

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

Page 1 of 1

**ALSA LICENSING INSPECTION REPORT**

***d/b/a Name and Address of Entity***

Charter Senior Living of Woodbridge  
330 Amity Rd. Woodbridge, CT 06525  
ed@charterofwoodbridge.com

***Signature of FLIS Staff***

Karen Donato

Nurse Consultant

**Licensure Category: ALSA**

Census:  Capacity:

Memory Care/Traditional:

**Date(s) of onsite inspection: 12/17/24**

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

**Personnel contacted: ED: Philip Noto; SALSA: Melissa Phelan**

**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: **CT#42236**

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 12/17/24

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: 12/20/24**

Approval for issuance of license granted by: Karen Donato RNC DATE: 12/24/24  
Supervisor/Title

**LICENSING INSPECTION NARRATIVE REPORT:**

1624-1625