



DIVISION OF LICENSING
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CHILD CARE CENTER/GROUP CHILD CARE HOME SUPPLEMENTAL INSPECTION

Program Name	FUTURE SCHOLARS				License Number	DCCC.70584	Date of Inspection	03/12/2024
					Expiration Date	11/30/2024	Time of Inspection	08:05 AM
Address	30 CHURCH ST # 60 NAUGATUCK CT 06770-4112				Telephone	(203) 632-8567	Total Capacity	84
					Days and Hours	M-F 7-6:00PM	Under Three Capacity	44
#Children Present	17	# Under 3 Present	9	# Staff Present	5	Summer Care	Open	
Purpose of Inspection	follow up to full inspection				Name of Inspector	Kristi Morgan		
Program's Email	futurescholars2019@yahoo.com				Inspector's Email	kristi.morgan@ct.gov		

Violations

Statute and/or Regulation	Description	Comments
[19a-79-7a(d)(10)]	060-Approved Safety Outlets/Covers	Failed to ensure that electrical outlets are covered with safety covers or are approved safety outlets - 3 outlets in hallway by Pre-k 4.
[19a-79-7a(e)(10)]	076-Potentially Hazardous Substances Locked	Failed to ensure that potentially hazardous substances are stored in a locked area. Waddlers, Bumble Bees and Dragonflies had unlocked cabinets with cleaners/toxins inside, one febreze accessible in cabinet in Dragonflies.
[19a-79-9a(a)(2)]	099-Nonprescription Topical Medications: Administration/Parent Permission/MAR	Failed to maintain complete written parent permission for medication. Observed 8 forms without start and/or end dates.

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Other Findings - In Compliance

Statute and/or Regulation	Description	Comments
[19a-79-2a(c)(7)]	001-Local Health Inspection	
[19a-79-3a(e)(2)]	009-Current Fire Marshal Certificate	
[19a-79-3a(e)(5) and/or 19a-79-6a(a)(4)]	012-Menus	
19a-79-4a(c)(4)(D)	021b-Supervision	

[19a-79-5a(a)(2)(E)]	038-Individual Care Plan (Signed by Parent/Staff)	
[19a-79-6a and/or 19a-79-7a]	045-License Premise Clean/Good Repair/Safe	
[19a-79-9a(a)(3)]	100-Nonprescription Topical Medications: Labeling/Storage	
[19a-79-9a(b)(5)]	103-Oral/Topical/Inhalant/Inje ctable Medications: Labeling/Storage	



YES/NO: Yes **WERE VIOLATIONS CITED DURING THIS VISIT?**

Discussions:

- 2 bathroom vents dusty - School age and preschool
 - Care plan for one child not signed by one staff working in the classroom - child not in attendance.

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)		DATE CORRECTIONS DUE BY:	 (Signature of Person in Charge)
Kristi Morgan (Printed Name)		03/26/2024	Karen Dunn (Printed Name)