

LICENSING CORRECTIVE ACTION PLAN (CAP)

NAME OF PROVIDER/OPERATOR: Danbury Public School Readiness Program 2 LICENSE #: DCCC.70683
 LOCATION ADDRESS: 49 Osborne Street TOWN: Danbury INSPECTION REPORT DATE: 5/1/2023

CAPs submitted that do not conform to the instructions provided on the back will not be accepted. Read the instructions carefully before completing this form. In accordance with this agency's policy, your CAP will be posted online and made accessible to parents and others seeking information pertaining to your child care program.

Inspection Report Item # or Regulation	Corrective Action Taken	Exact Date Corrected	Check if Accepted (OEC Use Only)
12	Updated lunch menu	5/1/2023	
15a	Developmental Milestones are posted	5/1/2023	
16	2 Staff physicals are current	5/12/2023	
17	All professional development hours are documented in a professional development log	5/10/2023	
27	Dental and Dietician consultant logs are completed and filed.	5/8/2023	

Based on the inspection report, the licensee was cited for failure to comply with the regulations listed above. I hereby declare that the licensee has complied with the regulation(s) in the above manner. I understand the Agency reserves the right to re-inspect the above program to verify compliance with the regulations and to request a meeting with the licensee when necessary to review patterns of non-compliance. Understanding the penalties for false statements, I attest that the information I submit on this form is true.

Providers/Operators are required by regulations and statutes to be in compliance at all times.

By checking this box, and typing my name below, I am electronically signing my CAP.

Signed: *W. Wolf* 5/15/2023
(Provider/Operator) (Date)

RETURN TO: **Kristi Morgan**
 Connecticut Office of Early Childhood
 450 Columbus Blvd, Suite 302
 Hartford, CT 06103 Fax: 860-326-0552

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32	NOTE: Your response should include a clear concise explanation of the changes the program has made to correct the violation to ensure compliance. Parent address are in there files.	5/5/2023	
37	Parent provided a copy of TB screening test that stated negative. Physical was updated.	5/1/2023	
60	All outlets are covered with plug covers.	5/1/2023	
76	All cabinets are kept locked at all times.	5/1/2023	
98	The medication administration training outline in file.	5/8/2023	
102	All information needed for administration form is completed with signatures, and labeled properly.	5/1/2/2023	
38	Care plan signed by staff and parents. All care plan are with medication in a locked cabinet.	5/1/2/2023	
18b&19-79a-3a(a)	Staff is not working until background check is received and properly log with inthe BCIS system. Staff is now cleared as of 5/17/2023	5/1/2/2023	

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Signed: 5/15/2023

(Date)

Printed Name: Ingrid Norfleet