

Connecticut Office of Early Childhood
450 Columbus Boulevard, Suite 302 Hartford, CT 06103
Phone (800)-282-6063 Fax (860)-326-0552

CHILD CARE CENTER/GROUP INSPECTION FORM

INITIAL ☒ UNANNOUNCED ☒ FULL/PARTIAL ☐ FOLLOW UP ☐ LOCATION CHANGE ☐ OTHER

1 Learning Studio	License Number: 13937	Date of Inspection: 7/26/23	Time of Arrival:
1 Thompson Place	Expiration Date: 12-31-25	Licensed Capacity: 53	Under 3 Capacity:
Derby, CT - 06418	Telephone: (783) 735-6605	# of children present: 17	# of staff present:
The Learning Studio Inc.	Director: Amanda White	Head Teacher: Nicole Clapes and Amanda	
learningstudio1@yahoo.com	Summer Care: Yes	Instruction Codes: N/A = Not applicable at this time	
M-F 730 am - 530 pm		✓ = Compliance/No violation found O = Non-compliance/Violation	
Served: 6 weeks - 10 years		☒ School Age (5y & up) ☐ Night Care (6wks & up)	
Assessments: ☐ Under Three (6wks - 36m) ☒ Preschool (3y - 5y)			

Insurance Procedures 19a-79-2a
☒ 1. Local Health Date: 2.1.22

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
Not Posted: Conspicuous/Accessible
☒ 8. License
☒ 9. Current Fire Marshal Certificate Date: 2.27.23
☒ 10. OEC Complaint Procedure
☒ 11. Food Service Certificate Date:
☒ 12. Menus
☒ 13. Emergency Plans
☒ 14. No Smoking Signs
☒ 15. Radon Test (Y/N) Date: 12.5.15 Results: 1.2 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

Signature of OEC Representative:

Written Corrective Action Plan Due to OEC by: 8.9.23

Signature of Person in Charge:

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 Gr
☒ 41. Proper Refrigeration
☒ 42. Kitchen Separated
☒ 43. Hand Washing Before Eating/Food Handlin
☒ 44. First Aid Kit(s): Indoor/Outdoor/Field Trip

Physical Plant 19a-79-7a

- ☒ 45. License Premise: Clean/Good Repair/Hazal
☒ 48. Sanitary Drinking Fountains/Disposable Cu
 Water Supply: Public/Well
☒ 49. Lead Water Test Date: 1.19.22
 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 P
☒ 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/Disinfe
☒ 64. Hand Washing After Toileting: Staff/Child
☒ 65. Ventilation in Toilet Room
☒ 66. Air Temp 65°, Thermometer Affixed

CHILD CARE CENTER/GROUP INSPECTION FORM

Program Name:

Learning Studio

License Number:

13937

Date of

Inspection:

7/26/23

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

- ☒ 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

L. K. Roberts

Written Corrective Action Plan
Due to OEC by:

8.9.23

Signature of Person in Charge

Nicole Clapes

Print Name:

L. K. Roberts

Print Name:

Nicole Clapes

SUPPLEMENTAL REPORT OF INSPECTION

PAGE 3

Name of Program/Provider: Learning Studio License # 13937 Date: 7.26.23

Observations/Corrections needed:

- 45- Red Chair in play room torn, exposing foam, refrigerator temperature in infant room measured 52°F, trash can lid in preK 4 rusty and not clean
- 74- Measured 35 foot candles in preschool close work areas
- 89- entrapment hazard at black top in corner of fence behind riding toys, rusty drain cover with curled end with sharp edges.
- 140- 3 bottles not labeled in infant room
- 101- No one current in injectable training

Discussed: No consent order or NCAP violations
Consultants documenting policy review on contract not log except health.

C4K provider emergency plans, do not meet federal requirements as observed at this visit. Provided sample from OEC website program will revise to meet requirements.
First aid guide printed at visit

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:

A. R. Roberts

Print Name:

Terri R. Roberts
(OEC Representative)

Signature:

Nicole Clapes

Print Name:

Nicole Clapes
(Person in Charge)

CORRECTIVE PLAN SHALL BE RETURNED TO

OEC BY:

8.9.23