

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

**SUPPLEMENTAL REPORT OF INSPECTION**

Name of Program/Provider: Bright Path - Cheshire Date: 5/18/23 Time: 1pm

Location Address: 1430 Highland Ave. Cheshire Telephone #: 203-651-7407

e-mail address: R.wilder@brightpathkids.com License #: 70369 Expiration Date: 8/31/25

Capacity: 270/96 # of Children Present: 203 # of Staff Present: 38

**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: 3-month Partial (2023-111)

Observations/Corrections needed:

PIC Roseann Wilder - Director

(NS) 19a-79-10(g)(1) - under Three Endorsement - safe sleep - Per Director, Staff have been adhering to safe sleep practices at the Program

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: n/a

Signature: Valecia Williams  
(OEC Representative)  
Print Name: Valecia Williams  
Signature: Roseann Wilder  
(Person in Charge)  
Print Name: Roseann Wilder