

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Manchester Early Learning Center @ Preschool Building Date: 8/18/2023 Time: 8:25AM

Location Address: 80 Waddell Rd. Manchester, CT. 06040 Telephone #: 860-647-9659

e-mail address: john@melearning.org License #: 15714 Expiration Date: 1/31/2020

Capacity: 98 # of Children Present: 34 # of Staff Present: 12+

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>
--	---

Purpose of visit: Complaint investigation

Observations/Corrections needed:

S 19a-79-3a(d)(5)(B)(C): Program staff failed to follow their policy on supervision when a child was left alone unsupervised in the cozy corner while staff and children went outside. Video footage shows child was alone approximately 45 mins without staff present

S 19a-79-4a(4)(A): Program staff failed to maintain ratio of 1 staff for every 10 children when a child was left unsupervised in classroom for approximately 45 mins.

NS 19a-79-3a(b)(3)(A): Program staff have been walking on tone in classroom but denies staff are yelling at children. Staff use triangle or whistle to get child's attention.

NS 19a-79-4a(4)(A): Program staff of classroom deny yelling at children

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: 9/1/2023

Signature: [Signature]
(OEC Representative)
Print Name: BUDGET L. MAXWELL
Signature: [Signature]
(Person in Charge)
Print Name: John Laper