

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Surreybrook Date: 3/22/23 Time: 10:40

Location Address: 234 Amity Rd Bethany Telephone #: 203 393-2445

e-mail address: Cheryl@surreybrook.com License #: 16559 Expiration Date: 11/30/24

Capacity: 92 # of Children Present: 83 # of Staff Present: 17

**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: Follow Up

Observations/Corrections needed:

(18b) Background Checks - not in compliance 1 staff working
with children did not have completed background check. other
staff currently not working until background check completed

(111) observed group of 8 toddlers outside of fenced in playground
(taking a walk)
per staff they were walking - however other preschool classes
were present in unfenced area - exceeding the group size of 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.

CORRECTIVE PLAN SHALL BE RETURNED TO
OEC BY: 4/5/2023

Signature: Jaime Fortin
(OEC Representative)

Signature: Cheryl Kase
(Person in Charge)