

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
HAVENLARK AT HANCOCK HALL
31 STAPLES STREET, DANBURY, CT
06810

Signature of FLIS Staff
Melissa Cepel
Don Thomas BEST

M: _____

Licensure Category: CCNH
#2481 Licensed Bed/Bassinet Capacity: 96 Census: 92

Date(s) of onsite inspection: 4/25/25, 4/28/25, 4/29/25, 4/30/25, 5/1/25

Date(s) additional information obtained: _____

Personnel contacted: Lavon Davis, Administrator

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 44158
- ☐ 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 _____
- ☐ CMP fund verification
- ☐ CRF grant verification
- ☐ Shift Coach
- ☐ Full Time Infection Prevention and Control Specialist

**STRIKE MONITORING SUPPLEMENT TO
LICENSING INSPECTION REPORT**

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REPORT SUBMITTED BY: W. Deschaine DATE OF REPORT: 5/5/25

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