

EXHIBIT 1

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

IN RE: Brookside Residential Care Home, LLC of Wethersfield
d/b/a Brookside Residential Care Home, LLC
131 Franklin Street Ext.
Danbury, CT 06810

CONSENT ORDER

WHEREAS, Brookside Residential Care Home, LLC of Wethersfield CT d/b/a Brookside Residential Care Home, LLC ("Licensee"), has been issued License No. 1896 to operate a Residential Care Home known as Brookside Residential Care Home, LLC at 134 Franklin St. Ext., Danbury, Connecticut ("Facility") under Connecticut General Statutes section 19a-490 by the Connecticut Department of Public Health ("Department"); and,

WHEREAS, the Facility Licensing and Investigations Section ("FLIS") of the Department conducted unannounced inspections on various dates commencing on June 18, 2019 and on October 10, 2019; and,

WHEREAS, the Department, during the course of the aforementioned inspections identified violations of the Connecticut General Statutes and/or Regulations of Connecticut State Agencies in an Emergency Order dated June 21, 2019 (Exhibit A) and Statement of Charges dated November 8, 2019. (Exhibit B) – copies attached); and,

WHEREAS, an office conference regarding the Emergency Order dated June 21, 2019 and the Statement of Charges dated November 8, 2019 was held between the Department and the Licensee on November 19, 2019; and,

WHEREAS, the Licensee is willing to enter into this Consent Order and agrees to the conditions set forth herein.

WHEREAS, based on documentation the Facility submitted to the Department on November 19, 2019 and an onsite visit conducted by FLIS staff on November 25, 2019, the Department verified that the Facility has complied with the Emergency Order dated June 21, 2019.

NOW THEREFORE, the Facility Licensing and Investigations Section ("FLIS") of the Department acting herein and through Donna Ortelle, its Section Chief, and the Licensee, acting herein and through Armand Ntchana, its Manager, hereby stipulate and agree as follows:

1. The Licensee shall monitor the continued implementation of the Licensee's corrective action taken in response the Emergency Order dated June 21, 2019. The Licensee shall provide reports to the Department on August 31, 2020 and on January 29, 2021 which confirm its continued compliance with its corrective action taken in response to the Statement of Charges and Emergency Order and which address the items in paragraph 3 below.
2. Any records maintained in accordance with any state law or regulation or as required by this Consent Order shall be made available to the Department, upon request.
3. Effective upon the execution of this Consent Order, the Licensee, through its Person-in-Charge, shall ensure substantial compliance with the following:
 - a. Sufficient personnel are available to meet the needs of the residents;
 - b. Job descriptions are reviewed and revised as appropriate and reviewed with each staff member to ensure that staff is providing the necessary care and services to the residents and in accordance with facility policies and procedures;
 - c. Emergency response procedures, to include, but not be limited to, fire safety;
 - d. Compliance with the Public Health Code, State of Connecticut Building Code and Connecticut Supplement, State of Connecticut Fire Safety Code and Connecticut Supplement, and National Fire Protection Association Standards;
 - e. A safe, sanitary, and comfortable environment; and
 - f. The management, personnel, equipment, facilities, sanitation and maintenance of the Facility shall be such as reasonably to ensure the health, comfort, and safety of the residents at all times;

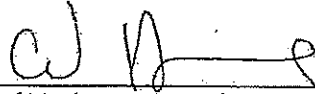
4. The Licensee, within seven (7) days of the execution of this Consent Order, shall designate an individual within the Facility to monitor the requirements of this Consent Order. The name of the designated individual shall be provided to the Department within said timeframe.
5. At the time of signing this Consent Order, the Licensee shall pay a monetary penalty to the Department in the amount of one thousand dollars (\$1,000.00), by money order or bank check payable to the Treasurer of the State of Connecticut. The monetary penalty and any reports required by this Consent Order shall be directed to:

Karen Gworek, SNC
Supervising Nurse Consultant
Facility Licensing and Investigations Section
Department of Public Health
410 Capitol Avenue, P.O. Box 340308 MS #12HSR
Hartford, CT 06134-0308

6. All parties agree that this Consent Order is an Order of the Department with all of the rights and obligations pertaining thereto and attendant thereon. Nothing herein shall be construed as limiting the Department's available legal remedies against the Licensee for violations of the Consent Order or of any other statutory or regulatory requirements, which may be sought in lieu of or in addition to the methods of relief listed above, including all options for the issuance of citations, the imposition of civil penalties calculated and assessed in accordance with Section 19a-524 et seq. of the General Statutes, or any other administrative and judicial relief provided by law. This Consent Order may be admitted by the Department as evidence in any proceeding between the Department and the Licensee in which compliance with its terms is at issue. The Licensee retains all of its rights under applicable law. The allegations and findings contained in Exhibits A and B shall be deemed true in any subsequent proceeding in which the Licensee's compliance with this Consent Order is at issue or the Licensee's compliance with Connecticut statutes and regulations related to residential care homes is at issue.
7. The Licensee agrees that this Consent Order shall be reported consistent with and state law and regulations and consistent with Department policy. In addition, the Licensee agrees that this Consent Order shall be posted on the Department's website.

8. The Licensee agrees that this Consent Order does not limit any other agency or entity in any manner including but not limited to any actions taken in response to the factual basis of this Consent Order.
9. The execution of this Consent Order has no bearing on any criminal liability without the written consent of the Director of the MFCU or the Bureau Chief of the Department of Criminal Justice's Statewide Prosecution Bureau.
10. The terms of this Consent Order shall remain in effect for a period of one (1) years from the effective date of this Consent Order unless otherwise specified in this Consent Order.
11. The Licensee agrees that this Consent Order and the terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum including any right to review under the Uniform Administrative Procedure Act, Chapter 368a of the Statutes, Regulations that exists at the time the agreement is executed or may become available in the future, provided that this stipulation shall not deprive the Licensee of any other rights that it may have under the laws of the State of Connecticut or of the United States.
12. Should the Licensee not be able to maintain substantial compliance with the requirements of the Consent Order, the Department retains the right to pursue charges including but not limited to the Statement of Charges issued on November 8, 2019 (Exhibit B).
13. The Licensee had the opportunity to consult with an attorney prior to the execution of this Consent Order.
14. This Consent Order is effective immediately upon the signature of the parties and the granting of a Motion to Withdraw the Statement of Charges by the Hearing Officer.

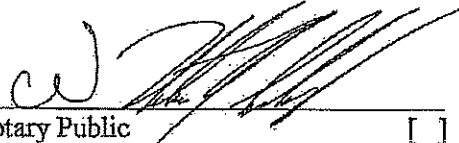
WITNESS WHEREOF, the parties hereto have caused this Consent Order to be executed by their respective officers and officials, which Consent Order is to be effective as of the later of the two dates noted below.



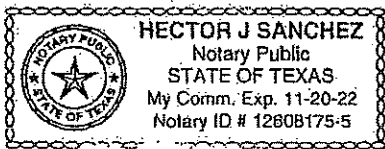
Armand Ntchana, Managing Partner
Brookside Residential Care Home, LLC,

On this 19th day of February, 2020, before me, personally appeared Armand Ntchana, who acknowledged himself to be the Managing Partner of Brookside Residential Care Home, LLC, and that he, as such Managing Partner being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the Licensee by himself as Managing Partner.

My Commission Expires: 11-20-22
(If Notary Public)



Notary Public []
Commissioner of the Superior Court []



STATE OF CONNECTICUT,
DEPARTMENT OF PUBLIC HEALTH

By: Donna Ortelle, R.N., M.S.N.
Donna Ortelle, R.N., M.S.N., Section Chief
Facility Licensing and Investigations Section

February 20, 2020

EXHIBIT A

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Renée D. Coleman-Mitchell, MPH
Commissioner-Designate



Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

HEALTH CARE QUALITY AND SAFETY BRANCH
EMERGENCY ORDER PURSUANT TO CONN. GEN. STAT. § 19a-534a

Issued To: Brookside Residential Care Home, LLC of Wethersfield, CT
d/b/a Brookside Residential Care Home, LLC
License No. 1896
134 Franklin Street Ext
Danbury, CT 06810

Whereas, pursuant to Conn. Gen. Stat. § 19a-493, Brookside Residential Care Home, LLC of Wethersfield, CT ("Licensee") has been issued license No. 1896 by the Connecticut Department of Public Health ("Department") to operate a 20 bed Residential Care Home known as Brookside Residential Care Home ("Facility"); and,

Whereas, Conn. Gen. Stat. § 19a-534a authorizes the Commissioner of Public Health ("Commissioner") to issue a Summary Order if the Commissioner finds that the health, safety, or welfare of any patient or patients in any residential care home imperatively requires emergency action and incorporate findings to that effect into the order; and,

Whereas, in response to a complaint received by the Department, an investigation was initiated at the Facility concerning physical plant issues and life safety code issues. Visits were conducted by the Department commencing on June 18, 2019 up to and including June 20, 2019; and,

Whereas, pursuant to Chapter 368v of the Connecticut General Statutes, residential care home facilities are required to comply with all pertinent regulations promulgated by the Department; and,



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Telecommunications Relay Service 7-1-1
410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
www.ct.gov/dph



Affirmative Action/Equal Opportunity Employer

Whereas, during the course of the aforementioned inspections at the Facility violations of the Regulations of Connecticut State Agencies ("Public Health Code") occurred as follows:

- a. The Facility failed to annually update their emergency operation plan.
- b. Bathroom #1 was missing required vanity doors.
- c. Bathroom #1 had a nonfunctional required overhead light.
- d. Bathroom #1 was unsafe in that it had a pool of water on the floor leaking from the base of the toilet.
- e. Bathroom #2 had missing ceiling tiles that are required.
- f. Bathroom #3 had a bathtub/shower with no running water.
- g. The corridor across from Bathroom #3 was unsafe as it had missing floor tiles along the wall.
- h. The TV – Lounge area was not safe in that a 4x6 foot section of floor tiles were missing.
- i. The dining room was not safe in that it had cracked and broken corner molding on the wall outside of the kitchen which caused a hazard (sharp edges).
- j. The kitchen was not safe in that it had chipped, broken and missing floor tiles in it.
- k. The Facility was not safe in that there were broken tiles creating throughout it which created an uneven surface and a hazard to residents.
- l. The Facility was not safe in that a second floor window opening of approximately 10 feet by 5 feet was removed and left unsecured.
- m. The Facility was not safe in that the door at the North East Hallway did not fully open or close and latch as required.
- n. The Facility was not safe in that the second floor room above the stairs had an excessive amount of combustible storage.
- o. The Facility was not safe in that the second floor exterior deck had an excessive amount of combustible storage.
- p. The Facility was not safe in that the required rated door at the base of the interior second floor to access stairs was removed.
- q. The Facility was not safe in that resident room corridor doors having gaps around the door frame, negating the doors ability to prevent the passage of smoke as required.
- r. The Facility was not safe in that resident room corridor doors failed to self-close and positively latch.
- s. The Facility was not safe in that the fire detection on the second floor was inadequate for the size of the space.
- t. The Facility lacked sufficient lighting for egress in the corridor as required.

- u. The Facility was not safe in that power strips and extension cords in use throughout the facility.
- v. Bell alerts mounted over resident room doors were installed improperly.
- w. The stairs leading from the dining room to the south wing were converted to a ramp and the door opening was undersized and missing a door for separation.
- x. In 2018 and/or 2019, the Facility failed to obtain permits from the local authorities for renovation and construction projects as required.
- y. In 2018 and/or 2019, the Facility failed to obtain permits from the State of Connecticut Department of Public Health for construction projects as required.
- z. The Facility failed to obtain licensure of the dietary kitchen from the local health department.

The Commissioner finds that violations of sections of the Regulations of Connecticut State Agencies, as listed below, have occurred and are occurring at the Facility:

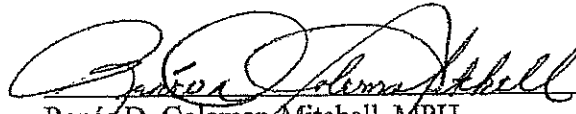
- Section 19-13-D6(b)A(1)(d)
- 19-13-D6(b)A(2)(a) and/or (b)
- 19-13-D6(b)B(6)
- 19-13-D6(b)H(2) and/or (3) and/or (8)
- 19-13-D6(b) L(18) and/or (19)
- 19-13-D6(b)N(1)
- 19-13-D6(b) S
- 19-13-D6(c)(1) and/or (5)
- 19-13-D6(f)(1) and/or (4)
- 19-13-D6(h)(6) and/or (8) and/or (9) and/or (12) and/or;
- 19-13-D6(i)(1).

Whereas, based on the foregoing, the Commissioner finds that the health, safety, and welfare of patients in the Facility imperatively requires emergency action.

Therefore, pursuant to the authority provided by the Connecticut General Statutes § 19a-534a, the Commissioner **ORDERS** that the Licensee take the following actions:

1. By the end of business on **June 27, 2019**, contract with an independent licensed contractor to conduct fire alarm testing, remediation, and to repair/replace/correct items identified in paragraphs a-z, above, inclusive, of this Summary Order. The licensed contractor(s) must be pre-approved by the Department prior to the commencement of any work. All work must begin by the end of business on **July 1, 2019** unless otherwise approved in writing by the Department.
2. By the end of business on **July 3, 2019** provide to the Department a detailed and comprehensive Plan of Correction ("POC") with timelines to remediate all the issued identified in paragraphs a-z, inclusive, of this Summary Order. The POC and the timelines contained in it must be approved in writing by the Department, and all work must be completed in accordance with the dates of completion approved by the Department. Failure to comply with this Order will be cause for additional actions pursuant to Connecticut General Statutes § 19a-534a which actions could include summary revocation or suspension of the Facility's license.

Dated at Hartford, Connecticut this 21th day of June, 2019.

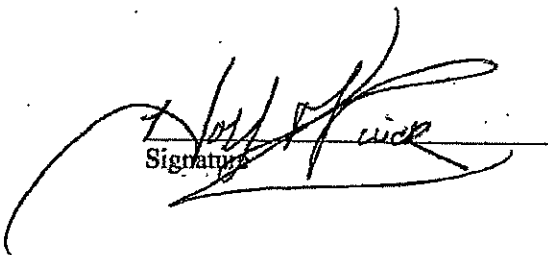


Renée D. Coleman-Mitchell, MPH
Commissioner
Connecticut Department of Public Health

HEALTH CARE QUALITY AND SAFETY BRANCH
EMERGENCY ORDER PURSUANT TO CONN. GEN. STAT. § 19a-534a

Issued To: Brookside Residential Care Home, LLC of Wethersfield, CT
d/b/a Brookside Residential Care Home, LLC
License No. 1896
134 Franklin Street Ext
Danbury, CT 06810

Received by: *Holly M. Zwick, MPA, Accounting + HR Manager* June 21, 2019
Printed Name and Title
Brookside Residential Care Home, LLC


Signature

June 21, 2019

EXHIBIT B

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

To: Brookside Residential Care Home, LLC of Wethersfield, CT
d/b/a Brookside Residential Care Home, LLC
License No. 1896
134 Franklin Street Ext.
Danbury, CT 06810

STATEMENT OF CHARGES

Pursuant to the provisions of Connecticut General Statutes § 19a-494, the Connecticut Department of Public Health, Facility Licensing and Investigations Section, ("Department") brings the following charges against Brookside Residential Care Home, LLC of Wethersfield ("Respondent").

COUNT ONE

1. Respondent is and has been at all times referenced in this Statement of Charges the holder of Connecticut Residential Care home License No. 1896.
2. On and prior to June 18, 2019, Respondent failed to ensure that the fire detection on the second floor was safe in that it was inadequate for the size of the space.
3. The above referenced conduct violates Section 19-13-D6(b)A(2)(a) and/or (b);(c)(1) and/or (5) of the Connecticut Public Health Code ("PHC").

COUNT TWO

4. Paragraph 1 of Count one is hereby incorporated by reference as if set forth fully herein.
5. On and prior to June 18, 2019, Respondent left a second floor window opening of approximately 10 feet by 5 feet.
6. The above referenced conduct violates Section 19-13-D6(b)L and/or (c)(1) and/or (5) of the Connecticut Public Health Code ("PHC").

COUNT THREE

7. Paragraph 1 of Count one is hereby incorporated by reference as if set forth fully herein.
8. On and prior to June 18, 2019, Respondent had an excessive amount of combustible storage on the second floor room above the stairs and on the second floor exterior deck.
9. The above referenced conduct violates Section 19-13-D6(c)(1) and/or (5); (h)(9) of the Connecticut Public Health Code ("PHC").

COUNT FOUR

10. Paragraph 1 of Count one is hereby incorporated by reference as if set forth fully herein.
11. On and prior to June 18, 2019, Respondent failed to:
 - a. Failed to ensure that the door at the North East Hallway was able to be fully opened or closed and latched as required,
 - b. Failed to ensure that the required rated door was at the base of the interior second floor to access stairs in that it was removed,
 - c. Failed to ensure that there were no gaps around the door frame in the resident corridor, negating the doors ability to prevent the passage of smoke as required, and/or,
 - d. Failed to ensure that resident room corridor doors failed to self-close and positively latch and/or the stairs leading from the dining room to the south wing were converted to a ramp and the door opening was undersized and missing a door for separation.
12. The above referenced conduct violates Section 19-13-D6(b)A(2)(b); (b)B(6) and/or (h)(9) of the Connecticut Public Health Code ("PHC").

COUNT FIVE

13. Paragraph 1 of Count one is hereby incorporated by reference as if set forth fully herein.

14. On and prior to June 18, 2019, Respondent lacked sufficient lighting for egress in the corridor as required.
15. The above referenced conduct violates Section 19-13-D6(c)(1) and/or (5) and/or (i)(1) of the Connecticut Public Health Code ("PHC").

COUNT SIX

16. Paragraph 1 of Count one is hereby incorporated by reference as if set forth fully herein.
17. On and prior to June 18, 2019, Respondent had power strips and extension cords in use throughout the facility.
18. The above referenced conduct violates Section 19-13-D6(b)N(1); (c)(1) and/or (5); and/or (h)(9) of the Connecticut Public Health Code ("PHC").

COUNT SEVEN

19. Paragraph 1 of Count one is hereby incorporated by reference as if set forth fully herein.
20. On and prior to June 18, 2019, Respondent failed to ensure call bell alerts mounted over resident room doors were installed properly.
21. The above referenced conduct violates Section 19-13-D6(b)N(5) of the Connecticut Public Health Code ("PHC").

COUNT EIGHT

22. Paragraph 1 of Count one is hereby incorporated by reference as if set forth fully herein.
23. On and prior to June 18, 2019, Respondent failed to ensure that the emergency operation plan was updated annually.
24. The above referenced conduct violates Section 19-13-D6(b)A;(c)(1) and/or (5) of the Connecticut Public Health Code ("PHC").

COUNT NINE

25. Paragraph 1 of Count one is hereby incorporated by reference as if set forth fully herein.
26. On and prior to June 18, 2019, Respondent:
 - a. failed to obtain permits from the local authorities for renovation and construction projects as required in 2018 and/or 2019,

- b. failed to obtain permits from the Connecticut Department of Public Health for construction projects as required in 2018 and/or 2019; and/or,
 - c. failed to obtain licensure of the dietary kitchen from the local health department.
27. The above referenced conduct violates Section 19-13-D6(b)A(1)(d);(b)H(3); (c)(1);(f)(4) and/or (h)(12) of the Connecticut Public Health Code ("PHC").

COUNT TEN

28. Paragraph 1 of Count one is hereby incorporated by reference as if set forth fully herein.
29. On and prior to June 18, 2019, Respondent:
- a. failed to ensure a safe environment when Bathroom #1 was missing required vanity doors; Bathroom #1 had a nonfunctional required overhead light; Bathroom #1 was unsafe in that it had a pool of water on the floor leaking from the base of the toilet;
 - b. failed to ensure a safe environment when Bathroom #2 had missing ceiling tiles that are required;
 - c. failed to ensure a safe environment when Bathroom #3 had a bathtub/shower with no running water; the corridor across from Bathroom #3 had missing floor tiles along the wall;
 - d. failed to ensure a safe environment when the TV Lounge area had a 4x6 foot section of floor tiles that were missing; the dining room had cracked and broken corner molding on the wall outside of the kitchen which caused a hazard (sharp edges); and/or,
 - e. failed to ensure a safe environment when the kitchen had chipped, broken and missing floor tiles; and there were broken tiles creating throughout it which created an uneven surface and a hazard to residents.
 - f. The above referenced conduct violates Section 19-13-D6(b)H(2); (b)L(18) and/or (19);(b)S;(c)(1) and/or (5);(f)(1);(h)(2) and/or(6) of the Connecticut Public Health Code ("PHC").

COUNT ELEVEN

30. Paragraph 1 of Count one is hereby incorporated by reference as if set forth fully herein.

31. Respondent failed to comply with one or more requirements of the Emergency Order dated June 21, 2019.
32. The failure to comply with the Emergency Order is grounds for disciplinary action pursuant to one or more of the following sections of the Regulations of Connecticut State Agencies:
 - 19-13-D6(b)A(1)(d)
 - 19-13-D6(b)A(2)(a) and/or (b)
 - 19-13-D6(b)B(6)
 - 19-13-D6(b)H(2) and/or (3) and/or (8)
 - 19-13-D6(b) L(18) and/or (19)
 - 19-13-D6(b)N(1)
 - 19-13-D6(b) S
 - 19-13-D6(c)(1) and/or (5)
 - 19-13-D6(f)(1) and/or (4)
 - 19-13-D6(h)(6) and/or (8) and/or (9) and/or (12) and/or;
 - 19-13-D6(i)(1).

Therefore, the Department of Public Health prays that: the Commissioner of the Department, as authorized in 19a-494 of the Connecticut General Statutes revoke or take any other actions as authorized in said section against the Residential Care Home license of Brookside Residential Care Home, LLC of Wethersfield, CT as she deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 8th day of November, 2019.

By: Donna Ortelle, R.N. Section Chief
Donna Ortelle, R.N., Section Chief
Department of Public Health
Facility Licensing and Investigations Section

