

CHILD CARE CENTER/GROUP INSPECTION FORM

INITIAL UNANNOUNCED FULL/PARTIAL FOLLOW UP LOCATION CHANGE OTHER

Program Name: <u>Bright Path - New Milford</u>	License Number: <u>Pending</u>	Date of Inspection: <u>2/18/23</u>	Time of Arrival: <u>9:00</u>
Address: <u>1149 Dunning Rd.</u>	Expiration Date: <u>Pending</u>	Licensed Capacity: <u>251</u>	Under 3 Capacity: <u>96</u>
Town: <u>New Milford, CT 06770</u>	Telephone: <u>860-580-7925</u>	# of children present: <u>0</u>	# of staff present: <u>4</u>
Operator: <u>Educational Play Care, LTD</u>	Director: <u>Kimberly Huchko</u>	Head Teacher: <u>Taisnairick Rosario</u>	
Email: <u>Cridel@brightpath-ide.com</u>	Summer Care: <u>Open</u>		
Hours of Operation: <u>M-F 6:30am - 6:00pm</u>	Instruction Codes: N/A = Not applicable at this time √ = Compliance/No violation found O = Non-compliance/Violation found		
Ages Served: <u>6wks - 12y.o.</u>	Endorsements: <input type="checkbox"/> Under Three (6wks - 36m) <input checked="" type="checkbox"/> Preschool (3y - 5y) <input checked="" type="checkbox"/> School Age (5y & up) <input type="checkbox"/> Night Care (6wks & up)		

Licensure Procedures 19a-79-2a

1. Local Health Date: 1/24/23

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: 1/17/23
- 10. OEC Complaint Procedure
- 11. Food Service Certificate Date: exp 6/30/23
- 12. Menus
- 13. Emergency Plans
- 14. No Smoking Signs
- 15. Radon Test (Y/N) Date: 1/9/23 Results: .9
- 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
- 21. Ratio: 1 Staff to 10 Children
- 22. Group Size: Maximum 20 Children
- 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

Swimming cont.

- 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 Date: 1/12/23
Bacterial/Chemical Test (Y/N) Date: ---
- 50. Walkways Maintained
- 51. Designated Staff Toilet/Sink
- 52. All Openings for Ventilation Screened
- 53. Windows Protected to Prevent Falls
- 54. Glass Protected to 36"
- 55. Overhead Doors Locking Devices/Spring Protectors
- 56. Exits/Hallways and Stairs Unobstructed
- 57. Individual Storage of Clothing/Bedding
- 58. Smoking Prohibited
- 59. Matches/Lighters Inaccessible
- 60. Electrical Safety: Outlets/Cords
- 61. Toileting Needs Met
- 62. Required Toilets/Sinks/Supplies
- 63. Potty Chairs: Nonporous/Emptied/Disinfected
- 64. Hand Washing After Toileting: Staff/Children
- 65. Ventilation in Toilet Room
- 66. Air Temp 65°, Thermometer Affixed

Signature of OEC Representative: <u>Krissi FilMontagne</u>	Written Corrective Action Plan Due to OEC by: <u>prior to license</u>	Signature of Person in Charge: <u>Carrie Riedel</u>
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Print name: Krissi FilMontagne
Morgan

Print name: Carrie Riedel

Post for 30
Operating
Days

CHILD CARE CENTER/GROUP INSPECTION FORM

<p>Program Name: Bright Path - New Milford</p> <p>Physical Plant continued:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 67. Water Temperature 60°-115° <input checked="" type="checkbox"/> 68. Portable Space Heaters <input checked="" type="checkbox"/> 69. Walls/Ceilings/Floors/Rugs: Clean/Good Repair <input checked="" type="checkbox"/> 70. Rugs Secure <input checked="" type="checkbox"/> 71. Hot Water/Steam Pipes Protected <input checked="" type="checkbox"/> 72. Working Phone on Each Level <input checked="" type="checkbox"/> 73. Emergency Numbers Posted <input checked="" type="checkbox"/> 74. Adequate Lighting: 50/30 Candle Feet <input checked="" type="checkbox"/> 75. Light Fixtures Shielded/Shatter Proof <input checked="" type="checkbox"/> 76. Potentially Hazardous Substances Locked <input checked="" type="checkbox"/> 77. Garbage/Rubbish Disposed Daily <input checked="" type="checkbox"/> 78. Stairs Protected/Good Repair/Handrails <input checked="" type="checkbox"/> 79. Pets: Maintained/Care Plan (Y/N) <input checked="" type="checkbox"/> 80. Operable CO Detector on Each Level (Y/N) <input checked="" type="checkbox"/> 81. Program Space/Adequate Sq. Ft. Per Child <input checked="" type="checkbox"/> 82. Equipment: Good Repair/Safe/Non-toxic <input checked="" type="checkbox"/> 83. Cots Stored/Maintained/Adequate Number <input checked="" type="checkbox"/> 84. Developmentally Appropriate Equipment/Materials <input checked="" type="checkbox"/> 85. Hot Tubs/Spas/Saunas: Locked/Inaccessible (Y/N) <input checked="" type="checkbox"/> 86. No Weapons/No Facsimile of a Firearm on Premise <p>Outdoor Space</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 87. Outdoor Space Adequate Sq. Ft. Per Child <input checked="" type="checkbox"/> 88. Impact Absorbing Material under Equipment <input checked="" type="checkbox"/> 89. Playground Free from Hazards <input checked="" type="checkbox"/> 90. Peeling Paint (Y/N) Sample Taken (Y/N) <input checked="" type="checkbox"/> 92. Equipment Anchored/Safely Arranged <input checked="" type="checkbox"/> 93. Outdoor Play Area Protected/Fenced <input checked="" type="checkbox"/> 94. Drinking Water Available/Accessible <p>Educational Requirements 19a-79-8a</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 95. Written Plan for Daily Program Available to Parents/Staff <input checked="" type="checkbox"/> 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 <p>Administration of Medications 19a-79-9a</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 97. Written Policies/Procedures <input checked="" type="checkbox"/> 98. Training Outline on file <p>Nonprescription Topical Medications</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 99. Administration/Parent Permission/MAR <input checked="" type="checkbox"/> 100. Labeling/Storage <p>Oral/Topical/Inhalant/Injectable Medications</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 101. Med Trained Staff/Certificates <input checked="" type="checkbox"/> 102. Authorized Prescriber/Parent Permission/MAR <input checked="" type="checkbox"/> 103. Labeling/Storage <input checked="" type="checkbox"/> 104. Unused/Expired Meds Returned/Disposed <p>Self-Administration</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 105. Authorized Prescriber/Parent Permission/MAR <input checked="" type="checkbox"/> 106. Labeling/Storage <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 107. Approved Petition For Special Med Authorization 	<p>License Number: pending</p> <p>Date of Inspection: 2/8/23</p> <p>Under Three Endorsement 19a-79-10</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 109. Approved Endorsement <input checked="" type="checkbox"/> 110. Ratio: 1 Staff to 4 Children <input checked="" type="checkbox"/> 111. Group Size no Larger than 8 <input checked="" type="checkbox"/> 112. Physical Barriers/Groups of 8 (Indoors/Outdoors) <input checked="" type="checkbox"/> 113. Adequate Sinks in Program Space <input checked="" type="checkbox"/> 114. Free Standing/Well-Constructed/Safe Cribs <input checked="" type="checkbox"/> 115. Washable Cots <input checked="" type="checkbox"/> 116. Chairs for Feeding/Stable/Safety Straps/Locking Tray <input checked="" type="checkbox"/> 117. Dev. Appropriate Tables/Chairs/Equipment <input checked="" type="checkbox"/> 118. Refrigerators and Food Prep Facilities <input checked="" type="checkbox"/> 119. Sturdy/Safety Rail/Nonporous/Exclusive Use <input checked="" type="checkbox"/> 120. Washed/Disinfected <input checked="" type="checkbox"/> 121. Disposable Paper Sheets <input checked="" type="checkbox"/> 122. Covered Waste Receptacle <input checked="" type="checkbox"/> 123. Diaper Changing Policy Posted <input checked="" type="checkbox"/> 124. Hand Washing Policy Posted <input checked="" type="checkbox"/> 125. Individual Storage of Personal Items <input checked="" type="checkbox"/> 126. Cribs/Cots Washed/Disinfected <input checked="" type="checkbox"/> 127. Under 12 Months Placed on Back for Sleeping <input checked="" type="checkbox"/> 128. Alternate Sleep Position/Equip-Medical Document Y/N <input checked="" type="checkbox"/> 129. Crib/Bed Used for Infant Sleeping <input checked="" type="checkbox"/> 130. Crib/Bed Free from Observable Hazards <input checked="" type="checkbox"/> 131. Infant Toys Separate/Washed/Disinfected Daily <input checked="" type="checkbox"/> 132. No Toys/Objects Less than 1 1/4" Diameter <input checked="" type="checkbox"/> 133. Plastic Bags/Balloons/Styrofoam Objects Inaccessible <input checked="" type="checkbox"/> 134. Health Consultant/Documentation of Visits <input checked="" type="checkbox"/> 135. Infants Held for Bottles/Individual Attn/Tummy Time <input checked="" type="checkbox"/> 136. Written Statement/Feeding Schedule from Parent <input checked="" type="checkbox"/> 137. Unused Portions of Liquids Discarded <input checked="" type="checkbox"/> 138. Clean Bottles/Disp. Bottles/Approved Bottle Washing <input checked="" type="checkbox"/> 139. Food Served from Dish or Whole Jar Served <input checked="" type="checkbox"/> 140. Bottles Individually Identified w/Child's Name <p>Outdoor Play Space-Under Three:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 141. Play Space Fenced <input checked="" type="checkbox"/> 142. Outdoor Equipment: Dev. Appropriate <p>School Age Children Endorsement 19a-79-11</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 143. Approved Endorsement <input checked="" type="checkbox"/> 144. Activity choices appropriate <input checked="" type="checkbox"/> 145. Ratio: 1 Staff to 10 Children <input checked="" type="checkbox"/> 146. Group Size: Max. 20 Children <input checked="" type="checkbox"/> 147. Education Consultant Appropriate <p>Night Care Endorsement 19a-79-12 (10pm-5am)</p> <ul style="list-style-type: none"> <input type="checkbox"/> 148. Approved Endorsement <input type="checkbox"/> 149. Written Program Plan/Supervision <input type="checkbox"/> 150. Staff Awake/Available <input type="checkbox"/> 151. Cot/Crib/Bedding/Toiletries/Sleep Apparel <input type="checkbox"/> 152. Individual Storage of Personal Items <input type="checkbox"/> 153. Bedding/Sleeping Apparel Laundered Weekly <p>Monitoring of Diabetes 19a-79-13 <i>no child enrolled</i></p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 154. Written Policies/Procedures <input checked="" type="checkbox"/> 155. On Site Staff Trained in First Aid/Glucose Testing <input checked="" type="checkbox"/> 156. Training Current/Documented <input checked="" type="checkbox"/> 157. Supervision of Self Administration <input checked="" type="checkbox"/> 158. Equipment/Supplies: Labeled/Inaccessible <input checked="" type="checkbox"/> 159. Signed Agreement w/Parent Regarding Equipment <input checked="" type="checkbox"/> 160. Materials Discarded Appropriately <input checked="" type="checkbox"/> 161. Authorized Prescriber/Parent Permission <input checked="" type="checkbox"/> 162. Documentation of Test Results/Actions Taken <input checked="" type="checkbox"/> 163. Daily Written Parent Notifications 	
<p>Signature of OEC Representative <i>Kristen Filmontagne</i></p>	<p>Written Corrective Action Plan Due to OEC by: <i>none</i></p>	<p>Signature of Person in Charge <i>Carrie Ridel</i></p>

Print Name: Kristen Filmontagne

Print Name: Carrie Ridel

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bright Path - New Milford License # pending Date: 2/8/23

Observations/Corrections needed:

Infant 113

$25.1 \times 14.8 = 371.48 - 8.2 \times 2.1 \text{ (Food Prep)} = 17.22$
 $371.48 - 17.22 = 354.26 \div 35 = 10.12 \text{ (OK for 8)}$

Infant 112

$25.1 \times 14.8 = 371.48 - 8.2 \times 2.1 \text{ (Food prep)} = 17.22$
 $371.48 - 17.22 = 354.26 \div 35 = 10.12 \text{ (OK for 8)}$

Toddler 111

$25.1 \times 16.5 = 414.15 - 6.5 \times 2.8 \text{ (bathroom)} = 18.2 - 8.2 \times 2.1 \text{ (Food prep)} = 17.22$
 $414.15 - 35.42 = 378.73 / 35 = 10.82 \text{ (OK for 8)}$ $18.2 + 17.22 = 35.42$

Toddler 110

$25.1 \times 16.5 = 414.15 - 6.5 \times 2.6 \text{ (bathroom)} = 16.9 - 8.2 \times 2.1 \text{ (Food prep)} = 17.22$ $16.9 + 17.22 = 34.12$
 $414.15 - 34.12 = 380.03 / 35 = 10.85 \text{ (OK for 8)}$

Toddler 109

$25.1 \times 16.5 = 414.15 - 8.2 \times 2.1 \text{ (Food Prep)} = 17.22 - 6.5 \times 2.8 \text{ (bathroom)} = 18.2$ $17.22 + 18.2 = 35.42$
 $414.15 - 35.42 = 378.73 / 35 = 10.82 \text{ (OK for 8)}$

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: [Signature]
(OEC Representative)

Print Name: Kristi Morgan / A Montanye

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: [Signature]
(Person in Charge)

OEC BY: prior to license

Print Name: Carrie Ridel

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bright Path - New method License # pending Date: 2/17/23

Observations/Corrections needed:

Toddler 108
 $25.1 \times 15.5 = 389.05$ (bathroom) $6.5 \times 2.6 = 16.9$ (Food Prep) $8.2 \times 2.1 = 17.22$ $+ \frac{16.9}{17.22}$
 $389.05 - \frac{16.9}{17.22} 34.12 = 354.93 / 35 = 10.14$ OK for 8

PS 119
 $28.2 \times 36.4 = 1,026.48$ (Food prep) $2.1 \times 5.2 = 10.92$ (bathroom) $9.5 \times 6.4 = 60.8$ $60.8 + 10.92 = 71.72$
 $1026.48 - 71.72 = 954.76 / 35 = 27.27$ OK for 27

PS 118
 $36.4 \times 28 = 1019.2$ (bathroom) $2.8 \times 9.5 = 26.6$ (bathroom) $2.8 \times 9.6 = 26.88$ (Food prep) $5.2 \times 2.1 = 10.92$
 deductions $26.6 + 26.88 + 10.92 = 64.4$
 $1019.2 - 64.4 = 954.8 / 35 = 27.28$ OK for 27

PS 117
 $28.1 \times 36.5 = 1,025.65$ deductions: (Bump out) $.8 \times 4 = .32$ (bathroom) $9.5 \times 6.3 = 59.85$
 Food Prep $2.1 \times 5.1 = 10.71$
 $.32 + 59.85 + 10.71 = 70.88$
 $1,025.65 - 70.88 = 954.77 / 35 = 27.27$ OK for 27

SA 116
 $36.4 \times 28.2 = 1,026.48$ deductions: (bathroom) $9.5 \times 6.3 = 59.85$ (Food Prep) $2.1 \times 5.1 = 10.71$
 (bump out) $.2 \times 4 = .08$ (bump out) $.4 \times 8 = 3.2$ total deductions 74.56
 $1026.48 - 74.56 = 951.92 / 35 = 27.19$ OK for 27

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

Signature: Kashri Morgan / Al Montanye
 (OEC Representative)

Print Name: Kashri Morgan / Al Montanye

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Carrie Ridel
 (Person in Charge)

OEC BY: prior to license

Print Name: Carrie Ridel

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bright Path - New Milford License # Pending Date: 2/8/23

Observations/Corrections needed:

PS 115

$22.3 \times 36.5 = 813.95$ (Bathroom) $- 9.5 \times 2.8 = 26.6$ (Bumpout) $.4 \times 2 = .8$ (Bathroom) $9.5 \times 2.7 = 26.65$
 $813.95 - 64.76 = 749.24 / 35 = 21.78$ $2.1 \times 5.1 = 10.71$ total Deductions = 64.76
OK for 21

PS 114

$28.2 \times 36.5 = 1029.3$
 Deductions: (bumpout) $3.1 \times 4.3 = 15.91$ (Bathroom) $6.4 \times 9.5 = 60.8$
 (Food Prep) $2.1 \times 5.1 = 10.71$
 $1029.3 - 87.42 = 941.88 / 35 = 26.9$ total Deductions = 87.42
OK for 26

Toddler 107

$24.9 \times 15.8 = 393.42$ (Bathroom) $- 34.12$ (Food Prep) $= 359 / 35 = 10.6$ OK for 8
 Deductions: $6.5 \times 2.6 = 16.9$ $8.2 \times 2.1 = 17.22$ $16.9 + 17.22 = 34.12$

Toddler 106

$24.9 \times 15.5 = 385.95$ (Bathroom) $- 34.12$ (Food Prep) $= 351.83 / 35 = 10.05$ OK for 8
 Deductions: $2.6 \times 6.5 = 16.9$ $2.1 \times 8.2 = 17.22$ $16.9 + 17.22 = 34.12$

Toddler 105

$25 \times 15.6 = 390$ (Bathroom) $- 35.42$ (Food Prep) $= 354.58 / 35 = 10.13$ OK for 8
 Deductions: $6.5 \times 2.8 = 18.2$ $2.1 \times 8.2 = 17.22$

Toddler 104

$25 \times 15.6 = 390$ (Bathroom) $- 33.47$ (Food Prep) $= 356.53 / 35 = 10.18$ OK for 8

Deductions: (Food Prep) $8.2 \times 2.1 = 17.22$ Bathroom $2.5 \times 6.5 = 16.25$ $17.22 + 16.25 = 33.47$

Infant

103

$25 \times 14.7 = 367.5$ (Bathroom) $- 19.42$ (Food Prep) $= 348.08 / 35 = 9.94$ OK for 8

Deductions: (Food Prep) $8.2 \times 2.1 = 17.22$ (Bumpout) $1 \times 2.2 = 2.2$ $17.22 \times 2.2 = 19.42$

Infant 102

$14.7 \times 25 = 367.5$ (Bathroom) $- 17.22$ (Food Prep) $= 350.28 / 35 = 9.95$ OK for 8

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: [Signature]
 (OK Representative)

Print Name: Al Montanye / Krism Morgan

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: [Signature]
 (Person in Charge)

OEC BY: prior to license

Print Name: Carrie Ridel

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bright Path - New Milford License # perching Date: 2/8/23

Observations/Corrections needed:

Outdoor spaces

- x1 $25.8 \times 23.0 = 608.88 \div 75 = 8.11$ OK 8
- Zone 2 - $26.1 \times 23.6 = 615.96 \div 75 = 8.21$ OK 8
- Zone 3 - $26 \times 23.7 = 616.2 \div 75 = 8.216$ OK 8
- Zone 4 - $12.5 \times 23.10 + (4 \times 24) + ((23.5 \times 23.4) / 2) = 659.7 \div 75 = 8.796$ OK 8
- Zone 5 - $23.1 \times 26.9 = 621.39 \div 75 = 8.285$ OK 8
- Zone 6 - $27.1 \times 23.1 = 626.01 \div 75 = 8.346$ OK 8
- Zone 7 - $23.1 \times 27 = 623.7 \div 75 = 8.316$ OK 8
- Zone 8 - $23.1 \times 27.7 = 639.87 \div 75 = 8.53$ OK 8
- Zone 9 - $53.8 \times 41.4 + (32.5 \times 7.9) + (28.8 \times 7.9) + (28.7 \times 7.9) + (26.7 \times 7.9) = 3149.25 \div 75 = 41.99$ OK 41
- Zone 10 - $1576 \div 75 = 21.013$ OK 21 per supervisor review -
Square footage used on attached map for measurement.
- Zone 11 - ~~$2264.58 \times 403.58 \div 75$~~
 $54.7 \times 41.4 + (20.6 \times 29.3) + (8.7 \times 33.8) + (7.7 \times 40.4) + (7.9 \times 48.2) = 3854.08 \div 75 = 51.39$ OK 51

Toilets - 20

Total Capacity: 251

Sinks - 49

Under 3 capacity: 96

Adult bathrooms - 2

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Signature: Kristin Morgan / Film Montanye
(OEC Representative)Print Name: Kristin Morgan / Film Montanye

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Carrie Ridel
(Person in Charge)OEC BY: prior to licensePrint Name: Carrie Ridel

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: BrightPath - New Milford License # pending Date: 2/8/23

Observations/Corrections needed:

45 - dramatic play furniture unsecured in preschool +
Senesi age rooms.

Multiple horizontal lines for additional notes.

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

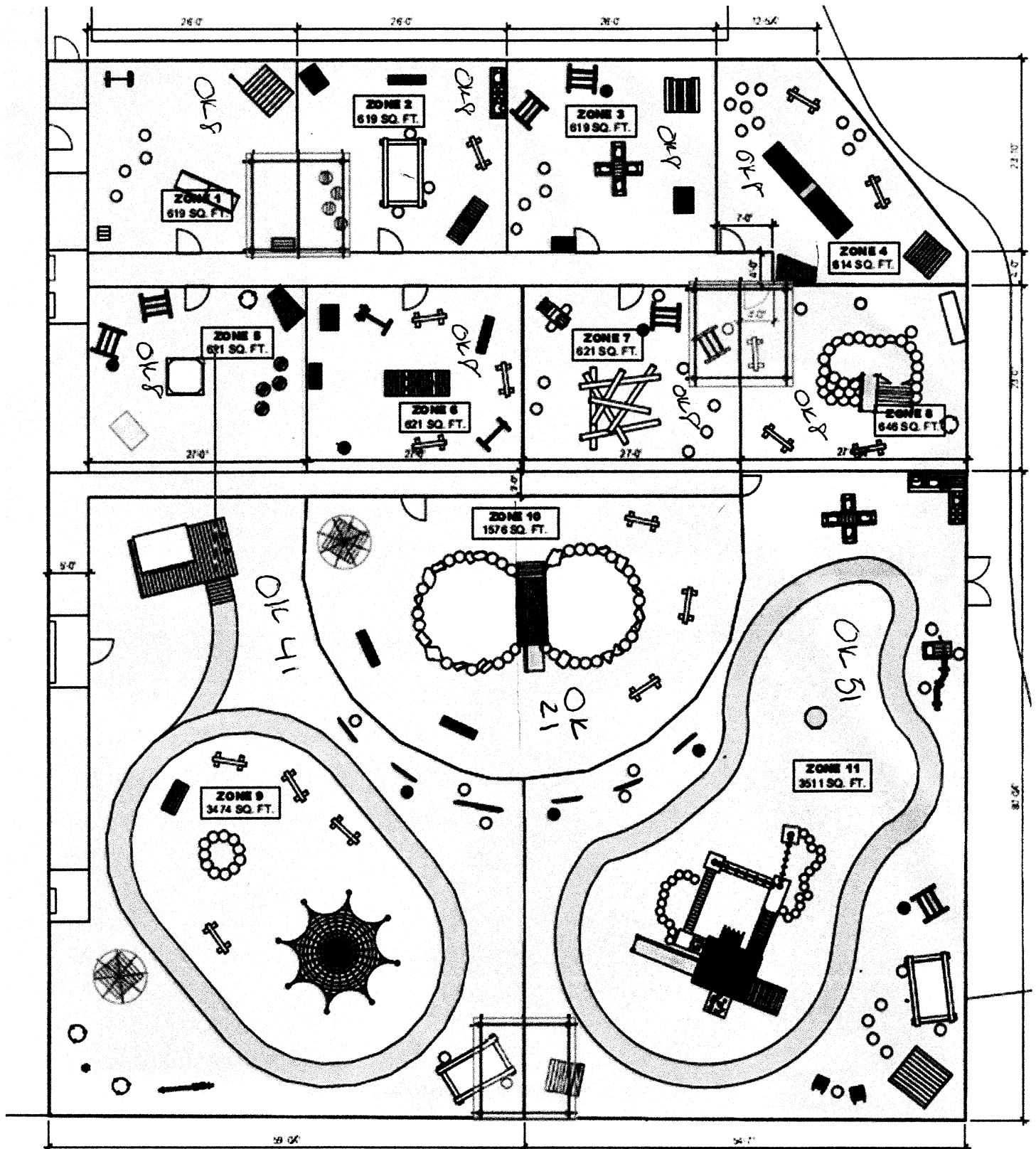
Signature: Kristin Morgan / Felicia Montanye
Kristin (OEC Representative)
Morgan

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Camie Ridel
(Person in Charge)

OEC BY: prior to license

Print: Camie Ridel



Product Guide

User and Maintenance Information

IMPORTANT INFORMATION:

Please save this product guide.

Recommended Use

This unit will inspire the imagination of children from ages 3 and upward. It provides settings for role play where children can act out their perception of the world at work and play.

▲ WARNING

▲ This product is intended for use by children of immature judgment, therefore supervision is required at all times.

▲ CAUTION

▲ For indoor use only. These products are not waterproof.

Assembly

All Woodcrest furniture units come fully assembled.

If your shipment is incomplete, please call Customer Service.

Operations

Play dresser drawers are not removable. If an object falls behind the drawer, it will fall into the drawer below or out the bottom, and can be retrieved by moving the item to the side.

Accessories

F843 Mirror Cover (Fridge and Cupboard only.)

F681 Chalk Board Cover (Fridge and Cupboard only.)

F981 Half Tote (Play Dresser only)

F991 Quarter Tote (Play Dresser only)

Maintenance

Periodically inspect for cracks, breaks, loose parts, missing parts, and/or malfunctions. Remove the product from service when any condition develops that might make operation unsafe.

Cleaning

Wooden Parts: Wipe with a damp cloth and mild detergent. Too much water will harm the finish of the wood. Dry wood components after use.

Chalkboard Cover: Occasionally, use a solution of warm water and a mild household dishwashing detergent. Do not use strong alkaline cleaners.

C361 Stove
C362 Sink
C363 Refrigerator
C364 Cupboard
C365 Washer
C366 Play Dresser

All Clear Plastic Parts and Mirror Covers: Dust with a soft, damp cloth. Wash with dishwashing detergent and plenty of lukewarm water. Use a clean soft cloth, applying only light pressure. Rinse with clear water and dry.

▲ CAUTION

▲ DO NOT USE: Window cleaning sprays, or abrasive cleaners.

Loop fabric on backs: Remove stains with a common household detergent. Stubborn stains may be removed by shampooing with a household upholstery cleaner.

The Curtain is machine washable.

Construction

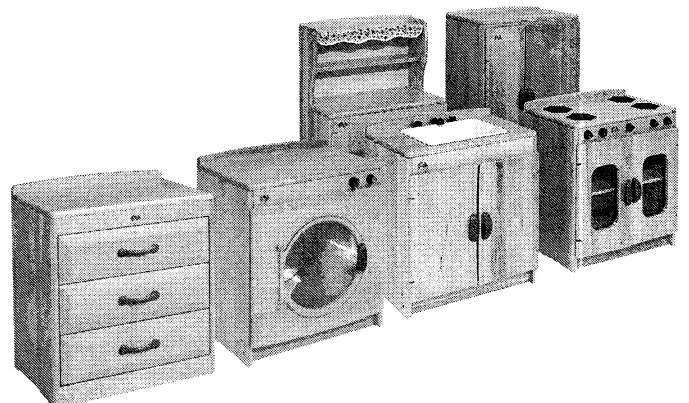
The wooden components are manufactured of durable plywood, solid hardwood, and coated with a clear wood finish. The Backs are nylon loop fabric, laminated to a durable plastic backing. Handles and slides are durable, engineered plastic.

Packaging Recycling

All our packaging is recyclable in two simple categories:

Packaging Materials	Recycling Category
Cardboard boxes and pads, newsprint	corrugated cardboard
Plastic wrap, sheet foam, foam pads	Plastic #4 LDPE

Please help us preserve the earth for the children and recycle at an appropriate facility.



CUSTOMER SERVICE:

United States

PO Box 2

Ulster Park, NY 12487

Office hours: 9-5 EST

Phone (800) 777-4244

Fax (800) 336-5948

(845) 572-3468

www.CommunityPlaythings.com

Sales@CommunityPlaythings.com

