

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Hyland Early Learning Center Date: 5/31/22 Time: 2:15pm

Location Address: 355 New Britain Fl 1 Hartford Telephone #: 860 757-0702

e-mail address: jennifer.baglin@hartford.gov License #: 12138 Expiration Date: 9/30/2022

Capacity: 65^{u38} # of Children Present: 14 # of Staff Present: 3+

Consent to Inspect Family Child Care Home	<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: Complaint Investigation Case # 2022-358

Observations/Corrections needed:

Administration:
(5) 19a-79-3a(d)(7) General operating policies - Did not observe Covid 19 mask wearing policy. Did not observe policies and procedures for covid 19, based off of the latest CPC /OEC guidance.

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

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

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 6/14/2022

Signature: Stephanie Pia
(OEC Representative)

Print Name: Stephanie Pia

Signature: Jennifer Baglin
(Person in Charge)

Print Name: Jennifer Baglin