

Initial Unannounced Full/Partial Follow-up Location Change Investigation Other _____

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Margaret Griffin Child Dev Center Date: 12/20/22 Time: 1:35 pm

Location Address: 240 Main St. Southington, CT Telephone #: (860) 681-5885

e-mail address: southingtonchilddev@gmail.com License #: 12456 Expiration Date: 6/30/25

Capacity: 50 # of Children Present: 30 # of Staff Present: 4

Consent to Inspect Family Child Care Home	<i>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.</i> Provider/Applicant/Substitute's Signature: <u>N/A</u>
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Purpose of visit: Self-reported incident case # 2022-1006

Observations/Corrections needed:

(S) 19a-79-3a (b)(8)(A) Administration - Managing Child Behavior - Staff failed to manage child behavior using techniques based on developmentally appropriate practice, and in accordance with the program child guidance and discipline policy when staff person withheld a child's food for approximately 11 minutes as a form of punishment.

S = Substantiated NS = Not Substantiated P = Pending (if applicable)

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

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 12/26/2022

Signature: Stephanie P.
(OEC Representative)

Print Name: Stephanie P.

Signature: Emily R Napp
(Person in Charge)

Print Name: Emily R Napp