

**CHILD CARE CENTER/GROUP INSPECTION FORM**

INITIAL  UNANNOUNCED  FULL  PARTIAL  FOLLOW UP  LOCATION CHANGE  OTHER

Program Name: <b>Little Angels Workshop</b>	License Number: <b>70609</b>	Date of Inspection: <b>3/19/23</b>	Time of Arrival: <b>10:33</b>
Address: <b>711 New Britain Ave</b>	Expiration Date: <b>4/30/25</b>	Licensed Capacity: <b>16</b>	Under 3 Capacity: <b>8</b>
Town: <b>Hartford, CT 06106</b>	Telephone: <b>860-436-0486</b>	# of children present:	# of staff present:
Operator: <b>Jessica Blake-Wallace</b>	Director: <b>Jessica Blake-Wallace</b>	Head Teacher: <b>Jessica Blake-Wallace</b>	
Email: <b>littleangelsworkshop@gmail.com</b>	Summer Care: <b>Open</b>		
Hours of Operation: <b>7:30am - 5:30pm 7:30-5:00</b>	Instruction Codes: N/A = Not applicable at this time √ = Compliance/No violation found O = Non-compliance/Violation found		
Agnes Served: <b>6 weeks - 5 years</b>	Endorsements: <input checked="" type="checkbox"/> Under Three (6wks - 36m) <input checked="" type="checkbox"/> Preschool (3y - 5y) <input type="checkbox"/> School Age (5y & up) <input type="checkbox"/> Night Care (6wks & up)		

**Licensure Procedures 19a-79-2a**

1. Local Health Date: **5/13/22**

**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: **4/14/22**
- 10. OEC Complaint Procedure
- 11. Food Service Certificate Date: **---**
- 12. Menus
- 13. Emergency Plans
- 14. No Smoking Signs
- 15. Radon Test (Y/N) Date: **4/2/21** Results: **0.7 pCi/L**
- 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 type="checkbox"/>	<input type="checkbox"/>
Health	<input type="checkbox"/>	<input type="checkbox"/>
Social Service	<input type="checkbox"/>	<input type="checkbox"/>
Dental	<input type="checkbox"/>	<input type="checkbox"/>
Dietitian	<input type="checkbox"/>	<input type="checkbox"/>

27. Logs/Visits Documented

Swimming: (Y/N)

28. Non-Swimmers Identified

Signature of OEC Representative: *[Signature]*

Written Corrective Action Plan Due to OEC by: **3/23/23**

Signature of Person in Charge: *[Signature]*

Print name: **Johanne Dalo**

Print name: **Jessica Blake-Wallace**

**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: **3/25/22**  
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

Post for 30  
Operating  
Days

### CHILD CARE CENTER/GROUP INSPECTION FORM

Program Name: <u>Little Angels Workshop</u>	License Number: <u>70609</u>	Date of Inspection: <u>3/9/23</u>
---	------------------------------	-----------------------------------

**Physical Plant continued:**

- 67. Water Temperature 60°-115°
- 68. Portable Space Heaters
- 69. Walls/Ceilings/Floors/Rugs: Clean/Good Repair
- 70. Rugs Secure
- 71. Hot Water/Steam Pipes Protected
- 72. Working Phone on Each Level
- 73. Emergency Numbers Posted
- 74. Adequate Lighting: 50/30 Candle Feet
- 75. Light Fixtures Shielded/Shatter Proof
- 76. Potentially Hazardous Substances Locked
- 77. Garbage/Rubbish Disposed Daily
- 78. Stairs Protected/Good Repair/Handrails
- 79. Pets: Maintained/Care Plan (Y/N)
- 80. Operable CO Detector on Each Level (Y/N)
- 81. Program Space/Adequate Sq. Ft. Per Child
- 82. Equipment: Good Repair/Safe/Non-toxic
- 83. Cots Stored/Maintained/Adequate Number
- 84. Developmentally Appropriate Equipment/Materials
- 85. Hot Tubs/Spas/Saunas: Locked/Inaccessible (Y/N)
- 86. No Weapons/No Facsimile of a Firearm on Premise

**Outdoor Space**

- 87. Outdoor Space Adequate Sq. Ft. Per Child
- 88. Impact Absorbing Material under Equipment
- 89. Playground Free from Hazards
- 90. Peeling Paint (Y/N) Sample Taken (Y/N)
- 92. Equipment Anchored/Safely Arranged
- 93. Outdoor Play Area Protected/Fenced
- 94. Drinking Water Available/Accessible

**Educational Requirements 19a-79-8a**

- 95. Written Plan for Daily Program Available to Parents/Staff
- 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

**Administration of Medications 19a-79-9a**

- 97. Written Policies/Procedures
- 98. Training Outline on file  
Nonprescription Topical Medications
- 99. Administration/Parent Permission/MAR
- 100. Labeling/Storage  
Oral/Topical/Inhalant/Injectable Medications
- 101. Med Trained Staff/Certificates
- 102. Authorized Prescriber/Parent Permission/MAR
- 103. Labeling/Storage
- 104. Unused/Expired Meds Returned/Disposed
- Self-Administration
- 105. Authorized Prescriber/Parent Permission/MAR
- 106. Labeling/Storage
- 107. Approved Petition For Special Med Authorization

**Under Three Endorsement 19a-79-10**

- 109. Approved Endorsement
- 110. Ratio: 1 Staff to 4 Children
- 111. Group Size no Larger than 8
- 112. Physical Barriers/Groups of 8 (Indoors/Outdoors)
- 113. Adequate Sinks in Program Space
- 114. Free Standing/Well-Constructed/Safe Cribs
- 115. Washable Cots
- 116. Chairs for Feeding/Stable/Safety Straps/Locking Tray
- 117. Dev. Appropriate Tables/Chairs/Equipment
- 118. Refrigerators and Food Prep Facilities
- 119. Sturdy/Safety Rail/Nonporous/Exclusive Use
- 120. Washed/Disinfected
- 121. Disposable Paper Sheets
- 122. Covered Waste Receptacle
- 123. Diaper Changing Policy Posted
- 124. Hand Washing Policy Posted
- 125. Individual Storage of Personal Items
- 126. Cribs/Cots Washed/Disinfected
- 127. Under 12 Months Placed on Back for Sleeping
- 128. Alternate Sleep Position/Equip-Medical Document Y/N
- 129. Crib/Bed Used for Infant Sleeping
- 130. Crib/Bed Free from Observable Hazards
- 131. Infant Toys Separate/Washed/Disinfected Daily
- 132. No Toys/Objects Less than 1 1/4" Diameter
- 133. Plastic Bags/Balloons/Styrofoam Objects Inaccessible
- 134. Health Consultant/Documentation of Visits
- 135. Infants Held for Bottles/Individual Attn/Tummy Time
- 136. Written Statement/Feeding Schedule from Parent
- 137. Unused Portions of Liquids Discarded
- 138. Clean Bottles/Disp. Bottles/Approved Bottle Washing
- 139. Food Served from Dish or Whole Jar Served
- 140. Bottles Individually Identified w/Child's Name

**Outdoor Play Space-Under Three:**

- 141. Play Space Fenced
- 142. Outdoor Equipment: Dev. Appropriate

**School Age Children Endorsement 19a-79-11**


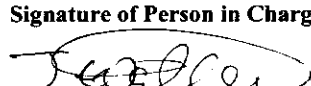
- 143. Approved Endorsement
- 144. Activity choices appropriate
- 145. Ratio: 1 Staff to 10 Children
- 146. Group Size: Max. 20 Children
- 147. Education Consultant Appropriate

**Night Care Endorsement 19a-79-12 (10pm-5am)**

- 148. Approved Endorsement
- 149. Written Program Plan/Supervision
- 150. Staff Awake/Available
- 151. Cot/Crib/Bedding/Toiletries/Sleep Apparel
- 152. Individual Storage of Personal Items
- 153. Bedding/Sleeping Apparel Laundered Weekly

**Monitoring of Diabetes 19a-79-13** No Children enrolled

- 154. Written Policies/Procedures
- 155. On Site Staff Trained in First Aid/Glucose Testing
- 156. Training Current/Documented
- 157. Supervision of Self Administration
- 158. Equipment/Supplies: Labeled/Inaccessible
- 159. Signed Agreement w/Parent Regarding Equipment
- 160. Materials Discarded Appropriately
- 161. Authorized Prescriber/Parent Permission
- 162. Documentation of Test Results/Actions Taken
- 163. Daily Written Parent Notifications

Signature of OEC Representative 	Written Corrective Action Plan Due to OEC by: <u>3/23/23</u>	Signature of Person in Charge 
---	---	--

Print Name: Johanne Dalo

Print Name: Jorissa Blake-Wallace

SUPPLEMENTAL REPORT OF INSPECTION

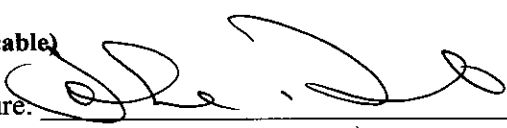
Name of Program/Provider: Little Angels Workshop License # 70609 Date: 3/9/23

Observations/Corrections needed:

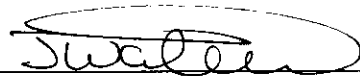
- 19a-79-4a(c)(D): Supervision: Observed child sleeping in pack & play, half of pack & play is covered with tray/changing tray blocking the staff view of child
- #2 No documentation of new staff policy training for staff was observed.
- #16 Observed 1 staff health ~~rec~~ records not current and 1 staff without statement of good health.
- #18b Observed 1 staff in need of background checks and staff gives direct care.
- #26 Observed 4 agreements that are not current (Education-Social Service, and Dental Consultants)
- #44 Observed incomplete First Aid kit - missing tweezers, appropriate size band-aids, 2 cold packs, CPR barrier, and current First Aid Manual
- #67 Water tested at 160.2 in under those classroom and 131.7 in preschool classroom
- #76 Observed bleach solution accessible to children in cabinet and liquid spray not lock in staff bathroom.
- #89 Fence on ground and not secured causing tripping hazard and fence does not act as a barrier to lead point on church windows.

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:   
(OEC Representative)  
Johanne Salo

CORRECTIVE PLAN SHALL BE RETURNED TO  
OEC BY: 3/23/23

Signature:   
(Person in Charge)

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Little Angels Workshop License # 70609 Date: 3/9/23

Observations/Corrections needed:

- #98 No training outline was observed
- #100 observed diaper cream accessible to children
- #110 throughout the day, observed staff leaving classroom to get items leaving 1 staff with 6 children (3 children under 3)

Discussion

- > 1 exposed diaper cream form.
- > 1 child without enrollment date on enrollment form.
- > 1 child without documentation of behavior management techniques discussed with parents.
- > 2 staff missing course completion card for First Aid CPR Certification.

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: \_\_\_\_\_

(OEC Representative)

Johanne Dalo

CORRECTIVE PLAN SHALL BE RETURNED TO

OEC BY: 3/23/23

Signature: \_\_\_\_\_

(Person in Charge)

[Signature]