



DIVISION OF LICENSING

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 Email: oc.licensing@ct.gov Website: www.ctoec.org

CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

Program Name	A PLACE LIKE HOME				License Number	DCCC.70243	Date of Inspection	02/08/2024		
					Expiration Date	7/31/2027	Time of Inspection	09:00 AM		
Address	2810 LONG RIDGE RD				Telephone	(203) 890-9497	Licensed Capacity	75		
	STAMFORD CT 06903-1122				Hours of Operation	8AM-6PM M THROUGH F	Infant/Toddler Capacity	32		
Is this a Change of Address?	Yes?		No?	X			Summer Care	Open		
New Address					Minimum Age Served	6 weeks	Maximum Age Served	6 years	Water Supply	Private Well
					Program's Email	info@aplacelikehomect.com				
Operator	A PLACE LIKE HOME LLC				Name of Inspector	Lori Mangano				
Director	GLAUCIA VERDI				Inspector's Email	lori.mangano@ct.gov				
Key:	Compliant = X	# of Infants - Toddlers Present	32	# of Total Children Present	58	# of Staff Present	15	Type of Inspection	UNANNOUNCED INSPECTION - FULL	
	Non-Compliant = O									

LICENSURE PROCEDURES 19a-79-2a

X	1. Local Health Inspection	
	Date: 06/14/2023	
X	1a. False or Misleading Statements	

ADMINISTRATION 19a-79-3a

X	1b. Administration	
O	1bb. Capacity	Failed to maintain licensed capacity when program had 36 children under 3 at 10am and program is only licensed for 32 children under 3.
X	2. New Staff – Employee Orientation	
X	3. Annual Staff Policy Training	
X	3b. Managing child behavior	
X	4. Documentation of Behavior M. Tech Discussed w/parents	
X	4b. Failure to report	

<input type="radio"/>	5. Notification of Change	Failed to provide notification of change when program changed a preschool room to under 3s and divided a gym into two sections.	
<input checked="" type="checkbox"/>	6. Program policies	Including discipline, supervision, child protection, general operating, personnel, closing time	
<input checked="" type="checkbox"/>	7. Daily Attendance Records- staff and children		
ITEMS POSTED – ACCESSIBLE			
<input checked="" type="checkbox"/>	8. License		
<input checked="" type="checkbox"/>	9. Fire Marshal certificate		
	Date	06/22/2023	
<input checked="" type="checkbox"/>	10. OEC Complaint procedure		
	11. Food Service Certificate	<u>N/A?</u>	
	Date	X	
<input checked="" type="checkbox"/>	12. Menus		
<input checked="" type="checkbox"/>	13. Emergency plans		
<input checked="" type="checkbox"/>	14. No Smoking Signs		
<input checked="" type="checkbox"/>	15. Radon Test	<u>N/A?</u>	
	Date	Results	
	01/21/20	3.5	
<input checked="" type="checkbox"/>	15a. Developmental Milestones		
<input checked="" type="checkbox"/>	15b. Access		
<input checked="" type="checkbox"/>	15bb. Endorsements		
STAFFING 19a-79-4a			
<input checked="" type="checkbox"/>	15c. Staffing		
<input checked="" type="checkbox"/>	16. Staff Health records – TB tests		
<input checked="" type="checkbox"/>	17. Professional development		
<input checked="" type="checkbox"/>	18. Disciplinary actions		
<input checked="" type="checkbox"/>	18b. Background checks		

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 staff did not sign them for two children.	
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			
O	45. License premises – clean, good repair, hazard free	Failed to maintain the building, equipment and services when a white cabinet is not secured in Ahoy room, child hall bathrooms have rust on radiators and accessible to children. There is peeling paint on radiator in 2nd bathroom. Rusted metal bench near program entrance.	
X	47b. Plans for new construction, expansion, renovation or conversion		
X	48. Sanitary drinking fountains – disposable cups		
X	49. Lead Water Test (N/A?)	Bacterial/Chemical Test (N/A?)	
	04/04/2022	04/04/2022	
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 kitchen area and chemical closet were not locked in hallway and chemicals are accessible.
X	77. Garbage, rubbish disposed daily	

<input type="radio"/>	78. Stairs protected, good repair, handrails	Failed to ensure stairs are properly protected in the gym when 5 staircases were not protected.	
<input checked="" type="checkbox"/>	79. Pets – maintained, care plan	Y/N	
		Y	
<input checked="" type="checkbox"/>	80. Operable CO detector on each level	N/A?	
		Y	
<input checked="" type="checkbox"/>	81. Program space-adequate square footage per child		
<input checked="" type="checkbox"/>	82. Equipment clean, good repair, safe, non-toxic		
<input checked="" type="checkbox"/>	83. Cots stored, maintained, adequate number		
<input checked="" type="checkbox"/>	84. Developmentally appropriate equipment		
<input checked="" type="checkbox"/>	85. Hot tubs, spas, saunas – locked and inaccessible	Y/N	
		N	
<input checked="" type="checkbox"/>	86. No weapons, no facsimile of a firearm on premises		
OUTDOOR SPACE			
<input checked="" type="checkbox"/>	87. Outdoor space - adequate square footage per child		
<input type="radio"/>	88. Impact absorbing material under equipment	Failed to ensure a minimum of 8 inches of impact absorbing materials under swings in both playgrounds and under small slide in preschool playground.	
<input type="radio"/>	89. Playground free from hazards	Failed to ensure the playground is free of glass, debris, holes and other hazards when observed 2 small holes in rubber surface in under 3 playground and pose tripping hazard and peeling paint on white door and playhouse railing in under 3 playground.	
<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		
EDUCATIONAL REQUIREMENTS 19a-79-8a			
<input checked="" type="checkbox"/>	95. Written plan for daily program available to parents/staff		
<input checked="" type="checkbox"/>	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			
<input checked="" type="checkbox"/>	97. Written policies, procedures		
<input checked="" type="checkbox"/>	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%; text-align: center;">O/T/I</td> <td style="width: 90%; text-align: center;">Injectable</td> </tr> <tr> <td style="text-align: center;">Y</td> <td style="text-align: center;">Y</td> </tr> </table>	O/T/I	Injectable	Y	Y	
O/T/I	Injectable					
Y	Y					
O	102. Authorized prescriber, parent permission, MAR	Failed to maintain current written order for one child with Benadryl.				
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					
O	111. Group size: no larger than 8	Failed to maintain proper group size not to exceed 8 children when 11 children were observed in the gym without a complete enclosed divider.				
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					

X	119. Diaper area- sturdy, safety rail, nonporous, exclusive use			
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			
X	132. No toys, objects less than 1/1/4" diameter			
X	133. Plastic bags, balloons, Styrofoam objects inaccessible			
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			
X	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:

Front grass area of building is not licensed and children cannot utilize area until then.
 2nd hall child bathroom ceiling vent is very dusty.
 There is a strong foul odor coming out of faucets in Garden, Cotton Candy and Ahoy rooms.
 Program must submit local health, fire approvals, floor plan, change form to change room from preschool to under 3s. OEC will inspect before approval.

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)
Lori Mangano (Printed Name)	 (Printed Name)	02/22/2024	Marcos Almeida (Printed Name)