

Initial Unannounced Full/Partial Follow-up Location Change Investigation Other C/O

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Cadence Academy Preschool of Farmington Date: 6/29/23 Time: 1:45 pm

Location Address: 3 EAST New Drive Farmington, CT Telephone #: 860-677-5878

e-mail address: Director, Farmington @ Cadence - Academy License #: 70409 Expiration Date: 5/31/26

Capacity: 122/48 # of Children Present: 60 ^{com} 60 # of Staff Present: 11

Consent to Inspect Family Child Care Home	<i>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 _____</i>
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Purpose of visit: Consent order - NCAP

Observations/Corrections needed:

Pic Allison Mulh - Director

(OK) Condition # 1 - a) Program contracted w/ an agency approved ed-consultant
b) Three hours of mandatory training for supervision + injury prevention
completed on 4/17/23. new staff also received training on such topic as well

(OK) Condition # 2 - all new staff received/successfully completed the
Child Care Education Institute Training

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/s

Signature: Valecia Williams
(OEC Representative)

Print Name: Valecia Williams

Signature: AMulh
(Person in Charge)

Print Name: Allison Mulh