

Connecticut Office of Early Childhood
Division of Licensing
450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103
Phone (800)282-6063 www.ctoec.org Fax (860)326-0552

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: CLC William Pitt Date: 11.6.23 Time: 12:22 pm

Location Address: 195 Hillandale Ave Stamford Telephone #: 203 967-6960

e-mail address: sarahmcmackin@clstamford.org License #: 15346 Expiration Date: 7.31.25

Capacity: 342 # of Children Present: 327 # of Staff Present: 33

Consent to Inspect I agree to allow the Office of Early Childhood to have access to and inspect this facility and all
Family Child Care Home child care records as required by Family Child Care Home Regulations.
Provider/Applicant/Substitute's Signature _____

Purpose of visit: Investigation 2023-1064

Observations/Corrections needed:

⑤ 19a-79-4a(c)(4)(D) Supervision - staff failed to supervise a child at all times when a child was left in a classroom alone while rest of class was taken for outdoor play. Estimated time child was alone was 20-30 mins.

⑤ 19a-79-3a(d)(5) Supervision policy - staff failed to follow supervision policy when they did not conduct a sweep of the classroom before leaving the area with their class.

⑤ 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: K. Hicks
(OEC Representative) Lon Mangano
Karen Hicks

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 11/20/2023

Signature: Sarah McMackin
(Person in Charge)