

Initial Unannounced Full/Partial Follow-up Location Change Investigation Other 1st consent order visit

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: YWCA of New Britain Childcare Ctr Date: 3-20-23 Time: 9:45

Location Address: 19 Franklin Sq., New Britain Telephone #: 860-225-4681

e-mail address: g.sousa@ywcaneubritain.org License #: 13501 Expiration Date: 4-30-26

Capacity: 428 # of Children Present: 132 # of Staff Present: 27

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: 1st consent order visit

Observations/Corrections needed:

#8 - Center is contracted with educational consultant Rhonda Knight effective 10-28-22. Training on managing behaviors was conducted 11-18-22. Observed quarterly visits and written evaluations with recommendations and operator implementation of recommendations.

#9 - Observed education consultant review/revisions of operators written policies pertaining to supervision. Observed education consultant bi-monthly visits to observe supervision in classrooms and transitions. Observed written verification of visits. The first visit was 1-6-23. Observed written evaluation with recommendations and timelines.

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] Kerry Eddy
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: _____

Signature: [Signature]
(Person in Charge)
Anne Sousa

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: YWCA of New Britain Child License # 13507 Date: 3-20-23
care car

Observations/Corrections needed:

#9 cont. - for improvement observed documentation of implementation of recommendations. observed documentation on site for agency review.
#10. observed email documentation that consent order was given to education consultant on 10-~~25~~²⁶-22
KE

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Signature: [Signature]
(OEC Representative)

Kenn Eddy

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: [Signature]
(Person in Charge)

OEC BY: [Signature]

Anne Sousa