

CHILD CARE CENTER/GROUP INSPECTION FORM

INITIAL UNANNOUNCED PARTIAL FOLLOW UP LOCATION CHANGE OTHER

Program Name: Tutor Time of West Haven	License Number: 16091	Date of Inspection: 10/26/23	Time of Arrival: 8:10 am
Address: 221 Bull Hill Lane	Expiration Date: 6/30/25	Licensed Capacity: 183	Under 3 Capacity: 56
Town: West Haven 06516	Telephone: 203-937-7015	# of children present: 34	# of staff present: 7+
Operator: Child Time Learning Center inc	Director: Sarah Brackett		
Email: 6272@tutortime.com	Head Teacher: Brenda Gaskins		
Hours of Operation: 7:00am - 5:30pm	Summer Care: open		
Ages Served: 6wks - 12yrs	Instruction Codes: N/A = Not applicable at this time √ = Compliance/No violation found O = Non-compliance/Violation found		
Endorsements: <input checked="" type="checkbox"/> Under Three (6wks - 36m) <input checked="" type="checkbox"/> Preschool (3y - 5y) <input checked="" type="checkbox"/> School Age (5y & up) <input type="checkbox"/> Night Care (6wks & up)			

Licensure Procedures 19a-79-2a

1. Local Health Date: 6/3/21

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

Items Posted: Conspicuous/Accessible

8. License

9. Current Fire Marshal Certificate Date: 3/22/23

10. OEC Complaint Procedure

11. Food Service Certificate Date: exp. 9/1/24

12. Menus

13. Emergency Plans

14. No Smoking Signs

15. Radon Test (Y/N) Date: 12/24 Results: 1.5-1.5

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	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Social Service	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Dental	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Dietitian	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

27. Logs/Visits Documented

Swimming: (Y/N)

28. Non-Swimmers Identified

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 Groups)

41. Proper Refrigeration

42. Kitchen Separated

43. Hand Washing Before Eating/Food Handling

44. First Aid Kit(s): Indoor/Outdoor/Field Trip/Inventory

Physical Plant 19a-79-7a

45. License Premise: Clean/Good Repair/Hazard Free

48. Sanitary Drinking Fountains/Disposable Cups
Water Supply: Public/Well

49. Lead Water Test Date: 7/20/23
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 Protectors

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/Disinfected

64. Hand Washing After Toileting: Staff/Children

65. Ventilation in Toilet Room

66. Air Temp 65°, Thermometer Affixed

Signature of OEC Representative: fil Montenye Written Corrective Action Plan Due to OEC by: Nov. 9, 2023 Signature of Person in Charge: Sarah Brackett

Print name: fil Montenye Print name: Sarah Brackett

CHILD CARE CENTER/GROUP INSPECTION FORM

<p>Program Name: <i>Tutor Time of West Haven</i></p>	<p>License Number: <i>16091</i></p>	<p>Date of Inspection: <i>10/26/23</i></p>
<p>Physical Plant continued:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 67. Water Temperature 60°-115° <input checked="" type="checkbox"/> 68. Portable Space Heaters <input checked="" type="checkbox"/> 69. Walls/Ceilings/Floors/Rugs: Clean/Good Repair <input checked="" type="checkbox"/> 70. Rugs Secure <input checked="" type="checkbox"/> 71. Hot Water/Steam Pipes Protected <input checked="" type="checkbox"/> 72. Working Phone on Each Level <input checked="" type="checkbox"/> 73. Emergency Numbers Posted <input checked="" type="checkbox"/> 74. Adequate Lighting: 50/30 Candle Feet <input checked="" type="checkbox"/> 75. Light Fixtures Shielded/Shatter Proof <input checked="" type="checkbox"/> 76. Potentially Hazardous Substances Locked <input checked="" type="checkbox"/> 77. Garbage/Rubbish Disposed Daily <input checked="" type="checkbox"/> 78. Stairs Protected/Good Repair/Handrails <input checked="" type="checkbox"/> 79. Pets: Maintained/Care Plan (Y/N) <input checked="" type="checkbox"/> 80. Operable CO Detector on Each Level (Y/N) <input checked="" type="checkbox"/> 81. Program Space/Adequate Sq. Ft. Per Child <input checked="" type="checkbox"/> 82. Equipment: Good Repair/Safe/Non-toxic <input checked="" type="checkbox"/> 83. Cots Stored/Maintained/Adequate Number <input checked="" type="checkbox"/> 84. Developmentally Appropriate Equipment/Materials <input checked="" type="checkbox"/> 85. Hot Tubs/Spas/Saunas: Locked/Inaccessible (Y/N) <input checked="" type="checkbox"/> 86. No Weapons/No Facsimile of a Firearm on Premise <p>Outdoor Space</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 87. Outdoor Space Adequate Sq. Ft. Per Child <input checked="" type="checkbox"/> 88. Impact Absorbing Material under Equipment <input checked="" type="checkbox"/> 89. Playground Free from Hazards <input checked="" type="checkbox"/> 90. Peeling Paint (Y/N) Sample Taken (Y/N) <input checked="" type="checkbox"/> 92. Equipment Anchored/Safely Arranged <input checked="" type="checkbox"/> 93. Outdoor Play Area Protected/Fenced <input checked="" type="checkbox"/> 94. Drinking Water Available/Accessible <p>Educational Requirements 19a-79-8a</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 95. Written Plan for Daily Program Available to Parents/Staff <input checked="" type="checkbox"/> 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 <p>Administration of Medications 19a-79-9a</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 97. Written Policies/Procedures <input checked="" type="checkbox"/> 98. Training Outline on file <p>Nonprescription Topical Medications</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 99. Administration/Parent Permission/MAR <input checked="" type="checkbox"/> 100. Labeling/Storage <p>Oral/Topical/Inhalant/Injectable Medications</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 101. Med Trained Staff/Certificates <input checked="" type="checkbox"/> 102. Authorized Prescriber/Parent Permission/MAR <input checked="" type="checkbox"/> 103. Labeling/Storage <input checked="" type="checkbox"/> 104. Unused/Expired Meds Returned/Disposed <p>Self-Administration</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 105. Authorized Prescriber/Parent Permission/MAR <input checked="" type="checkbox"/> 106. Labeling/Storage <input checked="" type="checkbox"/> 107. Approved Petition For Special Med Authorization 	<p>Under Three Endorsement 19a-79-10</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 109. Approved Endorsement <input checked="" type="checkbox"/> 110. Ratio: 1 Staff to 4 Children <input checked="" type="checkbox"/> 111. Group Size no Larger than 8 <input checked="" type="checkbox"/> 112. Physical Barriers/Groups of 8 (Indoors/Outdoors) <input checked="" type="checkbox"/> 113. Adequate Sinks in Program Space <input checked="" type="checkbox"/> 114. Free Standing/Well-Constructed/Safe Cribs <input checked="" type="checkbox"/> 115. Washable Cots <input checked="" type="checkbox"/> 116. Chairs for Feeding/Stable/Safety Straps/Locking Tray <input checked="" type="checkbox"/> 117. Dev. Appropriate Tables/Chairs/Equipment <input checked="" type="checkbox"/> 118. Refrigerators and Food Prep Facilities <input checked="" type="checkbox"/> 119. Sturdy/Safety Rail/Nonporous/Exclusive Use <input checked="" type="checkbox"/> 120. Washed/Disinfected <input checked="" type="checkbox"/> 121. Disposable Paper Sheets <input checked="" type="checkbox"/> 122. Covered Waste Receptacle <input checked="" type="checkbox"/> 123. Diaper Changing Policy Posted <input checked="" type="checkbox"/> 124. Hand Washing Policy Posted <input checked="" type="checkbox"/> 125. Individual Storage of Personal Items <input checked="" type="checkbox"/> 126. Cribs/Cots Washed/Disinfected <input checked="" type="checkbox"/> 127. Under 12 Months Placed on Back for Sleeping <input checked="" type="checkbox"/> 128. Alternate Sleep Position/Equip-Medical Document Y/N <input checked="" type="checkbox"/> 129. Crib/Bed Used for Infant Sleeping <input checked="" type="checkbox"/> 130. Crib/Bed Free from Observable Hazards <input checked="" type="checkbox"/> 131. Infant Toys Separate/Washed/Disinfected Daily <input checked="" type="checkbox"/> 132. No Toys/Objects Less than 1 1/4" Diameter <input checked="" type="checkbox"/> 133. Plastic Bags/Balloons/Styrofoam Objects Inaccessible <input checked="" type="checkbox"/> 134. Health Consultant/Documentation of Visits <input checked="" type="checkbox"/> 135. Infants Held for Bottles/Individual Attn/Tummy Time <input checked="" type="checkbox"/> 136. Written Statement/Feeding Schedule from Parent <input checked="" type="checkbox"/> 137. Unused Portions of Liquids Discarded <input checked="" type="checkbox"/> 138. Clean Bottles/Disp. Bottles/Approved Bottle Washing <input checked="" type="checkbox"/> 139. Food Served from Dish or Whole Jar Served <input checked="" type="checkbox"/> 140. Bottles Individually Identified w/Child's Name <p>Outdoor Play Space-Under Three:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 141. Play Space Fenced <input checked="" type="checkbox"/> 142. Outdoor Equipment: Dev. Appropriate <p>School Age Children Endorsement 19a-79-11</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 143. Approved Endorsement <input checked="" type="checkbox"/> 144. Activity choices appropriate <input checked="" type="checkbox"/> 145. Ratio: 1 Staff to 10 Children <input checked="" type="checkbox"/> 146. Group Size: Max. 20 Children <input checked="" type="checkbox"/> 147. Education Consultant Appropriate <p>Night Care Endorsement 19a-79-12 (10pm-5am)</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 148. Approved Endorsement <input checked="" type="checkbox"/> 149. Written Program Plan/Supervision <input checked="" type="checkbox"/> 150. Staff Awake/Available <input checked="" type="checkbox"/> 151. Cot/Crib/Bedding/Toiletries/Sleep Apparel <input checked="" type="checkbox"/> 152. Individual Storage of Personal Items <input checked="" type="checkbox"/> 153. Bedding/Sleeping Apparel Laundered Weekly <p>Monitoring of Diabetes 19a-79-13 <i>no child enrolled</i></p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 154. Written Policies/Procedures <input checked="" type="checkbox"/> 155. On Site Staff Trained in First Aid/Glucose Testing <input checked="" type="checkbox"/> 156. Training Current/Documented <input checked="" type="checkbox"/> 157. Supervision of Self Administration <input checked="" type="checkbox"/> 158. Equipment/Supplies: Labeled/Inaccessible <input checked="" type="checkbox"/> 159. Signed Agreement w/Parent Regarding Equipment <input checked="" type="checkbox"/> 160. Materials Discarded Appropriately <input checked="" type="checkbox"/> 161. Authorized Prescriber/Parent Permission <input checked="" type="checkbox"/> 162. Documentation of Test Results/Actions Taken <input checked="" type="checkbox"/> 163. Daily Written Parent Notifications 	
<p>Signature of OEC Representative <i>Fil Montanye</i></p>	<p>Written Corrective Action Plan Due to OEC by: <i>NOV. 9, 2023</i></p>	<p>Signature of Person in Charge <i>Sarah Brackett</i></p>
<p>Print Name: <i>Fil Montanye</i></p>	<p>Print Name: <i>Sarah Brackett</i></p>	

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Tutor time of West Haven License # 16091 Date: 10/26/23

Observations/Corrections needed:

- #1 - current local health certificate not observed
- #9 - current fire Marshal Certificate not observed
- ~~#186 - observed background check not current for ¹ staff~~
 (FM) ~~currently working with children~~
- #38 - 3 individual care plans not signed by all staff responsible for child's care
- #42 - kitchen not separated when food was delivered to classrooms
 observed knife on counter accessible - immediately put away from staff.
- #74 - lighting under 30 candle foot in School Age room loft
 village (blocks + dramatic play)
 lighting under 50 candle foot at table in prek-2
- #76 - glade deodorizer spray not locked in prek-2
 cleaners under sink not locked with broken latch in prek
 disinfectant wipes not locked in cabinet in 2's
 Windex not locked in School Age room
 swifter mop cleaner in preschool 2.
- #89 - screws protruding into playspace on playgrounds
 by gates and along back fence
 - debris throughout side walk way for emergency exit
- #102 - observed 1 expired medication order
 1 medication order not observed for Anti-fungal

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: FM Montanys ^(FM)Print Name: FM Montanys ^(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Juan BrockettOEC BY: Nov. 9, 2023Print Name: Sarah Brockett ^(Person in Charge)

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Tutor Time of West Haven License # 16091 Date: 10/26/23

Observations/Corrections needed:

- #103 - observed antifungal creme not locked and not labeled in infant 1
- #45 - observed dangling cords to TV's, I pads, ^{and laptop's.} throughout pose a tripping hazard
 - observed 2 shelves in upstairs hallway not in good repair, (porous) and with dried food on window below
 - sink to play kitchen set not clean in prek-1
 - strainer where washed items were held in infant 2 not clean
 - observed unlabeled bowls with food for infants on counter
 - utility closet not locked in hallway
 - Fridge in between Infant 1 + 2 not clean and with Rust. Fridge in toddler 2 has broken shelf
 - sink in School Age bathroom not clean
 - missing caps to toilet bases in SA and toddler 2
 - Sink coming off wall in toddler 2
 - broken dowel on cleaning station in preschool 2
- #109 - barrier in toddler 2 not clean
 - wall by garbage not clean in school age and preschool
 - wall by paper towels not clean in toddler 2 bathroom
 - rugs not clean in preschool 2 + early preschool 1
- #70 - rugs not secure throughout
- #45 continued: observed high chair in bathroom in room toddler 1
sand table observed by toilet in toddler 2's

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Signature: Fil Montanye (OEC Representative)

Print: Fil Montanye

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Juan Buckett (Person in Charge)

OEC BY: Nov. 9, 2023

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: TutorTime of West Haven License # 16091 Date: 10/26/23

Observations/Corrections needed:

Discussion

- pete the cat not clean
- ripped books on library shelf in preschool 2
- Observed bucket of dippers in bathroom in toddler 2's (dry but used)
- Bathroom's as storage
- lighting two's not used ↓ 30 cF

enrollment

Infant 8 toddler 27 preschool 68 SA 9

• Meg Formica was in attendance from CTAEYC at this visit.

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Signature: [Signature] (OEC Representative) Print: [Signature] Signature: [Signature] (Person in Charge)

CORRECTIVE PLAN SHALL BE RETURNED TO

OEC BY: NOV. 9, 2023