

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

Page 1 of ____

LICENSING INSPECTION REPORT

d/b/a Name and Address of Entity

Seacrest Retirement Center
588 Ocean Avenue
West Haven, CT 06516

Signature of FLIS Staff

Glenna Fried, LCSW

Licensure Category:

Residential Care Home 1794 Licensed Bed Capacity: 75 Census: 60

Date(s) of onsite inspection: 7/14/2025

Date(s) additional information obtained: _____

Personnel contacted: Christine Turcio, Person-in-Charge; Lewis Bower, Proprietor

Email Address: CTurcio@Seacrestweb.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 _____

See Complaint Investigation # 44779

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.

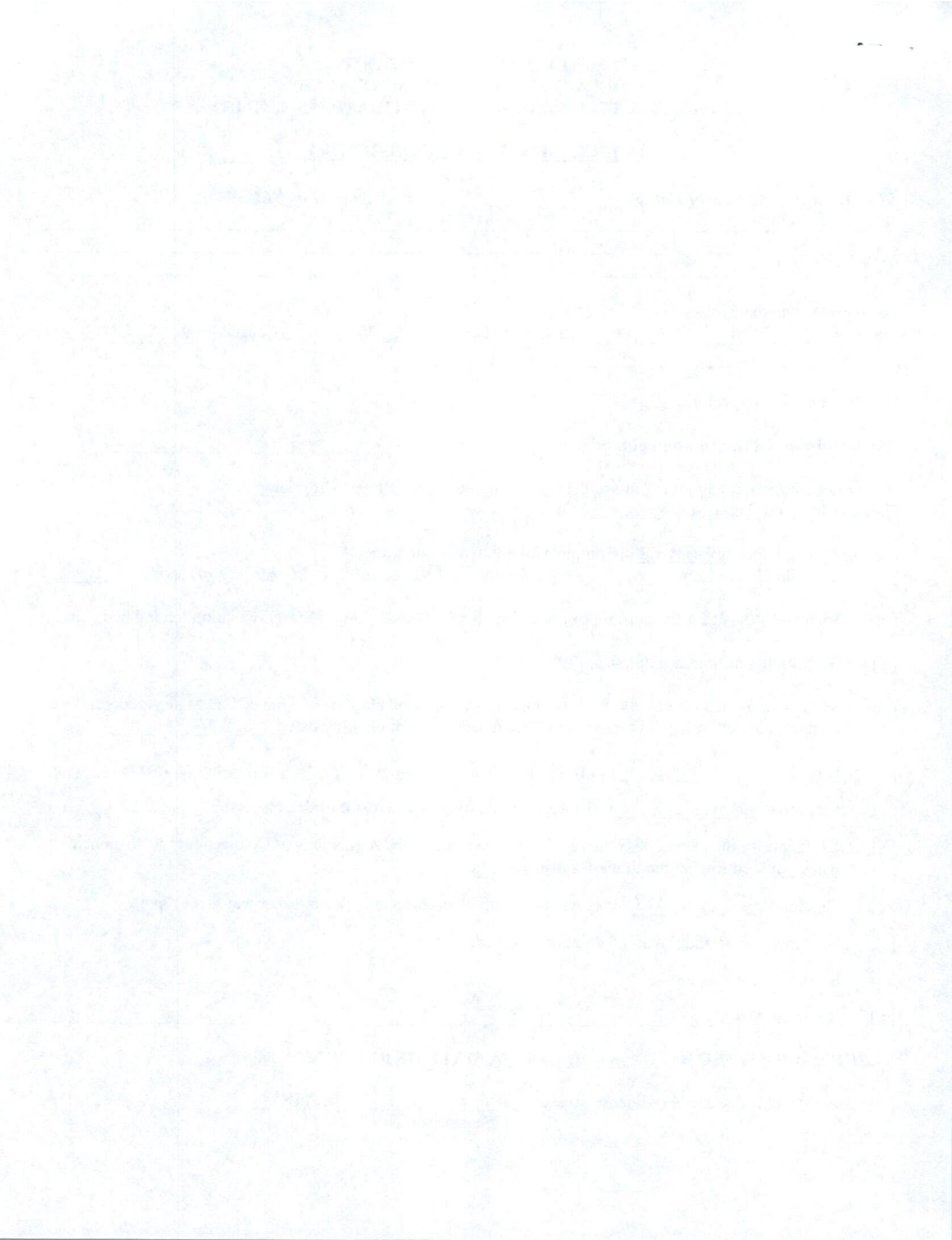
Narrative report/additional information attached.

See Certification File.

Referral(s) to _____

REPORT SUBMITTED BY: Glenna Fried, LCSW **DATE OF REPORT:** 7/15/25

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

July 18, 2025

Christine Turcio, Person-in-Charge
Seacrest Retirement Center
588 Ocean Avenue
West Haven, CT 06516
Email: CTurcio@Seacrestweb.com

Dear Ms. Turcio:

An unannounced visit was made to Seacrest Retirement Center on July 14, 2025 by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting a licensure inspection, an investigation.

There were no violations of the Regulations of Connecticut State Agencies and/or General Statutes of Connecticut noted during the course of the visit.

If there are any questions, please do not hesitate to contact this office at (860) 509-7400.

Respectfully,

Karen Gworek, RN

Karen Gworek, RN, BSN
Supervising Nurse Consultant
Facility Licensing & Investigations Section

Complaint #44779

cc: Mairead Painter, LTC Ombudsman Program



Phone: (860) 509-7400 • Fax: (860) 509-7543
Telecommunications Relay Service 7-1-1
410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
www.ct.gov/dph
Affirmative Action/Equal Opportunity Employer



