

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

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Kidz Tyme Learning Center LLC   Date: 12/17/22   Time: 12:05

Location Address: 82 2nd St. Hamden, CT 06514   Telephone #: 475-3316125

e-mail address: kidztyme19@gmail.com   License #: 70570   Expiration Date: 9/30/2024

Capacity: 16<sup>u316</sup>   # of Children Present: 13   # of Staff Present: 3

**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: N/A

Purpose of visit: Follow up Ratio

Observations/Corrections needed:

⑤ 19a-79-101(2)<sup>(c)</sup>: Under three endorsement - Ratio - Program failed to maintain proper child to staff ratio of 1: to 4. Observed one teacher with 7 children, with at least one child awake, exceeding the 1 to 4 child ratio.

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: 12/19/2022

Signature: [Signature]  
(OEC Representative)

Print Name: Stephanie Pica

Signature: [Signature]  
(Person in Charge)

Print Name: Kieth Myers