

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

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LICENSING INSPECTION REPORT

Facility DBA and Address

Bridges By Epoch (Norwalk)

123 Richards Ave Norwalk, Ct 06854

M: gcambre@bridgesbyepoch.com

Signature of FLIS Staff

Megan Edson-Sawyer

Nurse Consultant

Survey Team Leader: Megan Edson-Sawyer

Supervisor:

Elizabeth Heiney

Licensure Category: ALSA

License Number: 190

Licensed Bed Capacity: ____

Licensed Bassinet Capacity: ____

Census: ____

Date(s) of onsite inspection: 09/26/2024

Date(s) additional information obtained: _____

Personnel contacted: Executive Director Gina Cambre and SALSA Brittany Pettway

Email Address: gcambre@bridgesbyepoch.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 # 39625

☒ 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:** 09/26/2024

☐ Approval for issuance of license granted by: _____ DATE: _____

**STRIKE MONITORING SUPPLEMENT TO
LICENSING INSPECTION REPORT**

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LICENSING INSPECTION NARRATIVE REPORT:

**STRIKE MONITORING SUPPLEMENT TO
LICENSING INSPECTION REPORT**

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Bridges by Epoch CT#39625 EID 9.26.24

The following are violations of the Regulations of Connecticut State Agencies Section 19-13-D105 (e) General requirements for an assisted living services agency (1) and/or (g) Supervisor of assisted living services (2) (A) (B) and/or (h) Nursing Services provided by an assisted living service agency (3) (C).

Based on review of clinical records, agency documentation, interviews with agency personnel and agency policies for one of three clients (Client #1) in the survey sample with a change in condition, the Assisted Living Services Agency (ALSA) failed to follow the agency's Change in Status policy. The findings include:

- a. Client #1 was admitted to the ALSA on 02/14/2024 and resided in the secured memory care unit with diagnoses of dementia, benign prostatic hyperplasia (enlarged prostate), hypertension and coronary artery disease. The Client's 120-day assessment and service plan dated 06/11/2024, identified the Client received nursing services for assessments, medication administration and ALSA aide assistance with grooming/personnel hygiene, bathing, incontinence care, wheelchair transfers and mobility.

Review of Client #1's hospital summary dated 05/08/2024, identified the Client arrived at the emergency department on 05/08/2024 and was treated for urinary retention. The Client returned to the ALSA on 05/16/2024 and was admitted to hospice services.

- i. Interview with ALSA aide #1 on 09/26/2024 at 12:05 PM, identified on 05/08/2024 she was assisting Client #1 with eating, but the Client appeared to pocket food in his/her mouth, would not swallow, started coughing and presented with weakness. The ALSA staff called 911 and transferred the Client into a wheelchair. The Client was transported to the hospital by ambulance.
- ii. Interview and review of Client #1's nursing note dated 05/02/2024, 05/05/2024, 05/07/2024 and 05/08/2024 with the Executive Director and Supervisor of Assisted Living Services Agency (SALSA) on 09/26/2024 at 12:45 PM, failed to identify the Client's change in condition on 05/08/2024 was documented in the clinical record in accordance with the agency's policy.

Review of the agency's Change of Status policy, identified when there was a noticeable change in the mental, medical, or functional status of a client, the changes would be documented in the client's record and notification of the client's physician and responsible party would be documented.

The following are violations of the regulations of Connecticut State Agencies Section 19-13-D105 Assisted living services agency (e) General requirements for an assisted living services agency (1) and (g) Supervisor of assisted living services (2) (A) (B) and (i) Assisted living aide services (1)(3)(A).

Based on clinical record reviews and interviews with agency personnel for one of three clients (Client #1) who received assisted living services for assistance with personal care. The Assisted Living Services Agency (ALSA) aides failed to follow the service plan. The findings include:

- a. Client #1 was admitted to the ALSA on 02/14/2024 and resided in the secured memory care unit with diagnoses of dementia, benign prostatic hyperplasia (enlarged prostate), hypertension and coronary artery disease. The Client's 120-day assessment and service plan dated 06/11/2024, identified the Client received nursing services for assessments, medication administration and ALSA aide assistance with grooming/personnel hygiene, bathing, incontinence care, wheelchair transfers and mobility.

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- i. Interview with ALSA aide #1 on 09/26/2024 at 12:05 PM, identified on 05/08/2024 she was assisting Client #1 with eating, but the Client appeared to pocket food in his/her mouth, would not swallow, started coughing and presented with weakness. The ALSA staff called 911 and transferred the Client into a wheelchair. ALSA aide #1 identified she did not clean the Client's face, hands or provide incontinence care prior to the ambulance arriving.
- ii. Interview and review of the agency's investigation with the Executive Director and Supervisor of Assisted Living Services Agency (SALSA) on 09/26/2024 at 12:45 PM, identified Person #1 had voiced concern to the Executive Director allege when Client #1 arrived at the hospital on 05/08/2024 he/she appeared unclean and had not received incontinence care. Subsequent to the agency's investigation, the ALSA aides received in-service training regarding best practices for providing personal care to clients prior to transferring to the hospital.

