

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

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: New Britain YMCA Preschool Date: 10/18/23 Time: 2:30

Location Address: 50 High Street New Britain CT Telephone #: 860-356-0419

e-mail address: amiller@NBbyymca.org License #: 70356 Expiration Date: 5/31/25

Capacity: 58/16 # of Children Present: 42 # of Staff Present: 7

**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: 3 month Partial (2023-501) + follow up 2023-933.

Observations/Corrections needed:

PIC Allyson Miller - Director/ Site manager

(NS) 19a-79-4a(c)4(D) - Staffing - Supervision.

(S) 19a-79-4a(c)4(A) - Staffing - Ratio - Program was out of paper ratio in the preschool classroom. There was 17 children and 1 staff person. 4 children were woke during nap

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: Valecia Williams  
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 11/2/23

Signature: Allyson Miller  
(Person in Charge)  
Allyson Miller