

CHILD CARE CENTER/GROUP INSPECTION FORM

INITIAL UNANNOUNCED FULL PARTIAL FOLLOW UP LOCATION CHANGE OTHER

Program Name: <u>KinderCare Learning Center</u>	License Number: <u>16193</u>	Date of Inspection: <u>6-13-22</u>	Time of Arrival: <u>9:28</u>
Address: <u>110 Miles Drive</u>	Expiration Date: <u>12-31-25</u>	Licensed Capacity: <u>144</u>	Under 3 Capacity: <u>64</u>
Town: <u>Wallingford, CT 06492</u>	Telephone: <u>203-269-7730</u>	# of children present: <u>48</u>	# of staff present: <u>107</u>
Operator: <u>KinderCare Education LLC</u>	Director: <u>Lindsay Schmidt</u>		
Email: <u>301810@klcorp.com</u>	Head Teacher: <u>Tiana Velez</u>		
Hours of Operation: <u>M-F 6:30 am - 6:30 pm</u>	Summer Care: <u>Open</u>		
Ages Served: <u>6 wks - 12 years</u>	Instruction Codes: N/A = Not applicable at this time √ = Compliance/No violation found O = Non-compliance/Violation found		
Endorsements: <input checked="" type="checkbox"/> Under Three (6wks - 36m) <input checked="" type="checkbox"/> Preschool (3y - 5y) <input checked="" type="checkbox"/> School Age (5y & up) <input type="checkbox"/> Night Care (6wks & up)			

Licensure Procedures 19a-79-2a

1. Local Health Date: 8-13-21

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: 9-30-20
- 10. OEC Complaint Procedure
- 11. Food Service Certificate Date: 6-30-22
- 12. Menus
- 13. Emergency Plans
- 14. No Smoking Signs
- 15. Radon Test (Y/N) Date: 4-13-07 Results: 0.3
- 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	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Social Service	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Dental	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Dietitian	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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: 7-2-21
Bacterial/Chemical Test (Y/N) Date: na
- 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: 6-27-22

Signature of Person in Charge:

Jennifer Serra
Print name: Jen Serra

Lindsay Schmidt
Print name: Lindsay Schmidt

CHILD CARE CENTER/GROUP INSPECTION FORM

<p>Program Name: <i>Kinder Care Learning Center</i></p> <p>Physical Plant continued:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 67. Water Temperature 60°-115° <input checked="" type="checkbox"/> 68. Portable Space Heaters <input checked="" type="checkbox"/> 69. Walls/Ceilings/Floors/Rugs: Clean/Good Repair <input checked="" type="checkbox"/> 70. Rugs Secure <input checked="" type="checkbox"/> 71. Hot Water/Steam Pipes Protected <input checked="" type="checkbox"/> 72. Working Phone on Each Level <input checked="" type="checkbox"/> 73. Emergency Numbers Posted <input checked="" type="checkbox"/> 74. Adequate Lighting: 50/30 Candle Feet <input checked="" type="checkbox"/> 75. Light Fixtures Shielded/Shatter Proof <input checked="" type="checkbox"/> 76. Potentially Hazardous Substances Locked <input type="checkbox"/> 77. Garbage/Rubbish Disposed Daily <input checked="" type="checkbox"/> 78. Stairs Protected/Good Repair/Handrails <input type="checkbox"/> 79. Pets: Maintained/Care Plan (Y/N) <input checked="" type="checkbox"/> 80. Operable CO Detector on Each Level (Y/N) <input checked="" type="checkbox"/> 81. Program Space/Adequate Sq. Ft. Per Child <input checked="" type="checkbox"/> 82. Equipment: Good Repair/Safe/Non-toxic <input checked="" type="checkbox"/> 83. Cots Stored/Maintained/Adequate Number <input checked="" type="checkbox"/> 84. Developmentally Appropriate Equipment/Materials <input checked="" type="checkbox"/> 85. Hot Tubs/Spas/Saunas: Locked/Inaccessible (Y/N) <input checked="" type="checkbox"/> 86. No Weapons/No Facsimile of a Firearm on Premise <p>Outdoor Space</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 87. Outdoor Space Adequate Sq. Ft. Per Child <input checked="" type="checkbox"/> 88. Impact Absorbing Material under Equipment <input checked="" type="checkbox"/> 89. Playground Free from Hazards <input checked="" type="checkbox"/> 90. Peeling Paint (Y/N) Sample Taken (Y/N) <input checked="" type="checkbox"/> 91. Lead Management Plan (Y/N) <input checked="" type="checkbox"/> 92. Equipment Anchored/Safely Arranged <input checked="" type="checkbox"/> 93. Outdoor Play Area Protected/Fenced <input checked="" type="checkbox"/> 94. Drinking Water Available/Accessible <p>Educational Requirements 19a-79-8a</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 95. Written Plan for Daily Program Available to Parents/Staff <input checked="" type="checkbox"/> 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 <p>Administration of Medications 19a-79-9a</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 97. Written Policies/Procedures <input checked="" type="checkbox"/> 98. Training Outline on file <p>Nonprescription Topical Medications</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 99. Administration/Parent Permission/MAR <input checked="" type="checkbox"/> 100. Labeling/Storage <p>Oral/Topical/Inhalant/Injectable Medications</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 101. Med Trained Staff/Certificates <input checked="" type="checkbox"/> 102. Authorized Prescriber/Parent Permission/MAR <input checked="" type="checkbox"/> 103. Labeling/Storage <input checked="" type="checkbox"/> 104. Unused/Expired Meds Returned/Disposed <p>Self-Administration</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 105. Authorized Prescriber/Parent Permission/MAR <input checked="" type="checkbox"/> 106. Labeling/Storage <input checked="" type="checkbox"/> 107. Approved Petition For Special Med Authorization <p>Emergency Distribution of Potassium Iodide</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 108. KI Pills Parent Permission/Storage 	<p>License Number: <i>16193</i></p> <p>Date of Inspection: <i>6.13.22</i></p> <p>Under Three Endorsement 19a-79-10</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 109. Approved Endorsement <input checked="" type="checkbox"/> 110. Ratio: 1 Staff to 4 Children <input checked="" type="checkbox"/> 111. Group Size no Larger than 8 <input checked="" type="checkbox"/> 112. Physical Barriers/Groups of 8 (Indoors/Outdoors) <input checked="" type="checkbox"/> 113. Adequate Sinks in Program Space <input checked="" type="checkbox"/> 114. Free Standing/Well-Constructed/Safe Cribs <input checked="" type="checkbox"/> 115. Washable Cots <input checked="" type="checkbox"/> 116. Chairs for Feeding/Stable/Safety Straps/Locking Tray <input checked="" type="checkbox"/> 117. Dev. Appropriate Tables/Chairs/Equipment <input checked="" type="checkbox"/> 118. Refrigerators and Food Prep Facilities <input checked="" type="checkbox"/> 119. Sturdy/Safety Rail/Nonporous/Exclusive Use <input checked="" type="checkbox"/> 120. Washed/Disinfected <input checked="" type="checkbox"/> 121. Disposable Paper Sheets <input checked="" type="checkbox"/> 122. Covered Waste Receptacle <input checked="" type="checkbox"/> 123. Diaper Changing Policy Posted <input checked="" type="checkbox"/> 124. Hand Washing Policy Posted <input checked="" type="checkbox"/> 125. Individual Storage of Personal Items <input checked="" type="checkbox"/> 126. Cribs/Cots Washed/Disinfected <input checked="" type="checkbox"/> 127. Under 12 Months Placed on Back for Sleeping <input checked="" type="checkbox"/> 128. Alternate Sleep Position/Equip-Medical Document Y/N <input checked="" type="checkbox"/> 129. Crib/Bed Used for Infant Sleeping <input checked="" type="checkbox"/> 130. Crib/Bed Free from Observable Hazards <input checked="" type="checkbox"/> 131. Infant Toys Separate/Washed/Disinfected Daily <input checked="" type="checkbox"/> 132. No Toys/Objects Less than 1 1/4" Diameter <input checked="" type="checkbox"/> 133. Plastic Bags/Balloons/Styrofoam Objects Inaccessible <input checked="" type="checkbox"/> 134. Health Consultant/Documentation of Visits <input checked="" type="checkbox"/> 135. Infants Held for Bottles/Individual Attn/Tummy Time <input checked="" type="checkbox"/> 136. Written Statement/Feeding Schedule from Parent <input checked="" type="checkbox"/> 137. Unused Portions of Liquids Discarded <input checked="" type="checkbox"/> 138. Clean Bottles/Disp. Bottles/Approved Bottle Washing <input checked="" type="checkbox"/> 139. Food Served from Dish or Whole Jar Served <input checked="" type="checkbox"/> 140. Bottles Individually Identified w/Child's Name <p>Outdoor Play Space-Under Three:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 141. Play Space Fenced <input checked="" type="checkbox"/> 142. Outdoor Equipment: Dev. Appropriate <p>School Age Children Endorsement 19a-79-11</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 143. Approved Endorsement <input checked="" type="checkbox"/> 144. Activity choices appropriate <input checked="" type="checkbox"/> 145. Ratio: 1 Staff to 10 Children <input checked="" type="checkbox"/> 146. Group Size: Max. 20 Children <input checked="" type="checkbox"/> 147. Education Consultant Appropriate <p>Night Care Endorsement 19a-79-12 (10pm-5am)</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 148. Approved Endorsement <input checked="" type="checkbox"/> 149. Written Program Plan/Supervision <input checked="" type="checkbox"/> 150. Staff Awake/Available <input checked="" type="checkbox"/> 151. Cot/Crib/Bedding/Toiletries/Sleep Apparel <input checked="" type="checkbox"/> 152. Individual Storage of Personal Items <input checked="" type="checkbox"/> 153. Bedding/Sleeping Apparel Laundered Weekly <p>Monitoring of Diabetes 19a-79-13 <i>no child enrolled</i></p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 154. Written Policies/Procedures <input checked="" type="checkbox"/> 155. On Site Staff Trained in First Aid/Glucose Testing <input checked="" type="checkbox"/> 156. Training Current/Documented <input checked="" type="checkbox"/> 157. Supervision of Self Administration <input checked="" type="checkbox"/> 158. Equipment/Supplies: Labeled/Inaccessible <input checked="" type="checkbox"/> 159. Signed Agreement w/Parent Regarding Equipment <input checked="" type="checkbox"/> 160. Materials Discarded Appropriately <input checked="" type="checkbox"/> 161. Authorized Prescriber/Parent Permission <input checked="" type="checkbox"/> 162. Documentation of Test Results/Actions Taken <input checked="" type="checkbox"/> 163. Daily Written Parent Notifications 	
<p>Signature of OEC Representative <i>Jennifer Sena</i></p> <p>Print Name: <u>Jen Sena</u></p>	<p>Written Corrective Action Plan Due to OEC by: <i>6.27.22</i></p>	<p>Signature of Person in Charge <i>Lindsay Schmidt</i></p> <p>Print Name: <u>Lindsay Schmidt</u></p>

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Kinder Care Learning Center License # 16193 Date: 6-23-22

Observations/Corrections needed:

#¹² Observed posted menus to not have dates, unable to view menus one week in advance

#17 observed 3 out of 8 staff files to not have documentation of professional development. Observed 4 out of 8 staff files to not have documentation of professional development for most/all of 2020 and only minimal documentation of professional development in 2021. Unable to determine if staff completed required professional development hours.

#34 observed 2 out of 14 staff children files to be missing authorized release.

#37 observed one student file to be missing current child health record/immunization/TB

#45 observed window sills in gross motor room to have sticky matter, chipping/peeling paint and incomplete foam guard.

- observed yellow contact paper in reading area of 3's (multi-age) room, to be scratched and peeling

- observed hole in flooring in 3's room

- observed adult ladder, in children bathroom, in 2B. observed broken easel, and long wood frame with protruding screw in children bathroom.

observed broom and chair in child's bathroom in 2B, blocking access to toilet.

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: Jennifer Lew
(OEC Representative)

Print Name: Jen Lew

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Lindsay Schmidt
(Person in Charge)

OEC BY: 6-27-22

Print Name: Lindsay Schmidt

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Kinder Care Learning Center License # 116193 Date: 6.13.22Observations/Corrections needed:#45. continuedObserved food on floor in gross motor room.- Observed children's hand washing sinks/counters to have accumulated dust, food residue and dried ^{paint} in sinks and counters around sink throughout program.#51 observed staff using student bathroom in 5's room.#62 observed several childrens sinks to not have running hot water.Observed no soap and no paper towels at hand washing sink in 5's room, no paper towels in Toddler 2 sink childrens sink, no soap at staff hand washing sink in Toddler room. No paper towels in 2 B childrens sink.#64 observed staff in infant room and toddler room to change diapers without washing their own hands and childrens hands ^{is} after ~~propr~~ changing diapers ~~to~~ changes#65 observed dusty bathroom vents to ~~be~~ ^{is} dusty throughout#66 observed all classrooms to not have a thermometer affixed to wall#67 ^{hot} water temperature unable to be measured at multiple hand wash sinks throughout because hot water is turned off#69 observed ceilings in 5 rooms and hallway to have water stains. observed classrooms with water stains to also have peeling/crumbling ceiling paint.

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Signature: Jennifer Sena
(OEC Representative)Print Name: Jen Sena

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Lindsay Schmidt
(Person in Charge)OEC BY: 6.27.22Print Name: Lindsay Schmidt

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Kinder Care Learning Center License # 16193 Date: 6-13-22Observations/Corrections needed:

#76 continued: Observed multiple classrooms not currently in use, with accumulated dust, cob webs along floors, walls and ceilings. Space is licensed, just not currently used

#76 Observed multiple hazardous substances accessible to children in 2B as cabinet under changing table does not lock. Observed spray bottles of bleach, disinfectant, bathroom and multi surface cleaner accessible.

#89 observed accumulated garbage on over 3 playground. Observed broken toys, used masks, paper cups, used tissues and food wrappers around perimeter of play area. Observed some garbage around perimeter of under 3 playground with bike path.

#99 observed MAR's for all topics to not be used throughout

#113 observed infant room to not have a designated hand washing sink. One was used for food prep and one had a high chair tray in sink. Observed ^{hand wash} sink in 2A to have mug in sink

#120 observed staff in 2B to change multiple children without disinfecting changing table in between each change. Observed multiple changes in infant room with disinfecting between

#123 staff in infants and Toddler rooms to not follow diaper change policy when they did not wash their hands or child's hands before/after changes

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Signature: Jennifer Sen
(OEC Representative)

Print Name: Sen Sen

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: _____
(Person in Charge)

OEC BY: 6-27-22

Print Name: _____

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Kinder Care Learning Center License # 116193 Date: 6.13.22

Observations/Corrections needed:

#139 observed jar of baby food, to have been partially served from jar and returned to fridge for later feeding. Staff stated they were not aware you could not save it for later, unaware of requirement to serve whole jar/bottle or use a bowl/dish to serve from.

Discussed

observed 1 changing table to have a lunch bag & papers and glue stick - not for storage/exclusive use

observed 2 topics for a child no longer in attendance

multiple classes missing hand wash policy - corrected at visit

- Food service certificate posted during visit

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

Signature: Jennifer Sen
(OEC Representative)

Print Name: Sen Sen

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Lindsay Schmidt
(Person in Charge)

OEC BY: 6.27.22

Print Name: Lindsay Schmidt