

CHILD CARE CENTER/GROUP INSPECTION FORM

INITIAL UNANNOUNCED FULL PARTIAL FOLLOW UP LOCATION CHANGE OTHER

Program Name: The First Academy	License Number: 70269	Date of Inspection: 6/12/23	Time of Arrival: 8:13
Address: 1151 Blue Hill Ave	Expiration Date: 10/31/23	Licensed Capacity: 76	Under 3 Capacity: 32
Town: Bloomfield Ct 06002	Telephone: 860-206-1907	# of children present: 40	# of staff present: 10
Operator: The First Baptist Church of Hartford Inc	Director: Elith Howard	Head Teacher: Amanda Edwards / Bryenna Kayla Jones / Madeline Graham	
Email: thefirstacademy2016@gmail.com	Summer Care: Open	Instruction Codes: N/A = Not applicable at this time ✓ = Compliance/No violation found O = Non-compliance/Violation found	
Hours of Operation: 7:30 - 5:00	Ages Served: 6 weeks - 12 years		
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: **9/19/21**

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: **3/21/22**

10. OEC Complaint Procedure

11. Food Service Certificate Date: **exp 8/31/23**

12. Menus

13. Emergency Plans

14. No Smoking Signs

15. Radon Test (Y/N) Date: **3/10/15** Results: **0.3 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	✓	✓
Health	✓	
Social Service	○	
Dental	✓	
Dietitian	✓	

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: **9/15/21**

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: *[Signature]* Written Corrective Action Plan Due to OEC by: **6/26/23** Signature of Person in Charge: *[Signature]*

Print name: **Johanne Dato** Print name: **Madeline Graham**

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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>6/26/23</u>	Signature of Person in Charge
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Print Name: Johanne Dalo

Print Name: Madeline Graham

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: The First Academy License # 70269 Date: 6/12/23

Observations/Corrections needed:

- #8 License not posted in a conspicuous place.
- #9 Fire Marshal not current and not posted in conspicuous place.
- #10 Not posted in a conspicuous place.
- #11 Food License not posted in a conspicuous place.
- #13 Not posted in a conspicuous place.
- #15 Not posted in a conspicuous place.
- #15a Not posted in a conspicuous place.
- #16 observed 1 staff without a health record^{+TB} and 1 staff without current health record.
- #26 observed Social Service agreement not current (7/29/21)
- #27 Log not current. Last annual review of policies and education program by Social Service consultant dated 7/29/21.
- #37 observed 1 child health records not current.
- #45 observed 1 tall white shelf not secured (PK), 7 cubbies not secured (hallway - Two's - Two's A - Two's B), Porous surface behind changing table (infant), Porous surface behind door in children's bathroom, dramatic play sink not secured (Two's), sink in PK not draining.
- #69 observed 7 stained ceiling tiles (Hallway - Staff Bath, PK, T1)
- #76 observed 3 disinfectant sprays not locked and accessible to children (Bathroom Two's A/B)

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]

Print Name: Johanne Dato
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: [Signature]

OEC BY: 6/26/23

Print Name: Madeline Graham
(Person in Charge)

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: The First Academy License # 702169 Date: 6/12/23

Observations/Corrections needed:


- #88 No documentation of impact absorbing material on site for ~~padding~~ poured surface.
- #99 Observed incomplete form and scheduling not followed (each diaper change - last MAR date 5/18/23)
- #100 Observed diaper cream accessible to children (infant - two's A)
- #109 Observed 4 medications for 2 children on site, meds were not returned to parents.
- #113 Observed bids and paint brush handwashing sink (infant)
- #119 Observed 2 mopped mats on changing table (two's - Two's A)

DISCUSSION

- 1 room not being used, Program needs to maintain compliance at all times.
- 1 outlet not covered.
- Incomplete diaper changing policies (missing washing prior by child-staff)
- Age for climber

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Signature: Print Name: Johanne Dabo

(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO

OEC BY: 6/26/23Signature: Print Name: Madeline Graham

(Person in Charge)