



## DIVISION OF LICENSING

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### CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

<b>Program Name</b>	<b>THE SMART START PRESCHOOL &amp; LEARNING CENTER</b>				<b>License Number</b>	<b>DCCC.16844</b>	<b>Date of Inspection</b>	<b>02/15/2024</b>		
					<b>Expiration Date</b>	<b>9/30/2026</b>	<b>Time of Inspection</b>	<b>09:12 AM</b>		
<b>Address</b>	<b>4133 WHITNEY AVE HAMDEN CT 06518-1432</b>				<b>Telephone</b>	<b>(203) 660-7158</b>	<b>Licensed Capacity</b>	<b>58</b>		
					<b>Hours of Operation</b>	<b>FROM: 7:00AM TO: 6:00PM;</b>	<b>Infant/Toddler Capacity</b>	<b>32</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>12 years</b>	<b>Water Supply</b>	<b>Public Water</b>
					<b>Program's Email</b>	<b>thesmartstartpreschool@gmail.com</b>				
<b>Operator</b>	<b>THE SMART START PRESCHOOL &amp; LEARNING CENTER LLC</b>				<b>Name of Inspector</b>	<b>Jenn Schulz</b>				
<b>Director</b>	<b>NATASHA MENDES</b>				<b>Inspector's Email</b>	<b>jennifer.schulz@ct.gov</b>				
<b>Key:</b> Compliant = X Non-Compliant = O	<b># of Infants - Toddlers Present</b>	<b>24</b>	<b># of Total Children Present</b>	<b>33</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: 11/16/2023	
<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	10/12/0202
<b>X</b>	10. OEC Complaint procedure	
	11. Food Service Certificate	N/A?
	Date	X
<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
	04/15/20	1.3
<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>○</b>	16. Staff Health records – TB tests	Failed to maintain complete medical statements when one staff file was observed to be missing proof of TB results and one staff file was missing current adult health statement.
<b>X</b>	17. Professional development	
<b>X</b>	18. Disciplinary actions	
<b>○</b>	18b. Background checks	Failed to ensure staff have completed background checks



<input type="radio"/>	37. Child health records and immunizations	Failed to maintain current immunization records for children when one student file missing documentation of current flu immunization.	
<input type="radio"/>	38. Individual care plan (signed by parents and staff)	Failed to maintain complete individual care plans when all care plans were observed to not be signed by all staff resistible for the care of the child.	
<input checked="" type="checkbox"/>	39. Injury, Illness, Accident reports		
<b>HEALTH AND SAFETY 19a-79-6a</b>			
<input checked="" type="checkbox"/>	40. Nutritious snacks and meals (required food groups)		
<input checked="" type="checkbox"/>	41. Proper refrigeration (max 45°)		
<input checked="" type="checkbox"/>	42. Kitchen separated	N/A?	
<input checked="" type="checkbox"/>	43. Hand washing – before eating or food handling		
<input checked="" type="checkbox"/>	44. First Aid Kit(s) – Indoor, Outdoor, Field Trips, Inventory		
<b>PHYSICAL PLANT 19a-79-7a</b>			
<input type="radio"/>	45. License premises – clean, good repair, hazard free	Failed to maintain the building and equipment in a state of good repair when the doors and door frames in student bathrooms were observed to be soiled, baseboard trim throughout to have accumulated dust and debris. Observed microwaves throughout to have dried food matter. Continued in comments section.	
<input checked="" type="checkbox"/>	47b. Plans for new construction, expansion, renovation or conversion		
<input checked="" type="checkbox"/>	48. Sanitary drinking fountains – disposable cups		
<input checked="" type="checkbox"/>	49. Lead Water Test (N/A?) 11/15/2023	Bacterial/Chemical Test (N/A?)	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	50. Walkways maintained		
<input checked="" type="checkbox"/>	51. Designated staff toilet/sink		
<input checked="" type="checkbox"/>	52. All openings for ventilation screened		
<input checked="" type="checkbox"/>	53. Windows protected to prevent falls		
<input checked="" type="checkbox"/>	54. Glass protected up to 36"		
<input checked="" type="checkbox"/>	55. Overhead doors – locking devices, spring protectors		
<input checked="" type="checkbox"/>	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	
○	65. Ventilation in toilet rooms	Failed to ensure that toilet rooms have mechanical ventilation when the preschool bathroom vent wa observed to not be in working order.
X	66. Air temperature 65 degrees, thermometer affixed	
X	67. Water temperature 60° – 115°	
X	68. Portable space heaters	
○	69. Walls, ceilings, floors and rugs – clean, good repair	Failed to maintain walls, ceilings in a good state of repair when the walls in the Children's bathrooms were observed to have peeling paint, stains and soiled areas. Observed stained/soiled cloth dividers by the hand wash sink and art storage in the toddler 2 room. Observed dusty wall vent in preschool.
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	

<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

<input type="radio"/>	99. Administration, parent permission, MAR	Failed to maintain complete written parent permission for medication when parent permissions forms were observed missing start and or end dates throughout all under 3 classrooms.
<input checked="" type="checkbox"/>	100. Labeling, storage	

### ORAL/TOPICAL/INHALENT MEDICATIONS

<input checked="" type="checkbox"/>	101. Med trained staff, certificates O/T/I    Injectable Y        Y	
<input type="radio"/>	102. Authorized prescriber, parent permission, MAR	Failed to maintain 2 current written orders when the Med admin forms observed to be more than 1 Year.
<input checked="" type="checkbox"/>	103. Labeling, storage	
<input type="radio"/>	104. Unused, expired meds returned/disposed	Failed to ensure that expired medication is destroyed or returned to the parent when an epi en was observed to have an expiration date of 1/24

### SELF-ADMINISTRATION

<input checked="" type="checkbox"/>	105. Authorized prescriber, parent permission, MAR	
<input checked="" type="checkbox"/>	106. Labeling, storage	
<input checked="" type="checkbox"/>	107. Approved petition for special medication authorization	

### INFANT/TODDLER ENDORSEMENT 19a-79-10

Yes	Is there an approved endorsement?	
<input checked="" type="checkbox"/>	109. Approved endorsement	
<input checked="" type="checkbox"/>	110. Ratio: 1 staff to 4 children	
<input type="radio"/>	111. Group size: no larger than 8	Failed to maintain proper group size not to exceed 8 children when 12 children under 3 years were observed in one group.
<input type="radio"/>	112. Physical barriers, groups of 8 (indoors and outdoors)	Failed to maintain a physical barrier separating each group of 8 children outdoors when 12 children under 3 were observed on 1 playground.
<input checked="" type="checkbox"/>	113. Adequate sinks in program space	
<input checked="" type="checkbox"/>	114. Free standing, well-constructed, safe cribs	
<input checked="" type="checkbox"/>	115. Washable cots	
<input checked="" type="checkbox"/>	116. Chairs for feeding, stable, safety straps, locking tray	
<input checked="" type="checkbox"/>	117. Developmentally appropriate tables, chairs, equipment	
<input checked="" type="checkbox"/>	118. Refrigerators and food prep facilities	

<b>X</b>	119. Diaper area- sturdy, safety rail, nonporous, exclusive use			
<b>X</b>	120. Diaper area- washed, disinfected			
<b>X</b>	121. Diaper area- disposable paper sheets			
<b>X</b>	122. Covered waste receptacle			
<b>X</b>	123. Diaper changing policy posted, followed			
<b>X</b>	124. Hand washing policy posted, followed			
<b>X</b>	125. Individual storage of personal items			
<b>X</b>	126. Cribs/cots washed and disinfected			
<b>X</b>	127. Under 12 months- placed on back for sleeping			
<b>X</b>	128. Alternate sleep position- equipment, medical documentation	Yes	No	
			<b>X</b>	
<b>X</b>	129. Crib, bed used for infant sleeping			
<b>X</b>	130. Crib, bed free from observable hazards			
<b>X</b>	131. Infant toys separate, washed, disinfected daily			
<b>X</b>	132. No toys, objects less than 1/1/4" diameter			
<b>O</b>	133. Plastic bags, balloons, Styrofoam objects inaccessible	Failed to ensure plastic bags, balloons and styrofoam objects are not accessible to children when plastic bags were observed in the rolling carts of drawers in, under 3 classrooms accessible to children. Observed foam pieces in plastic bag on changing table in toddler 1 room, accessible.		
<b>X</b>	134. Health consultant, doc. of visits			
<b>X</b>	135. Infants held for bottles, indiv. attention, tummy time			
<b>X</b>	136. Written statement, feeding schedule from parent			
<b>X</b>	137. Unused portions of liquids discarded			
<b>X</b>	138. Clean Bottles, disp. bottles, approved bottle washing			
<b>X</b>	139. Food served from dish or whole jar served			
<b>X</b>	140. Bottles individually identified with child's name			

**OUTDOOR PLAY SPACE - UNDER THREE**

<b>X</b>	141. Play space fenced	
<b>X</b>	142. Outdoor equipment developmentally appropriate	
<b>Yes</b>	Is there an approved endorsement?	<b>SCHOOL AGE ENDORSEMENT 19a-79-11</b>
<b>X</b>	143. Approved endorsement	
<b>X</b>	144. Activity choices appropriate	
<b>X</b>	145. Ratio – 1 staff to 10 children	
<b>X</b>	146. Group size – maximum 20 children	
<b>X</b>	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**




<b>X</b>	62. Consent Order - Negotiated Corrective Action Plan	N/A?	
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<b>YES or NO?</b> Yes	<b>WERE VIOLATIONS CITED DURING THIS VISIT?</b>
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**DISCUSSIONS:**  
**Observed staff animal with pacifier in child crib. Child not in the crib during visit.**

**COMMENTS:**  
**#45 Observed dangling cords accessible to children in preschool and toddler 3 classroom.**  
**Observed Cots stored in the upright position, on the short side in Toddler 2 and Toddler 3 classes, not secure.**

**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: <b>02/29/2024</b>	 (Signature of Person in Charge)
<b>Jenn Schulz</b> (Printed Name)	 (Printed Name)		<b>Natasha Mendes</b> (Printed Name)