

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: BrightPath-Windsor Date: 8/1/23 Time: 8:55

Location Address: 555 Day Hill Rd, Windsor Telephone #: (800)580-5280

e-mail address: cmozzicato@brightpathkids.com License #: 16517 Expiration Date: 11/3/26

Capacity: 184/104 # of Children Present: 55 (34) # of Staff Present: 16

Consent to Inspect Family Child Care Home 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 n/a

Purpose of visit: Self Report Case 2023-6660

Observations/Corrections needed:

(P) 19a-79-3a(a) - Administration - Ensuring the health and safety of children

(S) 19a-79-10(c)(2) - Under three endorsement - Ratio - observed 9 toddlers with 2 staff in Toddler 1 classroom

(S) 19a-79-10(c)(3) - Under three endorsement - Group size - observed group size exceeding 8 when Toddler 1 had group of 9 during walk-through

(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: 8/15/23

Signature: Erin Wraight
(OEC Representative)

Print Name: Erin Wraight

Signature: Heather Martin
(Person in Charge)

Print Name: Heather Martin