

2023-69

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Play N' Learn child Development Center Date: 1/25/23 Time: 8:10 am

Location Address: 10 Winger Drive 347 Route 165 Telephone #: 860-886-7529
Preston, CT 06365

e-mail address: chirt18@hotmail.com License #: 16099 Expiration Date: 2/28/25

Capacity: 64/29 # of Children Present: 44 # of Staff Present: 6

**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: Complaint/Investigation 2023-69

Observations/Corrections needed:

PIC Courtney Klewini - Asst Director - / Courtney Woodnance - ^{Director} Owner
 (S) 19a-79-4a(c)(4)(A) - Staffing - Ratios - Program was out of appropriate ratio in the Preschool classroom (18:1).

(S) 19a-79-4a(c)(4)(D) - Staffing - Supervision - Staff did not assure the supervision of the children at all times when the toddler teacher left her classroom of 4 to answer door for OEC. Staff did not adhere to program's supervision policy when she left ~~children~~ in classroom alone.

* OEC observed 2 LED lights flickering at the program. Per Asst. Director, new lights have been ordered to replace flickering bulbs.

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: 2/5/23

Signature: Valecia Williams
 (OEC Representative)

Print Name: Valecia Williams

Signature: Courtney Klewini
 (Person in Charge)

Print Name: Courtney Klewini