

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

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LICENSING INSPECTION REPORT

d/b/a Name and Address of Entity

Autumn Lake Healthcare at New Britain
400 Brittany Farms Rd. New Britain CT
06053

Signature of FLIS Staff

AGB/BSR

M:

Licensure Category:

CENH

Licensed-Bed/Bassinet Capacity: 282 Census: 244

Date(s) of onsite inspection: Desk Audit: 11/22/23

Date(s) additional information obtained: _____

Personnel contacted: Joshua Schechter, Administrator + Alexandra Chin, DNS on 11/22/23
at 10:21 AM.

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 11/22/23 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 _____

Full Time Infection Prevention and Control Specialist

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REPORT SUBMITTED BY: Allison Benson DATE OF REPORT: 11/22/23

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

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LICENSING INSPECTION NARRATIVE REPORT:

A desk audit was completed on 11/22/23 for the purpose of reviewing the implementation of the plan of correction for the violation letter dated 10/6/23.

Violation # 1a, 2a were corrected as of 11/6/23.

on 11/22/23 at 10:21 AM, the Administrator and DNS were notified via telephone that all violations were corrected.

