



**DIVISION OF LICENSING**  
 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103  
 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552  
 Email: [oe.licensing@ct.gov](mailto:oe.licensing@ct.gov) Website: [www.ctoec.org](http://www.ctoec.org)

## CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

<b>Program Name</b>	<b>THOMAS T.D. RITTER CHILD DEVELOPMENT CENTER</b>				<b>License Number</b>	<b>DCCC.14519</b>	<b>Date of Inspection</b>	<b>12/07/2023</b>		
					<b>Expiration Date</b>	<b>10/31/2025</b>	<b>Time of Inspection</b>	<b>08:20 AM</b>		
<b>Address</b>	<b>555 WINDSOR ST HARTFORD CT 06120-2418</b>				<b>Telephone</b>	<b>(860) 560-5168</b>	<b>Licensed Capacity</b>	<b>109</b>		
					<b>Hours of Operation</b>	<b>FROM: 7:30AM TO 5:30PM</b>	<b>Infant/Toddler Capacity</b>	<b>40</b>		
<b>Is this a Change of Address?</b>	<b>Yes?</b>		<b>No?</b>	<b>X</b>			<b>Summer Care</b>	<b>Open</b>		
<b>New Address</b>					<b>Minimum Age Served</b>	<b>6 weeks</b>	<b>Maximum Age Served</b>	<b>5 years</b>	<b>Water Supply</b>	<b>Public Water</b>
					<b>Program's Email</b>	<b>paguadal@crtct.org</b>				
<b>Operator</b>	<b>COMMUNITY RENEWAL TEAM INC</b>				<b>Name of Inspector</b>	<b>Johanne Dalo</b>				
<b>Director</b>	<b>LESLIE PAGUADA</b>				<b>Inspector's Email</b>	<b>johanne.dalo@ct.gov</b>				
<b>Key:</b> Compliant = X Non-Compliant = O	<b># of Infants - Toddlers Present</b>	<b>20</b>	<b># of Total Children Present</b>	<b>31</b>	<b># of Staff Present</b>	<b>9</b>	<b>Type of Inspection</b>	<b>UNANNOUNCED INSPECTION - FULL</b>		

### LICENSURE PROCEDURES 19a-79-2a

<b>X</b>	<b>1. Local Health Inspection</b>	
	Date: <b>06/09/2023</b>	
<b>X</b>	<b>1a. False or Misleading Statements</b>	

### ADMINISTRATION 19a-79-3a

<b>X</b>	<b>1b. Administration</b>	
<b>X</b>	<b>1bb. Capacity</b>	
<b>X</b>	<b>2. New Staff – Employee Orientation</b>	
<b>X</b>	<b>3. Annual Staff Policy Training</b>	
<b>X</b>	<b>3b. Managing child behavior</b>	
<b>X</b>	<b>4. Documentation of Behavior M. Tech Discussed w/parents</b>	
<b>X</b>	<b>4b. Failure to report</b>	

<b>X</b>	5. Notification of Change	
<b>X</b>	6. Program policies	Including discipline, supervision, child protection, general operating, personnel, closing time
<b>X</b>	7. Daily Attendance Records- staff and children	
<b>ITEMS POSTED – ACCESSIBLE</b>		
<b>X</b>	8. License	
<b>X</b>	9. Fire Marshal certificate	
	Date	05/17/2023
<b>X</b>	10. OEC Complaint procedure	
<b>X</b>	11. Food Service Certificate	N/A?
	Date	06/30/2024
<b>X</b>	12. Menus	
<b>X</b>	13. Emergency plans	
<b>X</b>	14. No Smoking Signs	
<b>X</b>	15. Radon Test	N/A?
	Date	Results
	11/08/20	0.5 pCi/L
<b>X</b>	15a. Developmental Milestones	
<b>X</b>	15b. Access	
<b>X</b>	15bb. Endorsements	
<b>STAFFING 19a-79-4a</b>		
<b>X</b>	15c. Staffing	
<b>X</b>	16. Staff Health records – TB tests	
<b>X</b>	17. Professional development	
<b>X</b>	18. Disciplinary actions	
<b>X</b>	18b. Background checks	

<b>X</b>	19. Designated Head Teacher					
<b>X</b>	20. Two Staff present					
<b>X</b>	20a. Staff Qualities					
<b>X</b>	21. Ratio: 1 staff to 10 children					
<b>X</b>	21b. Supervision					
<b>X</b>	22. Group Size – maximum 20 children					
<b>X</b>	23. Designated director - Training					
<b>X</b>	24. CPR Certified Staff (Group Home N/A)					
<b>X</b>	25. First Aid Trained Staff					
<b>X</b>	26. Consultants- Agreements and Contracts					
<b>X</b>	27. Logs – Visits documented					
	Not in Compliance?	<b>Education</b>	<b>Health</b>	<b>Social Service</b>	<b>Dental</b>	<b>Dietician N/A?</b>
	Contracts					
	Logs					
<b>Do they take children swimming?</b>		<b>SWIMMING</b>				
<b>X</b>	28. Non-swimmers identified					
<b>X</b>	29. Staff/Child Ratios					
<b>X</b>	30. CPR certified staff (20 years of age)					
<b>X</b>	31. Lifeguard certified - supervision					
<b>RECORD KEEPING 19a-79-5a</b>						
<b>X</b>	32. Enrollment information					
<b>X</b>	33. Emergency medical permission					
<b>X</b>	34. Authorized release permission					
<b>X</b>	35. Field trip permission					
<b>X</b>	36. Transportation permission					

<b>X</b>	37. Child health records and immunizations		
<b>X</b>	38. Individual care plan (signed by parents and staff)		
<b>X</b>	39. Injury, Illness, Accident reports		
<b>HEALTH AND SAFETY 19a-79-6a</b>			
<b>X</b>	40. Nutritious snacks and meals (required food groups)		
<b>X</b>	41. Proper refrigeration (max 45°)		
<b>X</b>	42. Kitchen separated	N/A?	
<b>X</b>	43. Hand washing – before eating or food handling		
<b>X</b>	44. First Aid Kit(s) – Indoor, Outdoor, Field Trips, Inventory		
<b>PHYSICAL PLANT 19a-79-7a</b>			
<b>X</b>	45. License premises – clean, good repair, hazard free		
<b>X</b>	47b. Plans for new construction, expansion, renovation or conversion		
<b>X</b>	48. Sanitary drinking fountains – disposable cups		
<b>X</b>	49. Lead Water Test (N/A?) 05/16/2023	Bacterial/Chemical Test (N/A?) <b>X</b>	
<b>X</b>	50. Walkways maintained		
<b>X</b>	51. Designated staff toilet/sink		
<b>X</b>	52. All openings for ventilation screened		
<b>X</b>	53. Windows protected to prevent falls		
<b>X</b>	54. Glass protected up to 36"		
<b>X</b>	55. Overhead doors – locking devices, spring protectors		
<b>X</b>	56. Exits, Hallways and Stairs unobstructed		

<b>X</b>	57. Individual storage of clothing and bedding	
<b>X</b>	58. Smoking prohibited	
<b>X</b>	59. Matches and lighters inaccessible	
<b>X</b>	60. Electrical safety – outlets/cords	
<b>X</b>	61. Toileting needs met	
<b>X</b>	62. Required toilets, sinks, supplies	
<b>X</b>	63. Potty chairs – nonporous, emptied, disinfected	
<b>X</b>	64. Hand washing after toileting – staff and children	
<b>X</b>	65. Ventilation in toilet rooms	
<b>X</b>	66. Air temperature 65 degrees, thermometer affixed	
<b>X</b>	67. Water temperature 60° – 115°	
<b>X</b>	68. Portable space heaters	
<b>X</b>	69. Walls, ceilings, floors and rugs – clean, good repair	
<b>X</b>	70. Rugs secure	
<b>X</b>	71. Hot water, steam pipes protected	
<b>X</b>	72. Working phone on each level	
<b>X</b>	73. Emergency numbers posted	
<b>X</b>	74. Adequate lighting - 50/30 candle feet	
<b>X</b>	75. Light fixtures shielded, shatter proof	
<b>X</b>	76. Potentially hazardous substances locked	
<b>X</b>	77. Garbage, rubbish disposed daily	

<b>X</b>	78. Stairs protected, good repair, handrails		
<b>X</b>	79. Pets – maintained, care plan	Y/N N	
<b>X</b>	80. Operable CO detector on each level	N/A? Y	
<b>X</b>	81. Program space-adequate square footage per child		
<b>X</b>	82. Equipment clean, good repair, safe, non-toxic		
<b>X</b>	83. Cots stored, maintained, adequate number		
<b>X</b>	84. Developmentally appropriate equipment		
<b>X</b>	85. Hot tubs, spas, saunas – locked and inaccessible	Y/N N	
<b>X</b>	86. No weapons, no facsimile of a firearm on premises		
<b>OUTDOOR SPACE</b>			
<b>X</b>	87. Outdoor space - adequate square footage per child		
<b>X</b>	88. Impact absorbing material under equipment		
<b>X</b>	89. Playground free from hazards		
<b>X</b>	92. Equipment anchored, safely arranged		
<b>X</b>	93. Outdoor play area protected, fenced		
<b>X</b>	94. Drinking water available, accessible		
<b>EDUCATIONAL REQUIREMENTS 19a-79-8a</b>			
<b>X</b>	95. Written plan for daily program available to parents/staff		
<b>X</b>	96. Schedule – Activity choices and Program	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	
<b>ADMINISTRATION OF MEDICATIONS 19a-79-9a</b>			
<b>X</b>	97. Written policies, procedures		
<b>X</b>	98. Training outline on file		

NONPRESCRIPTION TOPICAL MEDICATIONS								
<b>X</b>	99. Administration, parent permission, MAR							
<b>X</b>	100. Labeling, storage							
ORAL/TOPICAL/INHALENT MEDICATIONS								
<b>X</b>	101. Med trained staff, certificates							
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; font-size: small;">O/T/I</td> <td style="width: 10%; font-size: small;">Injectable</td> <td style="width: 80%;"></td> </tr> <tr> <td style="text-align: center; font-size: small;">Y</td> <td style="text-align: center; font-size: small;">Y</td> <td></td> </tr> </table>	O/T/I	Injectable		Y	Y		
O/T/I	Injectable							
Y	Y							
<b>X</b>	102. Authorized prescriber, parent permission, MAR							
<b>X</b>	103. Labeling, storage							
<b>X</b>	104. Unused, expired meds returned/disposed							
SELF-ADMINISTRATION								
<b>X</b>	105. Authorized prescriber, parent permission, MAR							
<b>X</b>	106. Labeling, storage							
<b>X</b>	107. Approved petition for special medication authorization							
<b>Yes</b>	Is there an approved endorsement?	<b>INFANT/TODDLER ENDORSEMENT 19a-79-10</b>						
<b>X</b>	109. Approved endorsement							
<b>○</b>	110. Ratio: 1 staff to 4 children	<b>Failed to maintain proper staff/child ratios when upon arrival, observed 1 staff out of the classroom and returning with supplies leaving 1 staff in the classroom with 7 children.</b>						
<b>X</b>	111. Group size: no larger than 8							
<b>X</b>	112. Physical barriers, groups of 8 (indoors and outdoors)							
<b>○</b>	113. Adequate sinks in program space	<b>Failed to use the designated hand washing sink after diapering and observed bibs in the designated hand washing sink.</b>						
<b>X</b>	114. Free standing, well-constructed, safe cribs							
<b>X</b>	115. Washable cots							
<b>○</b>	116. Chairs for feeding, stable, safety straps, locking tray	<b>Failed to maintain safety straps on all high chairs when observed 2 children not buckled in the high chair.</b>						
<b>X</b>	117. Developmentally appropriate tables, chairs, equipment							
<b>X</b>	118. Refrigerators and food prop facilities							

<input checked="" type="checkbox"/>	119. Diaper area- sturdy, safety rail, nonporous, exclusive use					
<input type="checkbox"/>	120. Diaper area- washed, disinfected	Failed to ensure the diaper area is washed and disinfected after each use.				
<input checked="" type="checkbox"/>	121. Diaper area- disposable paper sheets					
<input checked="" type="checkbox"/>	122. Covered waste receptacle					
<input checked="" type="checkbox"/>	123. Diaper changing policy posted, followed					
<input checked="" type="checkbox"/>	124. Hand washing policy posted, followed					
<input checked="" type="checkbox"/>	125. Individual storage of personal items					
<input checked="" type="checkbox"/>	126. Cribs/cots washed and disinfected					
<input checked="" type="checkbox"/>	127. Under 12 months- placed on back for sleeping					
<input checked="" type="checkbox"/>	128. Alternate sleep position- equipment, medical documentation	<table border="1"> <tr> <td>Yes</td> <td>No</td> </tr> <tr> <td></td> <td>X</td> </tr> </table>	Yes	No		X
Yes	No					
	X					
<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, doc. of visits					
<input type="checkbox"/>	135. Infants held for bottles, indiv. attention, tummy time	Failed to ensure infants are held for all bottle feedings when observed 1 staff feeding a bottle to a child while the child was in a bouncer seat.				
<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 type="checkbox"/>	140. Bottles individually identified with child's name	Failed to ensure bottles are individually identified with the child's name when observed 2 bottles not labeled.				

**OUTDOOR PLAY SPACE - UNDER THREE**

<b>X</b>	141. Play space fenced	
<b>X</b>	142. Outdoor equipment developmentally appropriate	
<b>No</b>	Is there an approved endorsement?	<b>SCHOOL AGE ENDORSEMENT 19a-79-11</b>
	143. Approved endorsement	
	144. Activity choices appropriate	
	145. Ratio – 1 staff to 10 children	
	146. Group size – maximum 20 children	
	147. Education Consultant appropriate	
<b>No</b>	Is there an approved endorsement?	<b>NIGHT CARE ENDORSEMENT 19a-79-12 (10pm-5am)</b>
	148. Approved endorsement	
	149. Written program plan, supervision	
	150. Staff awake and available	
	151. Cot, crib, bedding, toiletries, sleep apparel	
	152. Individual storage of personal items	
	153. Bedding, sleeping apparel laundered weekly	
<b>N</b>	Child with diabetes enrolled?	<b>MONITORING OF DIABETES 19a-79-13</b>
<b>X</b>	154. Written policies and procedures	
<b>X</b>	155. On site staff trained in first aid, glucose testing	
<b>X</b>	156. Training current and documented	
<b>X</b>	157. Supervision of self-administration	
<b>X</b>	158. Equipment, supplies labeled and inaccessible	

<b>X</b>	159. Signed agreement with parents regarding equipment	
<b>X</b>	160. Materials discarded appropriately	
<b>X</b>	161. Authorized prescriber, parent permission	
<b>X</b>	162. Documentation of test results, actions taken	
<b>X</b>	163. Daily written parent notification	

**ADDITIONAL VIOLATIONS**

	62. Consent Order - Negotiated Corrective Action Plan	N/A?	
		<b>X</b>	




<u>YES or NO?</u> Yes	<b>WERE VIOLATIONS CITED DURING THIS VISIT?</b>
--------------------------	---

**DISCUSSIONS:**

- 1 loose toilet seat(middle stall rm2)

**COMMENTS:**

**NOTE:** Items left blank on this form were not monitored during this visit.  
Only the regulations marked as compliant, non-compliant or not applicable were monitored or discussed.  
**APPLICANTS:** You MAY NOT OPERATE until all requirements have been met and a license has been issued by the Agency.

 (Signature of OEC Representative)	 (Signature of OEC Representative)	DATE CORRECTIONS DUE BY:	 (Signature of Person in Charge)
<b>Johanne Dalo</b> (Printed Name)	<b>Johanne Dalo</b> (Printed Name)	<b>12/21/2023</b>	<b>Claudine Bernard</b> (Printed Name)