

# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

Deidre S. Gifford, MD, MPH  
Acting Commissioner



Ned Lamont  
Governor  
Susan Bysiewicz  
Lt. Governor

### Healthcare Quality And Safety Branch

November 3, 2020

Ron Bucci, Senior Executive Director  
The Greens At Cannondale  
435 Danbury Road  
Wilton, CT 06897

[rbucci@thegreensatcannondale.com](mailto:rbucci@thegreensatcannondale.com)

Dear Mr. Bucci:

An unannounced visit were made to The Greens At Cannondale on April 9, 2018 by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting a licensing inspection.

Attached are the violations of the Regulations of Connecticut State Agencies and/or General Statutes of Connecticut which were noted during the course of the visits The state violations cannot be edited by the provider in any way.

In accordance with Connecticut General Statutes, section 19a-496, upon a finding of noncompliance with such statutes or regulations, the Department shall issue a written notice of noncompliance to the institution. Not later than ten days after such institution receives a notice of noncompliance, the institution shall submit a plan of correction to the Department in response to the items of noncompliance identified in such notice.

**The plan of correction is to be submitted to the Department by November 13, 2020.**

The plan of correction shall include:

- (1) The measures that the institution intends to implement or systemic changes that the institution intends to make to prevent a recurrence of each identified issue of noncompliance;
- (2) the date each such corrective measure or change by the institution is effective;
- (3) the institution's plan to monitor its quality assessment and performance improvement functions to ensure that the corrective measure or systemic change is sustained; and
- (4) the title of the institution's staff member that is responsible for ensuring the institution's compliance with its plan of correction.

The plan of correction shall be deemed to be the institution's representation of compliance with the identified state statutes or regulations identified in the department's notice of noncompliance. Any institution that fails to submit a plan of correction to [Loan.Nguyen@ct.gov](mailto:Loan.Nguyen@ct.gov) may be subject to disciplinary action. Please do not send another copy via US mail.



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  
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STATE OF CONNECTICUT  
DEPARTMENT OF HEALTH

Office of  
Public Health  
100 Capitol Mall  
Hartford, CT 06103

DATE

October 15, 2011  
11:30 AM

Public Health Department

100 Capitol Mall

The undersigned, being duly sworn, depose and say that the foregoing is a true and correct copy of the original as the same appears in the files of the Department of Health, State of Connecticut, and that the same is a true and correct copy of the original as the same appears in the files of the Department of Health, State of Connecticut.

Subscribed and sworn to before me this 15th day of October, 2011, at the City of Hartford, State of Connecticut.

I, the undersigned, being duly sworn, depose and say that the foregoing is a true and correct copy of the original as the same appears in the files of the Department of Health, State of Connecticut, and that the same is a true and correct copy of the original as the same appears in the files of the Department of Health, State of Connecticut.

Witness my hand and the seal of the Department of Health, State of Connecticut, this 15th day of October, 2011.

My commission expires on the 15th day of October, 2011.

Notary Public for the State of Connecticut

The undersigned, being duly sworn, depose and say that the foregoing is a true and correct copy of the original as the same appears in the files of the Department of Health, State of Connecticut, and that the same is a true and correct copy of the original as the same appears in the files of the Department of Health, State of Connecticut.



Notary Public for the State of Connecticut  
My commission expires on the 15th day of October, 2011.



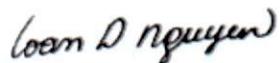
DATE(S) OF VISIT: April 9, 2018

THE FOLLOWING VIOLATION(S) OF THE REGULATIONS OF CONNECTICUT  
STATE AGENCIES AND/OR CONNECTICUT GENERAL STATUTES  
WERE IDENTIFIED

You may wish to dispute the violations and you may be provided with the opportunity to be heard. If the violations are not responded to by November 13, 2020 or if a request for a meeting is not made by the stipulated date, the violations shall be deemed admitted.

If there are any questions, please do not hesitate to contact this office at [Loan.Nguyen@ct.gov](mailto:Loan.Nguyen@ct.gov).

Respectfully,



Loan Nguyen MSN, RN, C  
Supervising Nurse Consultant  
Facility Licensing and Investigations Section

THE UNIVERSITY OF CHICAGO  
DEPARTMENT OF CHEMISTRY  
5700 SOUTH CAMPUS DRIVE  
CHICAGO, ILLINOIS 60637

TO: [Name] [Address] [City] [State] [Zip]

FROM: [Name] [Address] [City] [State] [Zip]

[Signature]

[Text]

DATE(S) OF VISIT: April 9, 2018

THE FOLLOWING VIOLATION(S) OF THE REGULATIONS OF CONNECTICUT  
STATE AGENCIES AND/OR CONNECTICUT GENERAL STATUTES  
WERE IDENTIFIED

The following is a violation of the regulations of Connecticut State Agencies Section 19-13-D105 (h) Nursing services provided by an assisted living services agency (3) (D) and/or (k) Client service record (2) (K).

1. Based on review of the clinical record and interview with facility personnel, for one of two clients (Client # 1) who received services from a home health agency, the assisted living services agency (ALSA) staff failed to develop a written agreement between the ALSA and the home care agency to delineate responsibilities and ensure the continuity of care. The findings include:
  - a. Client #1 was admitted to the ALSA program on 12/29/2006 with diagnoses that included multiple sclerosis, hyperlipidemia, osteoporosis and spinal stenosis.

The physician's orders dated 1/31/18 included evaluations for physical therapy (PT) and occupational therapy (OT) following complaints of hip tightness.

Subsequent orders dated 2/4/18 included PT services two to three times a week for strengthening and balance, and OT services two to three times a week to improve upper extremity strength.

Interview and review of the clinical record with the RN designee on 4/9/18 at 3:00 PM failed to identify the development of a written agreement between the ALSA and the home care agency to delineate responsibilities and ensure the continuity of care.

The following is a violation of the regulations of Connecticut State Agencies Section 19-13-D105 (e) General requirements for an assisted living service agency (1) and/or the General statutes of Connecticut Chapter 368v Section 19a-562.

2. Based on clinical record review and interview with facility personnel, for two of two clients (Clients # 1 and 2) who resided in a special care unit, the assisted living facility failed to ensure the ALSA special unit disclosure was signed by the clients' responsible party. The findings include:
  - a. Client #1 was admitted to the special care unit on 12/29/2006 with diagnoses that included dementia, multiple sclerosis, hyperlipidemia, osteoporosis and spinal stenosis.
  - b. Client #2 was admitted to the special care unit on 12/25/2015 with diagnoses that included diabetes mellitus, hyperlipidemia, hypertension and vascular dementia.

Interview and review of the clinical record with the RN designee on 4/9/18 at 3:30 PM failed to identify signature of the responsible party on the disclosure forms of the dementia unit, to support review of the disclosure data by the responsible party.

Interview and review of the clinical record with the RN designee on 4/9/18 at 3:30 PM failed to identify signature of the responsible party on the disclosure forms of the dementia unit, to support review of the disclosure data by the responsible party.



DATE(S) OF VISIT: April 9, 2018

THE FOLLOWING VIOLATION(S) OF THE REGULATIONS OF CONNECTICUT  
STATE AGENCIES AND/OR CONNECTICUT GENERAL STATUTES  
WERE IDENTIFIED

THE FOLLOWING INFORMATION IS FOR YOUR INFORMATION ONLY. IT IS NOT TO BE USED AS A BASIS FOR ANY ACTION.

THE INFORMATION CONTAINED HEREIN IS UNCLASSIFIED EXCEPT WHERE SHOWN OTHERWISE.

DATE OF REVIEW: 10/15/2010 BY: [Redacted]

REASON FOR REVIEW: [Redacted]

CLASSIFICATION: UNCLASSIFIED

EXEMPTION CODE: [Redacted]

DATE OF DECLASSIFICATION: [Redacted]

APPROVED BY: [Redacted]

REVIEWED BY: [Redacted]

DATE OF REVIEW: 10/15/2010

Accepted 11/30/2020  
Michelle DelValle  
Robin Bazzini  
10:27 AM



Loan Nguyen, M.S.N., R.N., C.  
Supervising Nurse Consultant  
Facility Licensing and Investigations Section  
410 Capitol Avenue  
PO Box 340308  
Hartford, CT 06134-0308  
November 12, 2020

Dear Ms. Nguyen,

In response to your letter dated November 3, 2020, please note the enclosed Plan of Correction for The Greens at Cannondale.

The filing of this Plan of Correction does not constitute an admission that the deficiencies alleged did in fact exist. The plan is filed as evidence of the facility's desire to continue to provide high quality care. This Plan of Correction constitutes the facility's credible allegation of substantial compliance.

We continue to enjoy our partnership with the Department in the spirit of providing high quality, safe and dignified care for our seniors.

Please do not hesitate to contact me should you have any questions or concerns.

Sincerely,

Michelle DelValle, RN  
Director of Wellness and  
Supervisor of Assisted Living Services Agency  
The Greens at Cannondale

Attachment: Memo of Understanding policy

7-11000-7  
D. DE CARVALHO

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The Greens at Cannondale  
Plan of Correction – Connecticut State Agencies / or General Statutes of CT  
**Survey completed April 9, 2018**

November 12, 2020

1) Alleged violation # 1 - Section 19-13-D105 (h):

*The filing of this Plan of Correction does not constitute an admission in any forum by The Greens at Cannondale, or its officers, directors, employees or contractors, as to the Department's findings or as to the specific violations alleged. The Greens at Cannondale files these Plans of Correction in the spirit of maintaining optimal resident care.*

- 1) All licensed nursing staff will be re-inserviced on the facility policy for ensuring a written agreement between ALSA and home care agency staff to ensure delineation of responsibilities and ensure continuity of care. .
- 2) This corrective measure will be effectuated by December 3, 2020
- 3) Random medication audits will be conducted no less than quarterly to ensure that this corrective measure is sustained.
- 4) The Nurse Designee will be responsible for monitoring this individual Plan of Correction.



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The Greens at Cannondale  
Plan of Correction – Connecticut State Agencies / or General Statutes of CT  
**Survey completed April 9, 2018**

Alleged violation #2 - Section 19-13-D105 (e) general requirements for an assisted living agency(1) and/or General statutes of Connecticut Chapter 368v Section 191-562

*The filing of this Plan of Correction does not constitute an admission in any forum by The Greens at Cannondale, or its officers, directors, employees or contractors, as to the Department's findings or as to the specific violations alleged. The Greens at Cannondale files these Plans of Correction in the spirit of maintaining optimal resident care.*

- 1) All ALSA special care unit disclosures will be signed by all responsible parties. This information is found in our Evergreen (memory care unit) residency agreements.
- 2) This corrective measure will be effectuated by December 3<sup>rd</sup>, 2020.
- 3) Random clinical records will be audited no less than quarterly to ensure that that this corrective measure is sustained.
- 4) The SALSA will be responsible for monitoring this individual Plan of Correction.

Submitted,

Michelle DeValle, RN  
Director of Wellness and  
Supervisor of Assisted Living Services Agency  
The Greens at Cannondale

