

Post for 30
Operating
Days

Connecticut Office of Early Childhood
450 Columbus Boulevard, Suite 302, Hartford, CT 06103
Phone 800-282-6063 Fax 860-326-0552
SCHOOL AGE ONLY INSPECTION FORM

INITIAL UNANNOUNCED FULL/PARTIAL FOLLOW UP LOCATION CHANGE OTHER

Program Name: <u>Right at School at Bear Path</u>	License Number: <u>70501</u>	Date of Inspection: <u>9-22-22</u>	Time of Arrival: <u>3:21 pm</u>
Address: <u>10 Kirk Rd</u>	Expiration Date: <u>8-31-23</u>	Licensed Capacity: <u>80</u>	
Town: <u>Hamden CT</u>	Telephone: <u>203-817-1146</u>	# of children present: <u>29</u>	# of staff present: <u>3</u>
Operator: <u>Right at School, LLC</u>	Director: <u>Lori Osber</u>	Head Teacher: <u>Alexa Charney</u>	
Email: <u>lori.osber@rightat-school.com</u>	Summer Care: <u>Closed</u>		
Hours of Operation: <u>Mon-Fri 7:30-8:34, 3:34-6:00</u>	Instruction Codes: √ = Compliance/No violation found O = Non-compliance/Violation found N/A = Not applicable at this time		
Ages Served: <u>5-12 years</u>			

Licensure Procedures 19a-79-2a

1. Local Health Inspection Date: 9/20/21

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: 8/26/22
 - 10. OEC Complaint Procedure
 - 11. Food Service Certificate Date:
 - 12. Menus
 - 13. Emergency Plans
 - 14. No Smoking Signs
 - 15. Radon Test (Y/N) Date: Results:
 - 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
- 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
- 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 (Y/N) Date:
- Bacterial/Chemical Test (Y/N) Date:
- 50. Walkways Maintained
- 51. Designated Staff Toilet/Sink
- 53. Windows Protected to Prevent Falls
- 55. Overhead Doors Locking Devices/ Spring Protectors
- 56. Exits/Hallways and Stairs Unobstructed
- 58. Smoking Prohibited
- 59. Matches/Lighters Inaccessible
- 61. Toileting Needs Met
- 62. Required Toilets/Sinks/Supplies
- 64. Hand Washing After Toileting: Staff/Children
- 65. Ventilation in Toilet Room
- 66. Air Temperature Comfortable
- 68. Portable Space Heaters
- 69. Building/Equipment: Sanitary/Hazard Free
- 71. Hot Water/Steam Pipes Protected
- 72. Working Phone on Each Level

Signature of OEC Representative:

Jen Serra
Print Name: Lori B. Osber

Written Corrective Action Plan

Due to OEC by:

10/6/22

Signature of Person in Charge:

Lori B. Osber
Print Name: Lori B. Osber

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- Physical Plant continued:**
- 73. Emergency Numbers Posted
 - 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) (N)
 - 80. Operable CO Detector on Each Level (Y/N) (N)
 - 81. Program Space/Adequate Sq. Ft. Per Child
 - 84. Developmentally Appropriate Equipment/Materials
 - 85. Hot Tubs/Spas/Saunas: Locked/Inaccessible (Y/N) (N)
 - 86. No Weapons/No Facsimile of a Firearm on Premise

- Outdoor Space**
- 87. Outdoor Space Adequate Sq. Ft. Per Child
 - 88. Impact Absorbing Material under Equipment
 - 89. Playground Free of Hazards
 - 92. Equipment Anchored/Safely Arranged
 - 93. Outdoor Playground Protected
 - 94. Drinking Water Available/Accessible

- 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

- Administration of Medications 19a-79-9a**
- 97. Written Policies/Procedures
 - 98. Training Outline on file
 - Nonprescription Topical Medications**
 - 99. Administration/Parent Permission/MAR
 - 100. Labeling/Storage
 - 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

- Emergency Distribution of Potassium Iodide**
- 108. KI Pill Parent Permission/Storage

- 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
- 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

Signature of OEC Representative <u>Jen Serra</u> Print Name: <u>Jen Serra</u>	Written Corrective Action Plan Due to OEC by: <u>Fil Montanye</u> Date: <u>10/6/22</u>	Signature of Person in Charge <u>Lori B Osbeck</u> Print Name: <u>Lori B Osbeck</u>
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SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Right at School at Bear Path License # 70501 Date: 9/22/22

Observations/Corrections needed:

- #3 - observed 2 out of 5 staff without documentation of annual policy, plans and procedures training
- #7 - observed 1 out of 3 staff signed in for today
 - observed 2 staff signed in on 9/1/22 + 9/15/22 with over 20 children in attendance. no documentation of 3rd staff on site
 - observed attendance for students on 9/1/22 with 8 students not signed out in pm
 - observed attendance for students on 9/16/22 with 13 students not signed out for am session

- ~~#45 - observed fridge to be not clean on exterior and interior~~
- #145 - upon arrival observed 2 staff in cafe w/ 27 children 2 children and 1 staff were at bathrooms at the time
- #76 - observed 3 cleaners from school on table accessible (Ph 70 One)

Discussion

- 2 staff signed in (9/8/22, 9/13/22) without files on site
- 1 child with medication on site not in attendance without parent signatures on care plan and med order

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: Jen Serra / Fil Montanye
(OEC Representative)
 Print: Jen Serra / Fil Montanye

Signature: Loni B. Osber
(Person in Charge)
 Print: Loni B. Osber

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 10/6/22