



DIVISION OF LICENSING
 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103
 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552
 Email: oc.licensing@ct.gov Website: www.ctoec.org

CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

Program Name	THE LEARNING EXPERIENCE - STAMFORD				License Number	DCCC.70585	Date of Inspection	02/27/2024		
					Expiration Date	11/30/2024	Time of Inspection	10:00 AM		
Address	421 ATLANTIC ST STAMFORD CT 06901-3513				Telephone	(203) 595-5271	Licensed Capacity	123		
					Hours of Operation	6:30-6:30 M-F SEPT TO AUG	Infant/Toddler Capacity	72		
Is this a Change of Address?	Yes?		No?	X			Summer Care	Open		
New Address					Minimum Age Served	6 weeks	Maximum Age Served	8 years	Water Supply	Public Water
					Program's Email	stamford@tlechildcare.com				
Operator	READ 2 LEARN STAMFORD, LLC				Name of Inspector	Lori Mangano				
Director	ALLIYAH TRIMM LEWIS				Inspector's Email	lori.mangano@ct.gov				
Key: Compliant = X Non-Compliant = O	# of Infants - Toddlers Present	61	# of Total Children Present	81	# of Staff Present	27	Type of Inspection	UNANNOUNCED INSPECTION - FULL		

LICENSURE PROCEDURES 19a-79-2a

X	1. Local Health Inspection	
	Date: 03/31/2022	
X	1a. False or Misleading Statements	

ADMINISTRATION 19a-79-3a

O	1b. Administration	(a)Failed to ensure the safety, health and development of the children when nurse consultant indicated on 12/5/23 that a child had a febrile seizure and program does not have an individual care plan for that child.
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 when 10 out of 10 files did not have documentation that it was completed.
X	4b. Failure to report	

<input type="radio"/>	5. Notification of Change	Failed to provide notification of change when the left side of the playground was divided into 2 sections, program is preparing lunch on the premises and program still does not have a head teacher.	
<input checked="" type="radio"/>	6. Program policies	Including discipline, supervision, child protection, general operating, personnel, closing time	
<input checked="" type="radio"/>	7. Daily Attendance Records- staff and children		
ITEMS POSTED – ACCESSIBLE			
<input checked="" type="radio"/>	8. License		
<input checked="" type="radio"/>	9. Fire Marshal certificate		
	Date	06/05/2023	
<input checked="" type="radio"/>	10. OEC Complaint procedure		
<input type="radio"/>	11. Food Service Certificate	<u>N/A?</u>	Failed to post current Food Service Certificate in a conspicuous location when observed program does not have a certificate and they are preparing lunch on site.
	Date		
<input checked="" type="radio"/>	12. Menus		
<input checked="" type="radio"/>	13. Emergency plans		
<input checked="" type="radio"/>	14. No Smoking Signs		
<input checked="" type="radio"/>	15. Radon Test	<u>N/A?</u>	
	Date	Results	
	11/16/20	0.5	
<input checked="" type="radio"/>	15a. Developmental Milestones		
<input checked="" type="radio"/>	15b. Access		
<input checked="" type="radio"/>	15bb. Endorsements		
STAFFING 19a-79-4a			
<input checked="" type="radio"/>	15c. Staffing		
<input type="radio"/>	16. Staff Health records – TB tests	Failed to maintain medical statement(s) and TB for 3 out of 10 staff.	
<input type="radio"/>	17. Professional development	Failed to document new employee orientation and annual policy training for 10 out of 10 staff.	
<input checked="" type="radio"/>	18. Disciplinary actions		
<input type="radio"/>	18b. Background checks	Failed to ensure staff have completed background checks for 2 staff members and they are both working with children.	

<input type="radio"/>	19. Designated Head Teacher	Failed to maintain an approved head teacher when observed no designated head teacher.				
<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 checked="" type="checkbox"/>	24. CPR Certified Staff (Group Home N/A)					
<input checked="" type="checkbox"/>	25. First Aid Trained Staff					
<input type="radio"/>	26. Consultants- Agreements and Contracts	Failed to maintain current consultant agreement for dental consultant when contract expired 4-4-23.				
<input type="radio"/>	27. Logs – Visits documented	Failed to document annual review of policies, plans, procedures and education programs for dental and health consultant.				
	Not in Compliance?	Education	Health	Social Service	Dental	Dietician N/A?
	Contracts				<input type="radio"/>	
	Logs		<input type="radio"/>		<input type="radio"/>	
	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					
RECORD KEEPING 19a-79-5a						
<input type="radio"/>	32. Enrollment information	Failed to maintain complete enrollment information for each child when 10 out of 10 were missing parent business address on file.				
<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 complete immunization records for 4 out of 10 children missing flu vaccines.	
<input type="radio"/>	38. Individual care plan (signed by parents and staff)	Failed to maintain complete individual care plans when 6 care plans are not signed by any staff responsible for child's care.	
<input checked="" type="checkbox"/>	39. Injury, Illness, Accident reports		
HEALTH AND SAFETY 19a-79-6a			
<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		
PHYSICAL PLANT 19a-79-7a			
<input checked="" type="checkbox"/>	45. License premises – clean, good repair, hazard free		
<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?) 03/17/2023	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	
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	
O	69. Walls, ceilings, floors and rugs – clean, good repair	Failed to maintain walls, ceilings, floors and rugs in a good state of repair when 7 ceiling tiles were stained in total in rooms Prepper A, Twaddler C
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	
X	82. Equipment clean, good repair, safe, non-toxic	
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	
O	98. Training outline on file	Failed to maintain outline of medication training for injectables on site.

NONPRESCRIPTION TOPICAL MEDICATIONS

<input type="radio"/>	99. Administration, parent permission, MAR	Failed to maintain written parent permission for 3 diaper creams and one without a date range.
<input checked="" type="checkbox"/>	100. Labeling, storage	

ORAL/TOPICAL/INHALENT MEDICATIONS

<input type="radio"/>	101. Med trained staff, certificates O/T/I Injectable N N	Failed to ensure staff are trained in oral/topical/inhalant medications and injectables during all operating hours. Observed no documentation of trained staff from 630-7am and 445pm-630pm. Children present require all medications.
<input type="radio"/>	102. Authorized prescriber, parent permission, MAR	Failed to maintain written order from prescriber for medication for one child with a prescription diaper cream, 3 forms are missing child address and one form with incomplete parent section.
<input type="radio"/>	103. Labeling, storage	Failed to maintain proper storage of medication when one prescription diaper cream was not locked or labeled with child's name.
<input checked="" type="checkbox"/>	104. Unused, expired meds returned/disposed	

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 checked="" type="checkbox"/>	111. Group size: no larger than 8	
<input checked="" type="checkbox"/>	112. Physical barriers, groups of 8 (indoors and outdoors)	
<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 prop facilities	

<input type="radio"/>	119. Diaper area-sturdy, safety rail, nonporous, exclusive use	Failed to maintain a nonporous surface in good repair when 2 rooms have tears in changing pad. Rooms Twaddler B and C.		
<input checked="" type="checkbox"/>	120. Diaper area-washed, disinfected			
<input checked="" type="checkbox"/>	121. Diaper area-disposable paper sheets			
<input checked="" type="checkbox"/>	122. Covered waste receptacle			
<input checked="" type="checkbox"/>	123. Diaper changing policy posted, followed			
<input checked="" type="checkbox"/>	124. Hand washing policy posted, followed			
<input checked="" type="checkbox"/>	125. Individual storage of personal items			
<input checked="" type="checkbox"/>	126. Cribs/cots washed and disinfected			
<input checked="" type="checkbox"/>	127. Under 12 months- placed on back for sleeping			
<input checked="" type="checkbox"/>	128. Alternate sleep position-equipment, medical documentation	Yes	No	
			<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	129. Crib, bed used for infant sleeping			
<input checked="" type="checkbox"/>	130. Crib, bed free from observable hazards			
<input checked="" type="checkbox"/>	131. Infant toys separate, washed, disinfected daily			
<input type="radio"/>	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 in Prepper A room art materials less than 1 1/4 inches were observed accessible to children.		
<input checked="" type="checkbox"/>	133. Plastic bags, balloons, Styrofoam objects inaccessible			
<input checked="" type="checkbox"/>	134. Health consultant, doc. of visits			
<input checked="" type="checkbox"/>	135. Infants held for bottles, indiv. attention, tummy time			
<input checked="" type="checkbox"/>	136. Written statement, feeding schedule from parent			
<input checked="" type="checkbox"/>	137. Unused portions of liquids discarded			
<input checked="" type="checkbox"/>	138. Clean Bottles, disp. bottles, approved bottle washing			
<input checked="" type="checkbox"/>	139. Food served from dish or whole jar served			
<input checked="" type="checkbox"/>	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

X	62. Consent Order - Negotiated Corrective Action Plan	N/A?	
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<u>YES or NO?</u> Yes	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS:

Prepper B had downy spray in a low drawer.
 Preschool 2 TV and power cords are not secured.
 Acquire food service certificate from local health if preparing food on site. Program should not prepare food on site without local health approval. Send copy to OEC.
 Recommend new director TA.
 Recommend director monitor required postings on posting board routinely.
 Recommend program implement a system for organizing all paperwork required for licensing.

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)	Lori Mangano (Printed Name)	03/12/2024	Alliyah Trimm Lewis (Printed Name)