

2023-942

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Kids Korner @ MacDonagh Date: 10/4/23 Time: 3:30pm

Location Address: 66 Spring Street Middletown CT 06457 Telephone #: 860-343-6217

e-mail address: E.Hernandez@midycct.org License #: 15251 Expiration Date: 2/28/24

Capacity: 50/6 # of Children Present: 0 # of Staff Present: 39

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 _____

Purpose of visit: Complaint/Investigation 2023-942 - Self Report

Observations/Corrections needed:

Pic Erin Hernandez - Director
(NS) 19a-79-3a(b)(7) - Administration - Annual training/updates
(S) 19a-79-4a(c) 4(D) - Staffing - Supervision - Staff did not assure the supervision of the children at all times while at the program when a child was able to leave the program area, alone, w/out supervision for approx 2 minutes. Staff did not adhere to the program's supervision policy when staff did not position themselves so that all activity in room can be seen.

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]
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 10/19/23

Signature: [Signature]
(Person in Charge)
+ Erin Hernandez