

Initial  Unannounced Full/Partial  Follow-up  Location Change  Investigation  Other Co monitor 1 month

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: My Little Rascals Too Date: 4/26/22 Time: 9:55am

Location Address: 1850 West Street Southington, CT Telephone #: 860 426-9933

e-mail address: mylittlerascals32@yahoo.com License #: 70341 Expiration Date: 12/31/2024

Capacity: 110 # of Children Present: 80 # of Staff Present: 19

<b>Consent to Inspect Family Child Care Home</b>	<i>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.</i> Provider/Applicant/Substitute's Signature: <u>N/A</u>
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Purpose of visit: Consent order monitoring - 1 month

Observations/Corrections needed: Consent order Monitoring - CO effective 3/23/2022

7a - Condition met

7b - Condition met

7c - Condition met

7d - Condition met

7e - Condition met

8a - Condition met

8b - Condition met

8c - ~~Did not observe a written~~ so Condition met

③ 8dfe Did not observe documentation of required implementations from 3/29/2022 Education consultant visit.

9a - Condition met

9a - condition met - Education consultant documented on summary

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: Stephanie Pica  
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 5/10/22

Signature: [Signature]  
(Person in Charge)

x Chris Russo

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: My Little Rascals Too License # 70341 Date: 4/26/2020

Observations/Corrections needed:

10a - Operator reported that they do not wish to seek another child care center or group child care home. Understand condition - Met.

11a/b - Discussed condition with operator. - Met

12a/b Observed documentation in 3 staff files, persons hired after 3/23/2020 - Met

13a/b - Partially met - Observed video monitoring checklists for weekly video review. Did not observe documentation of time period/date the observations occurred and the name of the person who completed the observation.

14a/b - Did not observe appropriate documentation verifying the days and hours the Director is on site, detailing the weekly administrative tasks completed by Director.

15a/b Partially met - Observed time card for Chris, detailing times at the program. Discussed adding specific times in and out, if leaving the site at any point of the day. Did not observe that he was present for all of the operating hours of operation operating hours on a monthly basis. Did not observe that he was present on any day at opening or closing

16a/b - Met (SP)

16b - Did not observe written policies pertaining to

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Signature: [Signature] (OEC Representative) Print Name: Stephanie Pica

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: [Signature] (Person in Charge) Print Name: Chris Russo

OEC BY: 5/10/2020

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: My Little Rascals Too License # 70341 Date: 4/26/2022

Observations/Corrections needed:

physical plant and record keeping, including records related to staffing.

16d - Did not observe documentation of implementation of such policies and procedures.

17a - Due 9/23/2022, Discussed that the course must be completed by 9/23/2022.

18a - Condition met. Originally contracted with a health consultant, but discontinued contract. New contract established 4/21/2022, observed health consultant observation documentation.

19 - Observed consultant agreements, and comment/feedback summaries from consultants - Met.

20 - discussed

21 - Partially met. Per phone conversation with current and previous health consultant, partial section of consent order was provided, they did not receive receive fully executed consent order with attachments. Education consultant and Director received full copies

22a - First payment of civil penalty - check returned for insufficient funds.

22b - Due 5/31/22

22c Due - 7/29/22

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CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: [Signature] (Person in Charge) Print Name: Chris Russo

OEC BY: 5/10/2022