ongoing court proceedings.

Review of the Voluntary Police Statement of Family Member #1 on 4/15/24 at 9:50am, dated 2/22/24 at 9:05pm, identified that family members had placed a video recording device, in Client #1's room, within the ALSA facility. After Family Member #1 listened and reviewed the video recording, from Client#1's room, of 2/22/24 at 5:32am, Family Member #1 identified observing ALSA Aide #1 being verbally and physically abusive to Client #1 during early morning care. Family Member #1 observed ALSA Aide #1 saying to Client #1 during personal care, "What's wrong with you?? Stop putting your "$@%%(expletive) .... hands on me, you're a nasty "@@$$#(expletive) bitch. "I'm going to stab you, you @$$%###ing (expletive) bitch." ALSA Aide #1 was observed pushing Client #1 roughly from side to side, pulling on an incontinent pad, underneath the client, while changing Client #1's incontinent garments. Client #1 was heard screaming out in pain as ALSA Aide #1 roughly repositioned client within the bed, with what appeared to be grabbing and pinching motion to the client.

Review of the agency's basic employment policy indicated all clients, employees and supervisors shall be treated with courtesy and respect at all times. Anyone found to be in violation of any threats of violence and suspicious behavior or activities in caring for the client or other conduct that is a violation of the employment guidelines, will be subject to prompt disciplinary actions, including termination of employment. The agency will promptly and thoroughly investigate any reports of threat and/or actual harm to the clients.

Plan of Correction for Violation #1:

Spring Village at Danbury

A WoodBine Senior Living Community

Accepted 5/20/24 CTW

PLAN OF CORRECTION:

COMPLAINT # 38227

MAY 18, 2024

1.) SVD implementation of random Department Head checks ins on all 3pm -11pm and 11pm-7am shifts- 4x weekly - started immediately on 02/23/24

2.) All staff re-trained on Neglect & Abuse starting on 02/23/24 with 3pm -11 pm staff, completed 02/25/24

3.) Neglect & Abuse policy part of new employee orientation. Creating dialogue to openly discuss different aspects of scenarios at ALL Associates meetings quarterly.

4.) Compliance to be monitored by Maryellen Hankey (Executive Director and Clarice McDermott Wilson (SALSA)

Maryellen Hankey

Executive Director

Spring Village at Danbury

203-417-0563