☐ Initial ☐ Unannounced Full/Partial ☑ Follow-up ☐ Location Change ☐ Investigation ☐ Other_____

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Valley Ymca School Age Child Care - Derby Date: 9/6/22 Time: 2:30 pm

Location Address: 155 David Humphrey Rd Derby, CT. 06418 Telephone #: (203) 521-1383

e-mail address: rleworthy@ccymca.org License #: 16650 Expiration Date: 2.28.25

Capacity: 73 # of Children Present: 20 # of Staff Present: 4

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: BCIS Follow Up

Observations/Corrections needed:

Program currently has 1 "current" staff working with 3 "Work supervised" staff as found today in BCIS System. As observed.

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: Terri R Roberts / Terri R Roberts
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: N/A

Signature: Ryan Leworthy
(Person in Charge)