

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bright + Early Children's Learning Centers Date: 6/3/22 Time: 10:50

Location Address: 139 Mill Rock Rd. E Old Saybrook Telephone #: 860 388-3100

e-mail address: kara@brightandearly.com License #: 70361 Expiration Date: 7/31/25

Capacity: 147/88 # of Children Present: 115 # of Staff Present: 25⁺

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 visit on 5/12/22

Observations/Corrections needed:

(NS) 19a-79-4a(c)(4)(D) Staffing, supervision - operator was
in compliance with this regulation at time of visit.
Observed name/face, counting, + stopping groups at
certain areas to ensure all children w/ group.

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: N/A

Signature: Karen Hicks

(OEC Representative)

Print Name: Karen Hicks

Signature: Kara Smith

(Person in Charge)

Print Name: Kara Smith