

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

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LICENSING INSPECTION REPORT

Facility DBA and Address

Signature of FLIS Staff

ARDEN CARE CENTER

Barbara Greenhill

850 MIX AVE HAMDEN, CT 06514

Survey Team Leader: Karen Gworek

Supervisor: _____

M: _____

Licensure Category: CCNH

Licensed Bed Capacity: 271

Census: 192

License Number: 2491

Licensed Bassinet Capacity: _____

Date(s) of onsite inspection: _____

Date(s) additional information obtained: _____

Personnel contacted: JILL BENNETT DIRECTOR OF NURSING

Email Address: _____

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 12/24/24 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: Barbara Greenhill DATE OF REPORT: 12/24/2024

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

**STRIKE MONITORING SUPPLEMENT TO
LICENSING INSPECTION REPORT**

LICENSING INSPECTION NARRATIVE REPORT:

A DESK AUDIT WAS COMPLETED ON 12/24/24 FOR THE PURPOSE OF REVIEWING THE IMPLEMENTATION OF THE PLAN OF CORRECTION FOR THE VIOLATION LETTER DATED 11/22/2024. VIOLATIONS #1, & #2 WERE CORRECTED AS OF 12/2/2024. ON 12/24/24 AT 1:02 PM JILL BENNETT THE DIRECTOR OF NURSING WAS NOTIFIED BY TELEPHONE THAT ALL VIOLATIONS WERE CORRECTED.

**STRIKE MONITORING SUPPLEMENT TO
LICENSING INSPECTION REPORT**