Post for 30 Operating Days

Connecticut Office of Early Childhood
450 Columbus Boulevard, Suite 302 Hartford, CT 06103
Phone (800)-282-6063 Fax (860)-326-0552

CHILD CARE CENTER/GROUP INSPECTION FORM

☐ INITIAL ☑ UNANNOUNCED FULL/PARTIAL ☐ FOLLOW UP ☐ LOCATION CHANGE ☐ OTHER

Program Name: St. Francis of Assisi Preschool	License Number: 1546	Date of Inspection: 5/31/22	Time of Arrival: 930am
Address: 35 Norfield Road	Expiration Date: 3.31.26	Licensed Capacity: 58	Under 3 Capacity: 16
Town: Weston, CT. 06883	Telephone: (203) 454 8646	# of children present: 30	# of staff present: 7
Operator: Saint Francis of Assisi Parish	Director: Marianne Keith		
Email: mkeith@sfapreschool.com	Head Teacher(s): ~~Claudia~~ Bonnie Judkins		
Hours of Operation: M-F 8~~45~~am - 155 pm	Summer Care: No		
Ages Served: 18 months - 5 years	Instruction Codes: N/A = Not applicable at this time √ = Compliance/No violation found O = Non-compliance/Violation found		

Endorsements: ☑ Under Three (6wks - 36m) ☑ Preschool (3y - 5y) ☐ School Age (5y & up) ☐ Night Care (6wks & up)

Licensure Procedures 19a-79-2a
- ☑ 1. Local Health Date: 8.10.21

Administration 19a-79-3a
- ☑ 2. New Staff-Employee Orientation
- ☑ 3. Annual Staff Policy Training
- ☑ 4. Documentation of Behavior M. Tech Discussed w/Parents
- ☑ 5. Notification of Change
- ☑ 6. Policies: Discipline/Supervision/Child Protection/General Operating Policies/Personnel Policies/Closing Time Policy
- ☑ 7. Daily Attendance Records: Children/Staff

Items Posted: Conspicuous/Accessible
- ☑ 8. License
- ☑ 9. Current Fire Marshal Certificate Date: 7.22.21
- ☑ 10. OEC Complaint Procedure
- ☑ 11. Food Service Certificate Date:
- ☑ 12. Menus
- ☑ 13. Emergency Plans
- ☑ 14. No Smoking Signs
- ☑ 15. Radon Test (Y/N) Date: 2.26.02 Results: 1.3pCi/L
- ☑ 15a. Developmental Milestones

Staffing 19a-79-4a
- ☑ 16. Staff Health Records/TB Tests
- ☑ 17. Professional Development
- ☑ 18. Disciplinary Actions
- ☑ 19. Designated Head Teacher/60%
- ☑ 20. Two Staff Present
- ☑ 21. Ratio: 1 Staff to 10 Children
- ☑ 22. Group Size: Maximum 20 Children
- ☑ 23. Designated Director/Training
- ☑ 24. CPR Certified Staff
- ☑ 25. First Aid Trained Staff

Consultants
- ☑ 26. Agreements/Contracts (Complete/Signed Annually)

	Contracts	Logs
Education	√	√
Health	√	√
Social Service	√	√
Dental	√	√
Dietitian	√	√

- ☑ 27. Logs/Visits Documented

Swimming: (Y/N)
- ☑ 28. Non-Swimmers Identified

Swimming cont.
- ☑ 29. Staff/Child Ratios
- ☑ 30. CPR Certified Staff (20 years of age)
- ☑ 31. Lifeguard Certified/Supervision

Record Keeping 19a-79-5a
- ☑ 32. Enrollment Information
- ☑ 33. Emergency Medical Permission
- ☑ 34. Authorized Released Permission
- ☑ 35. Field Trip Permission
- ☑ 36. Transportation Permission
- ☑ 37. Child Health Records/Immunizations/TB
- ☑ 38. Individual Care Plan (Signed by Parent/Staff)
- ☑ 39. Injury/Illness/Accident Reports

Health and Safety 19a-79-6a
- ☑ 40. Nutritious Snacks/Meals (Required Food Groups)
- ☑ 41. Proper Refrigeration
- ☑ 42. Kitchen Separated
- ☑ 43. Hand Washing Before Eating/Food Handling
- ☑ 44. First Aid Kit(s): Indoor/Outdoor/Field Trip/Inventory

Physical Plant 19a-79-7a
- ☑ 45. License Premise: Clean/Good Repair/Hazard Free
- ☑ 48. Sanitary Drinking Fountains/Disposable Cups
  Water Supply: Public/Well
- ☑ 49. Lead Water Test Date: 11.17.21
  Bacterial/Chemical Test (Y/N) Date: 1.10.22
- ☑ 50. Walkways Maintained
- ☑ 51. Designated Staff Toilet/Sink
- ☑ 52. All Openings for Ventilation Screened
- ☑ 53. Windows Protected to Prevent Falls
- ☑ 54. Glass Protected to 36"
- ☑ 55. Overhead Doors Locking Devices/Spring Protectors
- ☑ 56. Exits/Hallways and Stairs Unobstructed
- ☑ 57. Individual Storage of Clothing/Bedding
- ☑ 58. Smoking Prohibited
- ☑ 59. Matches/Lighters Inaccessible
- ☑ 60. Electrical Safety: Outlets/Cords
- ☑ 61. Toileting Needs Met
- ☑ 62. Required Toilets/Sinks/Supplies
- ☑ 63. Potty Chairs: Nonporous/Emptied/Disinfected
- ☑ 64. Hand Washing After Toileting: Staff/Children
- ☑ 65. Ventilation in Toilet Room
- ☑ 66. Air Temp 65°, Thermometer Affixed

Signature of OEC Representative:	Written Corrective Action Plan Due to OEC by:	Signature of Person in Charge:
Terri R Roberts	6.14.22	
Print name: Terri R Roberts		Print name: Marianne Keith

CHILD CARE CENTER/GROUP INSPECTION FORM

Program Name: St. Francis of Assisi Preschool | License Number: 15461 | Date of Inspection: 5/31/22

Physical Plant continued:

- ✓ 67. Water Temperature 60°-115°
- ✓ 68. Portable Space Heaters
- ✓ 69. Walls/Ceilings/Floors/Rugs: Clean/Good Repair
- ✓ 70. Rugs Secure
- ✓ 71. Hot Water/Steam Pipes Protected
- ✓ 72. Working Phone on Each Level
- ✓ 73. Emergency Numbers Posted
- ✓ 74. Adequate Lighting: 50/30 Candle Feet
- ✓ 75. Light Fixtures Shielded/Shatter Proof
- ✓ 76. Potentially Hazardous Substances Locked
- ✓ 77. Garbage/Rubbish Disposed Daily
- ✓ 78. Stairs Protected/Good Repair/Handrails
- ✓ 79. Pets: Maintained/Care Plan (Y/N)
- ✓ 80. Operable CO Detector on Each Level (Y/N)
- ✓ 81. Program Space/Adequate Sq. Ft. Per Child
- ✓ 82. Equipment: Good Repair/Safe/Non-toxic
- ✓ 83. Cots Stored/Maintained/Adequate Number
- ✓ 84. Developmentally Appropriate Equipment/Materials
- ✓ 85. Hot Tubs/Spas/Saunas: Locked/Inaccessible (Y/N)
- ✓ 86. No Weapons/No Facsimile of a Firearm on Premise

Outdoor Space

- ✓ 87. Outdoor Space Adequate Sq. Ft. Per Child
- ✓ 88. Impact Absorbing Material under Equipment
- ✓ 89. Playground Free from Hazards
- ✓ 90. Peeling Paint (Y/N) Sample Taken (Y/N)
- ✓ 91. Lead Management Plan (Y/N) _____
- ✓ 92. Equipment Anchored/Safely Arranged
- ✓ 93. Outdoor Play Area Protected/Fenced
- ✓ 94. Drinking Water Available/Accessible

Educational Requirements 19a-79-8a

- ✓ 95. Written Plan for Daily Program Available to Parents/Staff
- ✓ 96. Activity Choices: Developmentally Appropriate/ Flexible/Meets Individual Needs
  Program Includes: Indoor/Outdoor, Gross/Fine Motor Skills, Snacks/Meals, Rest/Sleep/Quiet Time, Toileting and Clean Up

Administration of Medications 19a-79-9a _____

- ✓ 97. Written Policies/Procedures
- ✓ 98. Training Outline on file

Nonprescription Topical Medications

- ✓ 99. Administration/Parent Permission/MAR
- ✓ 100. Labeling/Storage

Oral/Topical/Inhalant/Injectable Medications

- ✓ 101. Med Trained Staff/Certificates
- ✓ 102. Authorized Prescriber/Parent Permission/MAR
- ✓ 103. Labeling/Storage
- ✓ 104. Unused/Expired Meds Returned/Disposed

Self-Administration

- ✓ 105. Authorized Prescriber/Parent Permission/MAR
- ✓ 106. Labeling/Storage
- ✓ 107. Approved Petition For Special Med Authorization

Emergency Distribution of Potassium Iodide

- N/A 108. KI Pills Parent Permission/Storage

Under Three Endorsement 19a-79-10

- ✓ 109. Approved Endorsement
- ✓ 110. Ratio: 1 Staff to 4 Children
- ✓ 111. Group Size no Larger than 8
- ✓ 112. Physical Barriers/Groups of 8 (Indoors/Outdoors)
- ✓ 113. Adequate Sinks in Program Space
- ✓ 114. Free Standing/Well-Constructed/Safe Cribs
- ✓ 115. Washable Cots
- ✓ 116. Chairs for Feeding/Stable/Safety Straps/Locking Tray
- ✓ 117. Dev. Appropriate Tables/Chairs/Equipment
- ✓ 118. Refrigerators and Food Prep Facilities
- ✓ 119. Sturdy/Safety Rail/Nonporous/Exclusive Use
- ✓ 120. Washed/Disinfected
- ✓ 121. Disposable Paper Sheets
- ✓ 122. Covered Waste Receptacle
- ✓ 123. Diaper Changing Policy Posted
- ✓ 124. Hand Washing Policy Posted
- ✓ 125. Individual Storage of Personal Items
- ✓ 126. Cribs/Cots Washed/Disinfected
- ✓ 127. Under 12 Months Placed on Back for Sleeping
- ✓ 128. Alternate Sleep Position/Equip-Medical Document Y/N
- ✓ 129. Crib/Bed Used for Infant Sleeping
- ✓ 130. Crib/Bed Free from Observable Hazards
- ✓ 131. Infant Toys Separate/Washed/Disinfected Daily
- ✓ 132. No Toys/Objects Less than 1 ¼" Diameter
- ✓ 133. Plastic Bags/Balloons/Styrofoam Objects Inaccessible
- ✓ 134. Health Consultant/Documentation of Visits
- ✓ 135. Infants Held for Bottles/Individual Attn/Tummy Time
- ✓ 136. Written Statement/Feeding Schedule from Parent
- ✓ 137. Unused Portions of Liquids Discarded
- ✓ 138. Clean Bottles/Disp. Bottles/Approved Bottle Washing
- ✓ 139. Food Served from Dish or Whole Jar Served
- ✓ 140. Bottles Individually Identified w/Child's Name

Outdoor Play Space-Under Three:

- ✓ 141. Play Space Fenced
- ✓ 142.Outdoor Equipment: Dev. Appropriate

School Age Children Endorsement 19a-79-11

- N/A 143. Approved Endorsement
- 144. Activity choices appropriate
- 145. Ratio: 1 Staff to 10 Children
- 146. Group Size: Max. 20 Children
- 147. Education Consultant Appropriate

Night Care Endorsement 19a-79-12 (10pm-5am)

- N/A 148. Approved Endorsement
- 149. Written Program Plan/Supervision
- 150. Staff Awake/Available
- 151. Cot/Crib/Bedding/Toiletries/Sleep Apparel
- 152. Individual Storage of Personal Items
- 153. Bedding/Sleeping Apparel Laundered Weekly

Monitoring of Diabetes 19a-79-13 No one currently enrolled

- ✓ 154. Written Policies/Procedures
- ✓ 155. On Site Staff Trained in First Aid/Glucose Testing
- ✓ 156. Training Current/Documented
- ✓ 157. Supervision of Self Administration
- ✓ 158. Equipment/Supplies: Labeled/Inaccessible
- ✓ 159. Signed Agreement w/Parent Regarding Equipment
- ✓ 160. Materials Discarded Appropriately
- ✓ 161. Authorized Prescriber/Parent Permission
- ✓ 162. Documentation of Test Results/Actions Taken
- ✓ 163. Daily Written Parent Notifications

Signature of OEC Representative	Written Corrective Action Plan Due to OEC by:	Signature of Person in Charge
T. R Roberts	6-14-22	
Print Name: Terri R Roberts		Print Name: Marianne Keeth

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: St. Francis of Assisi Preschool License # 15461 Date: 5/31/22

Observations/Corrections needed:

16 - 2 of 6 expired
~~37 - 3 of 6 expired~~ (OK TK)
74 - measured below 50 foot candles in close work areas in Arts/Crafts room
84 - Rail loose at top of pirate ship climber
111 - observed 3:9 with mixed age group
93 - Outdoor grass area not protected near driveway. Cones present but not in place as observed.

Disussed:
- first aid manual not within 5 years of print
- Shelving not secured in room 103

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: T. R Roberts (OEC Representative)
Print Name: Terri R Roberts

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 6-14-22

Signature: (Person in Charge)
Print Name: Marianne Keith