☐ Initial ☐ Unannounced Full/Partial ☒ Follow-up ☐ Location Change ☐ Investigation ☒ Other

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Northwood Child Care Ctr. Date: 9/21/21 Time: 9:20

Location Address: 1129 Rt. 169, Woodstock Telephone #: 860-928-7012

e-mail address: jbaker@northwoodchildcare.com License #: 15882 Expiration Date: 2/28/25

Capacity: 128 # of Children Present: 42 # of Staff Present: 10+2

Consent to Inspect Family Child Care Home	*I agree to allow the Office of Early Childhood to have access to and inspect this facility and all child care records as required by Family Child Care Home Regulations.* ***Provider/Applicant/Substitute's Signature***

Purpose of visit: Follow up to 7/1/21 inspection.

Observations/Corrections needed:

Follow up to 7/1/21 inspection to check CAP items. Not all items compliant:

26- 2 consultant agreements expired.

37- Not all children's health records contain all requirements.

45- Building materials stored on deck.

60- Bottle warmer cords accessible.

69- Ceilings in some rooms need ~~perm~~ repair.

76- Hazardous substances unlocked in kitchen.

99- Nonprescription parent authorizations incomplete.

102- Some authorizations expired, incomplete or not available for medication on site.

S = Substantiated **NS = Not Substantiated** **P = Pending (if applicable)**

Operators/providers are required by regulations and statutes to be in compliance at all times.

Signature: Linda Moylan
(OEC Representative)
Print Name: Linda Moylan

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 10/4/21

Signature: J W Baker
(Person in Charge)
Print Name: JON W BAKER

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Northwood Child Care Center License # 15882 Date: 9/21/21

Observations/Corrections needed:

103- Medication not on site per care plan. One epipen without Rx label.

104- Unused medication and expired epipens on site.

LM
1 ~~100- One epipen without Rx label.~~ LM

LM ~~113- Beverage observed on changing table~~.

116- Safety strap not attached for child in table chair. No straps ~~attach~~ LM on chairs.

140- 3 bottles not labeled.

129- Observed child asleep in swing.

113- Handwash sink used to draw water for bottles.

Discussed- Diaper changing table exclusive use.

S = Substantiated **NS = Not Substantiated** **P = Pending (if applicable)**

Operators/providers are required by regulations and statutes to be in compliance at all times.

Signature: Linda Maylan
(OEC Representative)

Print Name: Linda Maylan

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 10/4/21

Signature: [signature]
(Person in Charge)

Print Name: JON W BAKER