Connecticut Office of Early Childhood

DIVISION OF LICENSING
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CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

Program Name	BRIGHT & EARLY CHILDREN'S LEARNING CENTERS - WEST HARTFORD	License Number	DCCC.70447	Date of Inspection	01/25/2024
		Expiration Date	9/30/2026	Time of Inspection	12:22 PM
Address	2626 ALBANY AVE WEST HARTFORD CT 06117-2331	Telephone	(860) 236-2626	Licensed Capacity	108
		Hours of Operation	MONDAY-FRIDAY 6:30AM-6:00 PM	Infant/Toddler Capacity	88
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	Catherine@brightandearly.com		
Operator	BRIGHT & EARLY WEST HARTFORD, LLC	Name of Inspector	Johanne Dalo		
Director	CATHERINE RAITI	Inspector's Email	johanne.dalo@ct.gov		
Key: Compliant = X Non-Compliant = O	# of Infants – Toddlers Present: 61	# of Total Children Present: 74	# of Staff Present: 21	Type of Inspection	UNANNOUNCED INSPECTION - FULL

LICENSURE PROCEDURES 19a-79-2a

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

ADMINISTRATION 19a-79-3a

X	1b. Administration	
X	1bb. Capacity	
X	2. New Staff – Employee Orientation	
X	3. Annual Staff Policy Training	
X	3b. Managing child behavior	
O	4. Documentation of Behavior M. Tech Discussed w/parents	Failed to maintain documentation that behavior management techniques were discussed with parents for 2 children.
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** 02/15/2023	
X	**10. OEC Complaint procedure**	
	11. Food Service Certificate **Date**	**N/A?** X
X	**12. Menus**	
X	**13. Emergency plans**	
X	**14. No Smoking Signs**	
X	**15. Radon Test** **Date** 11/08/20 — **Results** <2.0 pCi/L	**N/A?**
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**	

X	**19. Designated Head Teacher**	
X	**20. Two Staff present**	
X	**20a. Staff Qualities**	
X	**21. Ratio: 1 staff to 10 children**	
X	**21b. Supervision**	
X	**22. Group Size – maximum 20 children**	
X	**23. Designated director - Training**	
X	**24. CPR Certified Staff (Group Home N/A)**	
X	**25. First Aid Trained Staff**	
X	**26. Consultants-Agreements and Contracts**	
X	**27. Logs – Visits documented**	

	Not in Compliance?	Education	Health	Social Service	Dental	Dietician N/A? X
	Contracts					
	Logs					

	Do they take children swimming? N	**SWIMMING**
X	**28. Non-swimmers identified**	
X	**29. Staff/Child Ratios**	
X	**30. CPR certified staff (20 years of age)**	
X	**31. Lifeguard certified - supervision**	

RECORD KEEPING 19a-79-5a

X	**32. Enrollment information**	
X	**33. Emergency medical permission**	
X	**34. Authorized release permission**	
X	**35. Field trip permission**	
X	**36. Transportation permission**	

X	**37. Child health records and immunizations**	
O	**38. Individual care plan (signed by parents and staff)**	**Failed to maintain complete individual care plans when observed 1 care plan not signed by parent and all staff caring for child.**
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**	
X	**49. Lead Water Test (N/A?)** 01/09/2023	**Bacterial/Chemical Test (N/A?)** X
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**	
X	**76. Potentially hazardous substances locked**	
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**	
O	**82. Equipment clean, good repair, safe, non-toxic**	**Failed to ensure that equipment is safe for children when observed cubbies not secured (Rm, 11, 12, 10), dramatic play furnitures not secured (Rm 11, 12, 10, 9, 4), rusted microwaves (Rm 8, 2, 1), gate leaning on the wall (Rm 5).**
X	**83. Cots stored, maintained, adequate number**	
X	**84. Developmentally appropriate equipment**	
X	**85. Hot tubs, spas, saunas – locked and inaccessible**	**Y/N** **N**
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	
O	**99. Administration, parent permission, MAR**	**Failed to maintain current written parent permission for medication and failed to maintain complete written parent permission for medication of several permission forms (10+).**
X	**100. Labeling, storage**	
	ORAL/TOPICAL/INHALENT MEDICATIONS	
X	**101. Med trained staff, certificates** **O/T/I**: Y **Injectable**: Y	
X	**102. Authorized prescriber, parent permission, MAR**	
X	**103. Labeling, storage**	
X	**104. Unused, expired meds returned/disposed**	
	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 prop facilities**	

O	119. Diaper area-sturdy, safety rail, nonporous, exclusive use	Failed to ensure the exclusive use of the diaper area when observed a shoe on the table (rm 8), program tablet (rm 5), children's bags (rm 7), papers (rm 4).
X	120. Diaper area-washed, disinfected	
X	121. Diaper area-disposable paper sheets	
X	122. Covered waste receptacle	
X	123. Diaper changing policy posted, followed	
X	124. Hand washing policy posted, followed	
X	125. Individual storage of personal items	
X	126. Cribs/cots washed and disinfected	
X	127. Under 12 months- placed on back for sleeping	
X	128. Alternate sleep position-equipment, medical documentation	Yes: No: X
X	129. Crib, bed used for infant sleeping	
X	130. Crib, bed free from observable hazards	
X	131. Infant toys separate, washed, disinfected daily	
O	132. No toys, objects less than 1/1/4" diameter	Failed to ensure small toys and other objects with a diameter of less than 1 1/4" are not accessible to children when observed broken drawer's latches in several classrooms giving access to small items (Rm 12, 6, 4, 2).
O	133. Plastic bags, balloons, Styrofoam objects inaccessible	Failed to ensure plastic bags and balloons are not accessible to children when observed broken drawer's latches in several classrooms giving access to bags (Rm 12, 9).
X	134. Health consultant, doc. of visits	
X	135. Infants held for bottles, indiv. attention, tummy time	
X	136. Written statement, feeding schedule from parent	
X	137. Unused portions of liquids discarded	
X	138. Clean Bottles, disp. bottles, approved bottle washing	
X	139. Food served from dish or whole jar served	
O	140. Bottles individually identified with child's name	Failed to ensure bottles are individually identified with the child's name for 2 children (Rm 2).

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	

YES or NO? Yes	**WERE VIOLATIONS CITED DURING THIS VISIT?**

DISCUSSIONS:

- Lighting measuring less than 50c/f in writing area in preschool room.
- Cleaning supplies not locked in 1 classroom.

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)
Johanne Dalo		02/08/2024	Kara Ealahan
(Printed Name)	(Printed Name)		(Printed Name)