

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

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LICENSING INSPECTION REPORT

**Facility DBA and Address**

Brookdale South Windsor  
1715 Ellington Rd. South Windsor, CT 06074

M: dstevens10@brookdale.com

Licensure Category: ALSA

License Number: 100

Date(s) of onsite inspection: 06/07/2024

**Signature of FLIS Staff**

Megan Edson-Sawyer

Nurse Consultant

Survey Team Leader: Megan Edson-Sawyer

Supervisor: Elizabeth Heiney

Licensed Bed Capacity:  

Licensed Bassinet Capacity:  

Census:  

**Date(s) additional information obtained:** \_\_\_\_\_

**Personnel contacted:** Executive Director David Stevens and SALSA Stacey Babcock

**Email Address:** dstevens10@brookdale.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 # \_\_\_\_\_

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.

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: 06/07/2024

Approval for issuance of license granted by: Elizabeth Heiney DATE: 6/13/24

**STRIKE MONITORING SUPPLEMENT TO  
LICENSING INSPECTION REPORT**

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LICENSING INSPECTION NARRATIVE REPORT: