

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: TVCCA Little Learners New London Date: 6.13.23 Time: 9:30

Location Address: 387 Bayonet St. New London Telephone #: 860-425-6536

e-mail address: dpoirier@tvcca.org License #: 15931 Expiration Date: 7.31.25

Capacity: 178/40 # of Children Present: 104 # of Staff Present: 237

**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: Investigation 2023-468 dated 5.26.23

Observations/Corrections needed:

NS 19a-79-3a(b)(7) Administration: annual review of policies plans and procedures. Observed documentation of annual review of policies, plans and procedures on 8/3/22

NS 19a-79-3a(c)(2)(A) positive guidance. unable to substantiate the ~~imple~~ failure to implement the positive guidance/disciplinary policy by staff due to insufficient evidence. Program does not have cameras in the classroom.

P 19a-79-3a(d)(7) administration, general operating policies; the operator and/or staff failed to follow their health policy (diarrhea specific) when a child was sent home on 6/12/23 with 2 alleged bowel movements. When parent returned 6/13/23 with Dr note, as required by TVCCA health policy, child was not permitted to stay at the program.

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: 6.27.23

Signature: Jennifer Serra
(OEC Representative)

Print Name: Jen Serra

Signature: _____
(Person in Charge)

Print Name: Jen Serra

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: TVCCA Little Learners License # 15931 Date: 6.13.23

Head start - New London
Observations/Corrections needed:

s 19a.79-3(A) Record keeping, Injury Illness, accident reports
operator/staff failed to provide the parent an illness
report when they sent the child home with
2 bouts of alleged diarrhea on 6/12/23

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: Jennifer Serra
(OEC Representative)

Print Name: Jen Serra

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: _____
(Person in Charge)

OEC BY: 6.27.23

Print Name: Jay M Conolly