



**DIVISION OF LICENSING**  
 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103  
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 Email: [oc.licensing@ct.gov](mailto:oc.licensing@ct.gov) Website: [www.ctoec.org](http://www.ctoec.org)

## CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

<b>Program Name</b>	<b>KID'S CLUB LEARNING CENTER</b>				<b>License Number</b>	<b>DCCC.70326</b>	<b>Date of Inspection</b>	<b>02/27/2024</b>		
					<b>Expiration Date</b>	<b>9/30/2024</b>	<b>Time of Inspection</b>	<b>08:24 AM</b>		
<b>Address</b>	<b>91 CHURCH ST SEYMOUR CT 06483-2611</b>				<b>Telephone</b>	<b>(203) 888-1547</b>	<b>Licensed Capacity</b>	<b>32</b>		
					<b>Hours of Operation</b>	<b>7:30AM-5:30PM M-F</b>	<b>Infant/Toddler Capacity</b>	<b>0</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>3 years</b>	<b>Maximum Age Served</b>	<b>12 years</b>	<b>Water Supply</b>	<b>Public Water</b>
					<b>Program's Email</b>	<b>Kidsclubseymour@gmail.com</b>				
<b>Operator</b>	<b>KIDS CLUB LEARNING CENTER. LLC</b>				<b>Name of Inspector</b>	<b>Kristi Morgan</b>				
<b>Director</b>	<b>ELIZABETH HEON</b>				<b>Inspector's Email</b>	<b>kristi.morgan@ct.gov</b>				
<b>Key:</b> Compliant = X Non-Compliant = O	<b># of Infants - Toddlers Present</b>	<b>0</b>	<b># of Total Children Present</b>	<b>8</b>	<b># of Staff Present</b>	<b>2</b>	<b>Type of Inspection</b>	<b>UNANNOUNCED INSPECTION - FULL</b>		

### LICENSURE PROCEDURES 19a-79-2a

<b>O</b>	<b>1. Local Health Inspection</b>	Failed to maintain current local health inspection
	Date: 06/11/2021	
<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>O</b>	<b>3. Annual Staff Policy Training</b>	Failed to maintain documentation for 1 staff.
<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>	

<input type="radio"/>	5. Notification of Change	Failed to provide notification of change of personnel changes. Change in education and health consultant not observed.	
<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		
<b>ITEMS POSTED – ACCESSIBLE</b>			
<input checked="" type="checkbox"/>	8. License		
<input type="radio"/>	9. Fire Marshal certificate	Failed to maintain a current fire marshal inspection.	
	Date	02/08/2023	
<input checked="" type="checkbox"/>	10. OEC Complaint procedure		
	11. Food Service Certificate	N/A?	
	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	N/A?	
	Date	Results	
	01/01/20	2.3	
<input checked="" type="checkbox"/>	15a. Developmental Milestones		
<input checked="" type="checkbox"/>	15b. Access		
<input type="radio"/>	15bb. Endorsements	Failed to obtain the endorsement for children under age three. Program enrolled a child who had not yet turned 32 months of age. Child's start date was documented as 12/13/2023.	
<b>STAFFING 19a-79-4a</b>			
<input checked="" type="checkbox"/>	15c. Staffing		
<input type="radio"/>	16. Staff Health records – TB tests	Failed to maintain current medical statements. 3 out of 4 staff files reviewed have expired health forms. 1 staff TB from 2019 and they were rehired in 2024.	
<input type="radio"/>	17. Professional development	Failed to document complete professional development for 1 of 4 staff reviewed (head teacher).	
<input checked="" type="checkbox"/>	18. Disciplinary actions		
<input checked="" type="checkbox"/>	18b. Background checks		

<input type="radio"/>	19. Designated Head Teacher	Failed to maintain an approved head teacher on site for 60% of the operating hours. Attendance records verify that listed head teacher has not been on site 30 hours or more per week.				
<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 type="radio"/>	24. CPR Certified Staff (Group Home N/A)	Failed to ensure at least one CPR trained staff is present during all hours of operation. 2 opening staff on site without current CPR certificates.				
<input type="radio"/>	25. First Aid Trained Staff	Failed to maintain current first aid certificates. 2 opening staff on site without current fist aid certificates.				
<input checked="" type="checkbox"/>	26. Consultants- Agreements and Contracts					
<input checked="" type="checkbox"/>	27. Logs – Visits documented					
	Not in Compliance?	Education	Health	Social Service	Dental	Dietician N/A? <input checked="" type="checkbox"/>
	Contracts					
	Logs					
	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					
<b>RECORD KEEPING 19a-79-5a</b>						
<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					

<input type="radio"/>	37. Child health records and immunizations	Failed to maintain current health records for 2 children.	
<input checked="" type="checkbox"/>	38. Individual care plan (signed by parents and staff)		
<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, equipment and services. Observed bathroom stall walls rusting; bathroom ceiling vent dusty; 3 shelves/cubbies unsecured; microwave unclean; cords unsecured posing a tripping hazard by book area; floor and walls by bathrooms in disrepair.	
<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?) 05/25/2022	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	
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. Observed "7th generation" cleaner on top of paper towel holder and in unlocked closet.
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	
	88. Impact absorbing material under equipment	
<b>O</b>	89. Playground free from hazards	Failed to ensure the playground is free of glass, debris, holes and other hazards. Observed goose feces in many spots on the playground; observed the cover to the sandbox in disrepair - cover broken off of hinges.
<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						
<b>X</b>	99. Administration, parent permission, MAR					
<b>X</b>	100. Labeling, storage					
ORAL/TOPICAL/INHALENT MEDICATIONS						
<b>X</b>	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%;">Injectable</td> </tr> <tr> <td style="text-align: center;">Y</td> <td></td> </tr> </table>	O/T/I	Injectable	Y		
O/T/I	Injectable					
Y						
<b>X</b>	102. Authorized prescriber, parent permission, MAR					
<b>X</b>	103. Labeling, storage					
<b>X</b>	104. Unused, expired meds returned/disposed					
SELF-ADMINISTRATION						
<b>X</b>	105. Authorized prescriber, parent permission, MAR					
<b>X</b>	106. Labeling, storage					
<b>X</b>	107. Approved petition for special medication authorization					
<b>No</b>	Is there an approved endorsement?	<b>INFANT/TODDLER ENDORSEMENT 19a-79-10</b>				
	109. Approved endorsement					
<b>○</b>	110. Ratio: 1 staff to 4 children	Failed to maintain proper staff/child ratios. Observed child under the age of 3 enrolled in program without signed permission in a preschool room with 14 children and 3 teachers.				
<b>○</b>	111. Group size: no larger than 8	Failed to maintain proper group size not to exceed 8 children. Observed child under the age of 3 enrolled in program without signed permission in a preschool room with 14 children and 3 teachers.				
	112. Physical barriers, groups of 8 (indoors and outdoors)					
	113. Adequate sinks in program space					
	114. Free standing, well-constructed, safe cribs					
	115. Washable cots					
	116. Chairs for feeding, stable, safety straps, locking tray					
	117. Developmentally appropriate tables, chairs, equipment					
	118. Refrigerators and food prop facilities					

119. Diaper area- sturdy, safety rail, nonporous, exclusive use			
120. Diaper area- washed, disinfected			
121. Diaper area- disposable paper sheets			
122. Covered waste receptacle			
123. Diaper changing policy posted, followed			
124. Hand washing policy posted, followed			
125. Individual storage of personal items			
126. Cribs/cots washed and disinfected			
127. Under 12 months- placed on back for sleeping			
128. Alternate sleep position- equipment, medical documentation	Yes	No	
		X	
129. Crib, bed used for infant sleeping			
130. Crib, bed free from observable hazards			
131. Infant toys separate, washed, disinfected daily			
132. No toys, objects less than 1/1/4" diameter			
133. Plastic bags, balloons, Styrofoam objects inaccessible			
134. Health consultant, doc. of visits			
135. Infants held for bottles, indiv. attention, tummy time			
136. Written statement, feeding schedule from parent			
137. Unused portions of liquids discarded			
138. Clean Bottles, disp. bottles, approved bottle washing			
139. Food served from dish or whole jar served			
140. Bottles individually identified with child's name			

**OUTDOOR PLAY SPACE - UNDER THREE**

	141. Play space fenced	
	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>O</b>	144. Activity choices appropriate	<b>Failed to provide adequate opportunities for age appropriate activities. School aged children are combined with preschool when they arrive after school. No additional equipment (age appropriate tables, chairs, activities) provided beyond their homework and iPads.</b>
<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**

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

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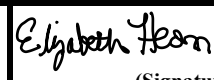
**DISCUSSIONS:**

1. 1 staff re-hired in 2024 does not have an updated new hire orientation.
2. Impact absorbing material not monitored due to being snow covered. Depth could not be determined, program to maintain compliance at all times.
3. School age room not currently being used for children but remains licensed and in programs capacity. Room currently being used for storage and as an office. Program to either clean out room and bring it into compliance or remove from license.

**COMMENTS:**

No children currently enrolled with medications.

**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)
<b>Kristi Morgan</b> (Printed Name)	<b>Kristi Morgan</b> (Printed Name)	<b>03/12/2024</b>	<b>Elizabeth Heon</b> (Printed Name)