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

LICENSING INSPECTION REPORT

d/b/a Name and Address of Entity
Card Home for the Aged
154 Pleasant Street
Willimantic, CT 06226

Signature of FLIS Staff
Glenna Fried, LCSW

Licensure Category:
Residential Care Home

Licensed Bed Capacity: 20

Census: 13

Date(s) of onsite inspection: 4/8/25

Date(s) additional information obtained: _____

Personnel contacted: Susan Humes, Person-in-Charge, Dawn Bakke, Interim Administrator
Email Address: thecardhome@yahoo.com

REVIEW/FINDINGS/PROCESS (Complete all applicable categories)

[ ] Licensing Inspection [ ] *Initial* [ ] *Renewal* [ ] *Other (e.g.strikes)*: _____

[ ] Visit **OR** Revisit for the purpose of reviewing the Plan of Correction for the violation letter dated

[X] See Complaint Investigation #43585

[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 4/29/25

[ ] 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: Glenna Fried, LCSW **DATE OF REPORT:** 4/10/25

[ ] Approval for issuance of license granted by: _____ **DATE:** _____
Supervisor/Title

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Manisha Juthani, MD
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

Healthcare Quality and Safety Branch

April 29, 2025

Dawn Bakke, Interim Person-in-Charge
Card Home for The Aged, Inc
154 Pleasant Street
Willimantic, CT 06226

Dear Ms. Bakke:

An unannounced visit was made to Card Home for The Aged, Inc on April 8, 2025, by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting an investigation.

Attached are the violations of the Regulations of Connecticut State Agencies and/or General Statutes of Connecticut which were 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 fourteen 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 13, 2025

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
Public Health

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410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
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The following is a violation of the Regulations of Connecticut State Agencies Section 19-13-D6 (c) Administration (1) and/or (c) Administration (4) and/or Connecticut General Statutes 19a-550 (b)(9).

1. Based on review of facility documentation, facility policy and interviews, for one (1) of three (3) sampled residents (Resident #1) reviewed for a potential staff to resident altercation, the facility failed to honor a resident's right to be treated with respect and dignity when a staff member conducted oneself unprofessionally and used inappropriate language when speaking with the resident. The findings include:

    a. Review of the facility incident report identified a verbal altercation occurred between Resident #1 and Night Manager #1 on 3/24/25. It was indicated Resident #1 approached Night Manager #1 in the morning on 3/24/25 when Resident #1 went to get coffee, started a verbal rant directed at Night Manager #1, and told Night Manager #1 that he/she was going to have her fired. It was indicated Night Manager #1 responded to Resident #1 unprofessionally and utilized inappropriate language. Interview with Resident #1 on 4/8/25 at 10:30 AM identified he/she approached Night Manager #1 the morning on 3/24/25 when he/she went to get coffee because he/she wanted to speak with Night Manager #1 about an issue from the previous night, which he/she was upset about. Resident #1 indicated Night Manager #1 spoke with him/her about the issue and used inappropriate language when speaking to him/her that morning. Resident #1 identified he/she felt Night Manager #1 acted inappropriately by using profanity. Interview and review of the facility incident report dated 3/24/25 with the Interim Administrator on 4/8/25 at 11:20 AM identified the investigation determined Night Manager #1 admitted to using inappropriate language when speaking to Resident #1 on 3/24/25. The Interim Administrator identified Night Manager #1 should not have used inappropriate language when speaking with Resident #1, the facility policy directed staff to conduct themselves professionally and not use inappropriate language, and Night Manager #1 was issued a verbal warning as a result of the incident. Although attempted, an interview with Night Manager #1 was not conducted. Review of the Standards of Conduct policy for employees directed, in part, the facility wishes to create a work environment that promotes respect, responsibility, and integrity, and inappropriate employee conduct including violation of the policies and procedures of the facility. Review of the facility Resident Rights policy directed residents had the right to be treated with respect and dignity.

May 9, 2025

Karen Gworek RN, BSN

410 Capitol Avenue

Hartford, Ct 06134

Approved 8/25/25 KEG

Dear Ms. Gworek

In responding to the visit made to the Card Home on April 8th 2025 and the violations found.

Violation One:

(1)Monthly In-services for all staff on resident's rights, and violations

(2) Begin April 9th

(3) Weekly random off hour visits.

(4) Interim Administrator

Violation Two:

(1) Board will meet to discuss giving residents keys or installing a key panel. In the meantime residents can go out freely anytime to smoke.
(2) Begin April 9th
(3) Weekly interviews with residents to discuss wait time to enter the building.
(4) Interim Administrator.

Thank you

Dawn Bakke

Interim Administrator