

CHILD CARE CENTER/GROUP INSPECTION FORM

INITIAL UNANNOUNCED FULL/PARTIAL FOLLOW UP LOCATION CHANGE OTHER

Program Name: Bright + Early Guilford	License Number: pending	Date of Inspection: 5/19/23 Time of Arrival: 8:30am
Address: 447 Boston St	Expiration Date: pending	Licensed Capacity: 56 Under 3 Capacity: 23
Town: Guilford 06437	Telephone: 203-453-0261	# of children present: 18 # of staff present: 8+
Operator: Bright + Early Guilford LLC	Director: Anarica Deshefy	
Email: aprita.brightandearly.com	Head Teacher: Andrea Deshefy	
Hours of Operation: 7:00am - 5:30pm	Summer Care: open	
Ages Served: 6wks - 12yrs	Instruction Codes: N/A = Not applicable at this time √ = Compliance/No violation found O = Non-compliance/Violation found	
Endorsements: <input checked="" 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: **4/27/23**

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: **4/27/23**
- 10. OEC Complaint Procedure
- 11. Food Service Certificate Date: **—**
- 12. Menus
- 13. Emergency Plans
- 14. No Smoking Signs
- 15. Radon Test (Y/N) Date: **4/24/23** Results: **2.2**
- 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 type="checkbox"/>	<input 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: **3/18/23**
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: Fil Montanye	Written Corrective Action Plan Due to OEC by: prior to license approval	Signature of Person in Charge: Kathleen Fancione
Print name: Fil Montanye		Print name: Kathleen Fancione

CHILD CARE CENTER/GROUP INSPECTION FORM

<p>Program Name: <i>Bright+Early Guilford</i></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 <input checked="" type="checkbox"/> 107. Approved Petition For Special Med Authorization 	<p>License Number: <i>pending</i></p> <p>Date of Inspection: <i>5/19/23</i></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 checked="" type="checkbox"/> 148. Approved Endorsement <input checked="" type="checkbox"/> 149. Written Program Plan/Supervision <input checked="" type="checkbox"/> 150. Staff Awake/Available <input checked="" type="checkbox"/> 151. Cot/Crib/Bedding/Toiletries/Sleep Apparel <input checked="" type="checkbox"/> 152. Individual Storage of Personal Items <input checked="" 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>Arlene Montanye</i></p> <p>Print Name: <i>Arlene Montanye</i></p>	<p>Written Corrective Action Plan Due to OEC by: <i>prior to license approval</i></p>	<p>Signature of Person in Charge <i>Kathleen Pancone</i></p> <p>Print Name: <i>Kathleen Pancone</i></p>

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bright and Early Guilford License # pending Date: 5/19/23

Observations/Corrections needed:

- #45 - microwave not secure in between preschool + young toddlers
- #69 - observed walls behind childrens toilets not clean in main building
 - observed wall ^{+ floor} behind bathroom door in main building not clean
 - observed wall behind garbage in staff bathroom not in good repair (main building)
- #76 - observed floor clearer in between young toddlers and toddler main/exit lobby with doors not locked
- #88 - 8 inches of impact absorbing material not observed by swings in preschool playground and toddler playground by climber + slider ^(FM)
- #89 - observed top of post on gate not in good repair on young toddler playground (sharp)
 - observed 2 cozy coupes not in good repair
 - observed gray and green substance on fence throughout
 - observed gray thick substance on play log cabin on preschool playground
- #93 - observed fence on parking lot side of playgrounds (preschool + young toddlers (range 3ft 7 inches - 3ft 6 inches))

Approvals

Fire Marshal ✓	Building ✓	<u>Toilets</u>	<u>Sinks</u>
Local health ✓		4 children	4 children +
Zoning ✓		2 staff	2 staff

Additional Violations ^{FM}

#82 - rust observed on swing chains (3)

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: Fil Montanye

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: [Signature]
(Person in Charge)

OEC BY: prior to license

Print Name: Kathleen Pancine

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bright + Early Guilford License # pending Date: 5/19/23

Observations/Corrections needed:

Pre K Room

$$\begin{array}{r}
 + 22.4 \times 18.9 = 423.36 \\
 9 \times 4.2 \text{ (writing center area)} = 37.8 \\
 12.5 \times 9 \text{ (Fish area)} = 112.5 \\
 \hline
 573.66 / 30 = 19.12
 \end{array}$$

Infant Room

$$\begin{array}{r}
 16.5 \times 14.4 = 236.6 \text{ deduction (shelf)} \\
 1.3 \times 2.4 = 3.12 \\
 236.6 - 3.12 = 233.48 / 30 = 7.81 \text{ (OK 7)}
 \end{array}$$

Preschool

$$\begin{array}{r}
 26.1 \times 17.2 = 448.92 \quad \text{deductions} - 4.7 \times 2.1 = 9.87 \\
 448.92 + 4.56 = 453.48 \quad \text{add } 1.2 \times 3.8 = 4.56 \\
 453.48 / 30 = 15.116 = 15 \text{ OK}
 \end{array}$$

Young Toddlers

$$\begin{array}{r}
 20.7 \times 17.1 = 353.97 \quad \text{addition } 1.2 \times 3.8 = 5 \\
 353.97 + 5 = 358.97 \quad \text{deductions: } 3.6 \times 1.8 = 6.48 \text{ (counter)} \\
 358.97 - 46.27 = 312.7 / 30 \\
 312.7 / 30 = 10.42 \text{ (not to exceed 8)} \\
 2.7 \times 11.4 \text{ (wall)} = 30.78 \\
 1.5 \times 6 \text{ (bump out)} = 9 \\
 46.26
 \end{array}$$

Toddlers

$$\begin{array}{r}
 18.7 \times 17.3 = 323.51 \\
 - 3.9 \\
 \hline
 319.61 / 30 = 10.65 \text{ (not to exceed 8)}
 \end{array}$$

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Signature: Fil Montanye
(OEC Representative)

Print: Fil Montanye

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: [Signature]
(Person in Charge)

OEC BY: prior to license approval

Print: Kathleen Pancione

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bright + Early Guilford License # pending Date: 5/19/23

Observations/Corrections needed:

Preschool playground

$$91.4 \times 44.5 = 4,067.3$$

$$64.2 \times 44.5 = 2,856.9$$

$$\begin{array}{r} 6924.2 \\ - 84 \\ \hline \end{array}$$

$$6,840.20 / 75 = 91.20 \text{ (exceeds max)}$$

deduction (back corner)

$$15 \times 5.6 = 84$$

Toddler Playground

$$36.8 \times 32.1 = 1,155.6 / 75 = 15.40 \text{ (not to exceed 8)}$$

Young toddlers Playground

$$22.5 \times 40.3 = 906.75$$

$$15.1 \times 42 = 634.2 / 2 = 317.1$$

$$906.75 + 317.1 = 1,223.85 / 75 = 16.31 \text{ (not to exceed 8)}$$

Capacity

$$\text{max capacity} = 56$$

$$\text{under 3 capacity} = 23$$

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Signature: [Signature]
(OEC Representative)

Print Name: Fil Montanye

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Signature: [Signature]
(Person in Charge)

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Print Name: Kathleen Pansine