

Initial  Unannounced Full Partial  Follow-up  Location Change  Investigation  Other \_\_\_\_\_

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Kinder Care Learning Center Date: 9.12.22 Time: 12:19

Location Address: 3025 Dixwell Ave. Hamden Telephone #: 203-248-8262

e-mail address: 301764@klcorp.com License #: 15871 Expiration Date: 3.31.25

Capacity: 168/88 # of Children Present: 76/55 # of Staff Present: 18+

<b>Consent to Inspect Family Child Care Home</b>	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: Partial Inspection for case 2022-345

**Observations/Corrections needed:**

OK 19a-79-4a(c)(4) staff child ratios - observed all classrooms to be in ratio during inspection. Observed program break schedule to indicate ratio will be maintained during nap time, during staff break times.

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 Serra  
(OEC Representative) Jen Serra

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: -na-

Signature: Nicolle Mainiero  
(Person in Charge)