

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Sunshine Preschool and Child Care Date: 1.23.23 Time: 8:25

Location Address: 409 Wall St Meriden Telephone #: 203-440-0794

e-mail address: Sunshinemeredenc@hotmail.com License #: 80009 Expiration Date: 12.31.23

Capacity: 12 # of Children Present: 5 # of Staff Present: 2

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: <u>N/A</u>
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Purpose of visit: Partial Inspection

Observations/Corrections needed:

- S #7 Attendance, students and staff - observed students signed in to brightwheel app today. Unable to observe past sign in for children. Unable to observe staff sign-in and sign-outs on bright wheel's app. Paper sign-in sheets observed for staff to not be complete/used since 1/17/23. Unable to observe current/complete staff and students sign in/attendance.
- S #76 Observed spray bottle of bleach and water on children's cubby unit in over 3 class, accessible.
- S #130 Observed large sheet, loose fitting sheet in crib for 4 month old infant. Loose fitting sheet is hazard. Cribs must have tight fitting sheet with no toys, blankets and/or gas trapping objects in crib with infants under 12 months

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: 2.7.23

Signature: Jen Segra Eileen Ruiz
(OEC Representative)
Print Name: Jen Segra Eileen Ruiz
Signature: Johanna Gutierrez
(Person in Charge)
Print Name: Johanna Gutierrez