



**DIVISION OF LICENSING**  
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**CHILD CARE CENTER/GROUP CHILD CARE HOME  
 INVESTIGATION**

<b>Program Name</b>	THE LEARNING EXPERIENCE - WETHERSFIELD				<b>License Number</b>	DCCC.70534	<b>Date of Inspection</b>	02/15/2024
					<b>Expiration Date</b>	1/31/2028	<b>Time of Inspection</b>	01:00 PM
<b>Address</b>	88 EXECUTIVE SQ WETHERSFIELD CT 06109-3803				<b>Telephone</b>	(860) 785-8889	<b>Total Capacity</b>	119
					<b>Days and Hours</b>	MONDAY-FRIDAY 6:30AM-6:30PM	<b>Under Three Capacity</b>	64
<b>#Children Present</b>	58	<b># Under 3 Present</b>	32	<b># Staff Present</b>	13		<b>Summer Care</b>	Open
<b>Purpose of Investigation</b>	Case 2024-99				<b>Name of Inspector</b>	Valecia Williams		
<b>Program's Email</b>	wethersfield@tlechildcare.com				<b>Inspector's Email</b>	valecia.williams@ct.gov		

**Regulatory Violations**

<b>Statute and/or Regulation</b>	<b>Description:</b>
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<b>Other Findings- Regulations In Compliance or Pending</b>	
<b>Statute and/or Regulation</b> [19a-79-3a]	<b>Description</b> 001b-Administration-Ensuring the safety, health & development of children
Administration compliance is pending further investigation	
<b>Statute and/or Regulation:</b> [19a-79-3a(b)(7) &/or 19a-79-4a(3)]	<b>Description:</b> 003-Annual Staff Training
Program provided annual training/orientation to staff on program's policies and procedures. Program in compliance.	

<b>Statute and/or Regulation:</b> [19a-79-3a(b)(8)(A)]	<b>Description:</b> 003b-Managing Child Behavior
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Managing child behavior compliance is pending further investigation

<b>Statute and/or Regulation:</b> [19a-79-4a(c)(3)(A) thru (C)]	<b>Description:</b> 020a- Staff Personal Qualities
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Staff personal qualities compliance is pending further investigation

<b>Statute and/or Regulation:</b> 19a-79-4a(c)(4)(D)	<b>Description:</b> 021b-Supervision
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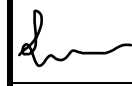
Per director/staff staff are ensuring the supervision of the children at all times. Program in compliance.

<b>YES/NO:</b> No	<b>WERE VIOLATIONS CITED DURING THIS VISIT?</b>
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**Discussions**

**Comments**

**NOTE:** Items left blank on this form were not monitored during this visit.  
 Only the regulations marked as compliant or non-compliant 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)
Valecia Williams (Printed Name)	(Printed Name)		Stacey Brengi Swampna Vengalam (Printed Name)