



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

CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

Program Name	KINDERCARE LEARNING CENTER #301791				License Number	DCCC.16040		Date of Inspection	12/22/2023	
					Expiration Date	7/31/2026		Time of Inspection	08:17 AM	
Address	35 SOUTH RD FARMINGTON CT 06032-2022				Telephone	(860) 677-1810		Licensed Capacity	140	
					Hours of Operation	M-F 6:30AM TO: 6:30PM		Infant/Toddler Capacity	80	
Is this a Change of Address?	Yes?		No?	X				Summer Care	Open	
New Address					Minimum Age Served	6 weeks	Maximum Age Served	12 years	Water Supply	Public Water
					Program's Email	FarmingtonCT@kindercare.com				
Operator	KINDERCARE EDUCATION LLC				Name of Inspector	Johanne Dalo				
Director	NICHOLE CHARRON				Inspector's Email	johanne.dalo@ct.gov				
Key: Compliant = X Non-Compliant = O	# of Infants - Toddlers Present	30	# of Total Children Present	56	# of Staff Present	18	Type of Inspection	UNANNOUNCED INSPECTION - FULL		

LICENSURE PROCEDURES 19a-79-2a

X	1. Local Health Inspection	
	Date: 02/22/2022	
X	1a. False or Misleading Statements	

ADMINISTRATION 19a-79-3a

X	1b. Administration	
X	1bb. Capacity	
O	2. New Staff – Employee Orientation	Failed to maintain documentation of new staff orientation for 5 staff.
O	3. Annual Staff Policy Training	Failed to maintain documentation of annual review of policy training for 5 staff
X	3b. Managing child behavior	
X	4. Documentation of Behavior M. Tech Discussed w/parents	
X	4b. Failure to report	

X	5. Notification of Change	
X	6. Program policies	Including discipline, supervision, child protection, general operating, personnel, closing time
X	7. Daily Attendance Records- staff and children	
ITEMS POSTED – ACCESSIBLE		
X	8. License	
X	9. Fire Marshal certificate	
	Date	08/08/2023
X	10. OEC Complaint procedure	
X	11. Food Service Certificate	N/A?
	Date	06/30/2024
X	12. Menus	
X	13. Emergency plans	
X	14. No Smoking Signs	
X	15. Radon Test	N/A?
	Date	Results
	12/15/20	0pCi/L
X	15a. Developmental Milestones	
X	15b. Access	
X	15bb. Endorsements	
STAFFING 19a-79-4a		
X	15c. Staffing	
X	16. Staff Health records – TB tests	
X	17. Professional development	
X	18. Disciplinary actions	
X	18b. Background checks	

<input checked="" type="checkbox"/>	19. Designated Head Teacher																					
<input checked="" type="checkbox"/>	20. Two Staff present																					
<input checked="" type="checkbox"/>	20a. Staff Qualities																					
<input checked="" type="checkbox"/>	21. Ratio: 1 staff to 10 children																					
<input checked="" type="checkbox"/>	21b. Supervision																					
<input checked="" type="checkbox"/>	22. Group Size – maximum 20 children																					
<input checked="" type="checkbox"/>	23. Designated director - Training																					
<input checked="" type="checkbox"/>	24. CPR Certified Staff (Group Home N/A)																					
<input checked="" type="checkbox"/>	25. First Aid Trained Staff																					
<input type="radio"/>	26. Consultants- Agreements and Contracts	Failed to maintain current consultant agreements for 2 consultants (Social Services -03/16/2022 and Dental -07/24/2022)																				
<input type="radio"/>	27. Logs – Visits documented	Failed to document annual review of policies, plans, procedures and education programs for 3 consultants (Social Services, Dental, Health consultants)																				
	Not in Compliance?	<table border="1"> <thead> <tr> <th>Education</th> <th>Health</th> <th>Social Service</th> <th>Dental</th> <th>Dietician N/A?</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td></td> </tr> <tr> <td>Contracts</td> <td></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td></td> </tr> <tr> <td>Logs</td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td></td> </tr> </tbody> </table>	Education	Health	Social Service	Dental	Dietician N/A?			<input type="radio"/>	<input type="radio"/>		Contracts		<input type="radio"/>	<input type="radio"/>		Logs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Education	Health	Social Service	Dental	Dietician N/A?																		
		<input type="radio"/>	<input type="radio"/>																			
Contracts		<input type="radio"/>	<input type="radio"/>																			
Logs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>																			
	Do they take children swimming?	N SWIMMING																				
<input checked="" type="checkbox"/>	28. Non-swimmers identified																					
<input checked="" type="checkbox"/>	29. Staff/Child Ratios																					
<input checked="" type="checkbox"/>	30. CPR certified staff (20 years of age)																					
<input checked="" type="checkbox"/>	31. Lifeguard certified - supervision																					
RECORD KEEPING 19a-79-5a																						
<input checked="" type="checkbox"/>	32. Enrollment information																					
<input checked="" type="checkbox"/>	33. Emergency medical permission																					
<input checked="" type="checkbox"/>	34. Authorized release permission																					
<input checked="" type="checkbox"/>	35. Field trip permission																					
<input checked="" type="checkbox"/>	36. Transportation permission																					

X	37. Child health records and immunizations		
X	38. Individual care plan (signed by parents and staff)		
X	39. Injury, Illness, Accident reports		
HEALTH AND SAFETY 19a-79-6a			
X	40. Nutritious snacks and meals (required food groups)		
X	41. Proper refrigeration (max 45°)		
X	42. Kitchen separated	N/A?	
X	43. Hand washing – before eating or food handling		
X	44. First Aid Kit(s) – Indoor, Outdoor, Field Trips, Inventory		
PHYSICAL PLANT 19a-79-7a			
X	45. License premises – clean, good repair, hazard free		
X	47b. Plans for new construction, expansion, renovation or conversion		
X	48. Sanitary drinking fountains – disposable cups		
O	49. Lead Water Test (N/A?) 07/07/2021	Bacterial/Chemical Test (N/A?) X	Failed to conduct a lead water test every 2 years
X	50. Walkways maintained		
X	51. Designated staff toilet/sink		
X	52. All openings for ventilation screened		
X	53. Windows protected to prevent falls		
X	54. Glass protected up to 36"		
X	55. Overhead doors – locking devices, spring protectors		
X	56. Exits, Hallways and Stairs unobstructed		

X	57. Individual storage of clothing and bedding	
X	58. Smoking prohibited	
X	59. Matches and lighters inaccessible	
X	60. Electrical safety – outlets/cords	
X	61. Toileting needs met	
X	62. Required toilets, sinks, supplies	
X	63. Potty chairs – nonporous, emptied, disinfected	
X	64. Hand washing after toileting – staff and children	
X	65. Ventilation in toilet rooms	
X	66. Air temperature 65 degrees, thermometer affixed	
X	67. Water temperature 60° – 115°	
X	68. Portable space heaters	
X	69. Walls, ceilings, floors and rugs – clean, good repair	
X	70. Rugs secure	
X	71. Hot water, steam pipes protected	
X	72. Working phone on each level	
X	73. Emergency numbers posted	
X	74. Adequate lighting - 50/30 candle feet	
X	75. Light fixtures shielded, shatter proof	
O	76. Potentially hazardous substances locked	Failed to ensure that potentially hazardous substances are stored in a locked area when observed Lysol wipes accessible to children in transition kindergarten room, glass cleaner and disinfectant bottles not locked in TA, Preschool A and B, Discovery A, B, and D.
X	77. Garbage, rubbish disposed daily	

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

NONPRESCRIPTION TOPICAL MEDICATIONS						
X	99. Administration, parent permission, MAR					
X	100. Labeling, storage					
ORAL/TOPICAL/INHALENT MEDICATIONS						
X	101. Med trained staff, certificates					
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; padding: 2px;">O/T/I</td> <td style="padding: 2px;">Injectable</td> </tr> <tr> <td style="text-align: center; padding: 2px;">Y</td> <td style="text-align: center; padding: 2px;">Y</td> </tr> </table>	O/T/I	Injectable	Y	Y	
O/T/I	Injectable					
Y	Y					
○	102. Authorized prescriber, parent permission, MAR	Failed to maintain current written orders for 1 child .				
X	103. Labeling, storage					
○	104. Unused, expired meds returned/disposed	Failed to ensure that expired medication is destroyed or returned to the parent when observed an expired Benadryl (10/23).				
SELF-ADMINISTRATION						
X	105. Authorized prescriber, parent permission, MAR					
X	106. Labeling, storage					
X	107. Approved petition for special medication authorization					
Yes	Is there an approved endorsement?	INFANT/TODDLER ENDORSEMENT 19a-79-10				
X	109. Approved endorsement					
X	110. Ratio: 1 staff to 4 children					
X	111. Group size: no larger than 8					
X	112. Physical barriers, groups of 8 (indoors and outdoors)					
X	113. Adequate sinks in program space					
X	114. Free standing, well-constructed, safe cribs					
X	115. Washable cots					
X	116. Chairs for feeding, stable, safety straps, locking tray					
X	117. Developmentally appropriate tables, chairs, equipment					
X	118. Refrigerators and food prep facilities					

<input type="radio"/>	119. Diaper area-sturdy, safety rail, nonporous, exclusive use	Failed to ensure the exclusive use of the diaper area when observed 2 diaper bags and food on the changing table (infant B).		
<input checked="" type="checkbox"/>	120. Diaper area-washed, disinfected			
<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 type="radio"/>	124. Hand washing policy posted, followed	Failed to ensure the handwashing policy is posted in each diapering area in Infant C room.		
<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	Yes	No	
			<input checked="" type="checkbox"/>	
<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 checked="" type="checkbox"/>	135. Infants held for bottles, indiv. attention, 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 with child's name			

OUTDOOR PLAY SPACE - UNDER THREE

X	141. Play space fenced	
X	142. Outdoor equipment developmentally appropriate	
Yes	Is there an approved endorsement?	SCHOOL AGE ENDORSEMENT 19a-79-11
X	143. Approved endorsement	
X	144. Activity choices appropriate	
X	145. Ratio – 1 staff to 10 children	
X	146. Group size – maximum 20 children	
X	147. Education Consultant appropriate	
No	Is there an approved endorsement?	NIGHT CARE ENDORSEMENT 19a-79-12 (10pm-5am)
	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	
N	Child with diabetes enrolled?	MONITORING OF DIABETES 19a-79-13
X	154. Written policies and procedures	
X	155. On site staff trained in first aid, glucose testing	
X	156. Training current and documented	
X	157. Supervision of self-administration	
X	158. Equipment, supplies labeled and inaccessible	

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

ADDITIONAL VIOLATIONS

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



<u>YES or NO?</u> Yes	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS:

- Using bathrooms as storage.
- Paint starting to peel around doors outside.
- 1 child without start date documented.

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 Person in Charge)
Johanne Dalo (Printed Name)	Nichole Charon (Printed Name)

DATE
CORRECTIONS
DUE BY:

01/05/2024