

CHILD CARE CENTER/GROUP INSPECTION FORM

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

Program Name: North Branford Child Care	License Number: 15729	Date of Inspection: 7/12/22	Time of Arrival: 8:54am
Address: 605 Foxon Rd	Expiration Date: 2/28/26	Licensed Capacity: 43	Under 3 Capacity: 29
Town: North Branford 06472	Telephone: 203-484-3344	# of children present: 17	# of staff present: 5
Operator: The Kids Connection 1 inc	Director: Jeannie Votto		
Email: nbcc484@gmail.com	Head Teacher: Jeannie Votto		
Hours of Operation: 6:30am - 6:00pm M-F	Summer Care: open		
Ages Served: 6wks - 11 yrs	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: **4/20/21**

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: **11/1/21**
- ☒ 10. OEC Complaint Procedure
- ☒ 11. Food Service Certificate Date: **—**
- ☒ 12. Menus
- ☒ 13. Emergency Plans
- ☒ 14. No Smoking Signs
- ☒ 15. Radon Test (Y/N) Date: **1/23/12** Results: **.8-.9**
- ☒ 15a. Developmental Milestones

Staffing 19a-79-4a

- ☒ 16. Staff Health Records/TB Tests
- ☒ 17. Professional Development
- ☒ 18. Disciplinary Actions
- ☒ 18b. Background Checks
- ☒ 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	5/12/21	☒
Health	7/12/21	☒
Social Service	6/12/21	☒
Dental	4/25/22	☒
Dietitian	7/21/21	☒

- ☒ 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: **4/26/21**
- Bacterial/Chemical Test (Y/N) Date: **—**
- ☒ 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:

Fil Montanye

Written Corrective Action Plan Due to OEC by: **7/26/22**

Signature of Person in Charge:

Theresa Guadagnoli

Print name: **Fil Montanye**

Print name: **Theresa Guadagnoli**

CHILD CARE CENTER/GROUP INSPECTION FORM

Program Name: North Branford Child Care		License Number: 15729	
Date of Inspection: 7/12/22			
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		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 1/4" 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 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) ☒ 92. Equipment Anchored/Safely Arranged ☒ 93. Outdoor Play Area Protected/Fenced ☒ 94. Drinking Water Available/Accessible		Outdoor Play Space-Under Three: ☒ 141. Play Space Fenced ☒ 142. Outdoor Equipment: Dev. Appropriate	
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		School Age Children Endorsement 19a-79-11 ☒ 143. Approved Endorsement ☒ 144. Activity choices appropriate ☒ 145. Ratio: 1 Staff to 10 Children ☒ 146. Group Size: Max. 20 Children ☒ 147. Education Consultant Appropriate	
Administration of Medications 19a-79-9a ☒ 97. Written Policies/Procedures ☒ 98. Training Outline on file		Night Care Endorsement 19a-79-12 (10pm-5am) ☒ 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	
Nonprescription Topical Medications ☒ 99. Administration/Parent Permission/MAR ☒ 100. Labeling/Storage		Monitoring of Diabetes 19a-79-13 ☒ 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	
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	
Signature of OEC Representative Fil Montanye		Written Corrective Action Plan Due to OEC by: 7/26/22 Theresa Guadagnino	
Signature of Person in Charge Theresa Guadagnino		Signature of Person in Charge Theresa Guadagnino	

Print Name: Fil Montanye

Print Name: Theresa Guadagnino

SUPPLEMENTAL REPORT OF INSPECTION

PAGE 3

Name of Program/Provider: North Branford Child License # 15 729 Date: 7/12/22
Care

Observations/Corrections needed:

- #3 current annual review/training of policies not observed for 4 out of 6 staff
- #180 observed incomplete backgrounds checks
 - 2/6 staff currently working on site with children not on roster (BCIS)
 - 1/6 staff currently working with children status "Awaiting Finger Prints" in BCIS system
 - 1/6 staff currently working with children status "Needs background check" in BCIS system
- #26 current Education agreement not observed last on site signed 5/12/21
- #44 ~~fire~~ fire first Aid kits observed to be incomplete missing current manuals and 1 ice pack
- #88 8" inches of impact absorbing material not observed ~~to~~ within fall zones of under 3 climbers

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: Fil Montanye
(OEC Representative)
Print Name: Fil Montanye

CORRECTIVE PLAN SHALL BE RETURNED TO

OEC BY: 7/26/22

Signature: Theresa Guadagnino
(Person in Charge)
Print Name: Theresa Guadagnino