Connecticut Office of Early Childhood

DIVISION OF LICENSING

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CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

Program Name	DOLPHIN DAYS LEARNING CENTER VARAO, INC	License Number	DCCC.70337
		Date of Inspection	03/21/2024
		Expiration Date	11/30/2024
		Time of Inspection	12:35 PM
Address	9 OZICK DR DURHAM CT 06422-1022	Telephone	(860) 349-2335
		Licensed Capacity	145
		Hours of Operation	MONDAY THRU FRIDAY 6:30 AM TO 6:00 PM
		Infant/Toddler Capacity	55
Is this a Change of Address?	Yes?	No? X	
		Summer Care	Open
New Address		Minimum Age Served	6 weeks
		Maximum Age Served	12 years
		Water Supply	Public Water
		Program's Email	jvarao@yahoo.com
Operator	VARAO, INC	Name of Inspector	Bridget Merrill
Director	NICOLE CARTA	Inspector's Email	bridget.merrill@ct.gov
Key: Compliant = X Non-Compliant = O	# of Infants – Toddlers Present: 40 # of Total Children Present: 80 # of Staff Present: 19	Type of Inspection	UNANNOUNCED INSPECTION - FULL

LICENSURE PROCEDURES 19a-79-2a

X	1. Local Health Inspection Date: 05/18/2022	
X	1a. False or Misleading Statements	

ADMINISTRATION 19a-79-3a

X	1b. Administration	
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 for 2 children.
X	4b. Failure to report	

X	5. Notification of Change	
X	6. Program policies	Including discipline, supervision, child protection, general operating, personnel, closing time
X	7. Daily Attendance Records- staff and children	
ITEMS POSTED – ACCESSIBLE		
X	8. License	
O	9. Fire Marshal certificate Date: 05/16/2022	Failed to maintain a current fire marshal inspection. Current posted certificate is more than 1 year old. Must submit current certificate once updated & with the corrective action plan.
X	10. OEC Complaint procedure	
	11. Food Service Certificate Date:	N/A? X
X	12. Menus	
X	13. Emergency plans	
X	14. No Smoking Signs	
X	15. Radon Test Date: 01/20/2010 Results: 1.2	N/A?
X	15a. Developmental Milestones	
X	15b. Access	
X	15bb. Endorsements	
STAFFING 19a-79-4a		
X	15c. Staffing	
O	16. Staff Health records – TB tests	Failed to maintain medical statement(s) for 2 staff. Failed to maintain TB test(s) for 2 staff. Failed to maintain current medical statement(s) for 1 staff.
X	17. Professional development	
X	18. Disciplinary actions	
O	18b. Background checks	Failed to ensure staff have completed background checks for 4 staff.

X	19. Designated Head Teacher	Program has interim plan for head teacher in place starting March 2024. Agreement with Ed consultant, with expanded role, viewed.
X	20. Two Staff present	
X	20a. Staff Qualities	
X	21. Ratio: 1 staff to 10 children	
X	21b. Supervision	
X	22. Group Size – maximum 20 children	
X	23. Designated director - Training	
X	24. CPR Certified Staff (Group Home N/A)	
X	25. First Aid Trained Staff	
X	26. Consultants- Agreements and Contracts	
O	27. Logs – Visits documented	Failed to document annual review of policies, plans, procedures and education programs by Social service consultant.

Not in Compliance?	Education	Health	Social Service	Dental	Dietician N/A? X
Contracts					
Logs			O		

	Do they take children swimming? N	SWIMMING
X	28. Non-swimmers identified	
X	29. Staff/Child Ratios	
X	30. CPR certified staff (20 years of age)	
X	31. Lifeguard certified - supervision	

RECORD KEEPING 19a-79-5a

X	32. Enrollment information	
O	33. Emergency medical permission	Failed to maintain emergency medical permission forms for 1 child.
X	34. Authorized release permission	
X	35. Field trip permission	
X	36. Transportation permission	

O	37. Child health records and immunizations	Failed to maintain complete immunization records for children for 1 child without documentation of Flu vaccination.
X	38. Individual care plan (signed by parents and staff)	
X	39. Injury, Illness, Accident reports	
HEALTH AND SAFETY 19a-79-6a		
X	40. Nutritious snacks and meals (required food groups)	
O	41. Proper refrigeration (max 45°)	Failed to maintain proper refrigeration for perishable foods 2D & 2C where unrefrigerated yogurt stick/ pouches & meat were observed in lunch boxes.
X	42. Kitchen separated	N/A?
X	43. Hand washing – before eating or food handling	
X	44. First Aid Kit(s) – Indoor, Outdoor, Field Trips, Inventory	
PHYSICAL PLANT 19a-79-7a		
O	45. License premises – clean, good repair, hazard free	Failed to maintain the building, equipment and services when stained ceiling tiles were observed in 2D, 3A & 4B, light bulbs were out in School age, 3A, Activity room, 3B, dusty ceiling or bathroom vents were observed in staff bathrooms, school age, 2D, 2C, 2B, 3B, 4A & Activity room.
X	47b. Plans for new construction, expansion, renovation or conversion	
X	48. Sanitary drinking fountains – disposable cups	
X	49. Lead Water Test (N/A?) 01/26/2023	Bacterial/Chemical Test (N/A?) X
X	50. Walkways maintained	
X	51. Designated staff toilet/sink	
X	52. All openings for ventilation screened	
X	53. Windows protected to prevent falls	
X	54. Glass protected up to 36”	
X	55. Overhead doors – locking devices, spring protectors	
X	56. Exits, Hallways and Stairs unobstructed	

X	57. Individual storage of clothing and bedding	
X	58. Smoking prohibited	
X	59. Matches and lighters inaccessible	
O	60. Electrical safety – outlets/cords	Failed to ensure that electrical outlets are covered with safety covers or are approved safety outlets in School age & Activity rooms.
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	
O	65. Ventilation in toilet rooms	Failed to ensure that toilet rooms are ventilated to the outside when vents in 1 of 2 bathrooms in Activity room & 4B were not functioning.
O	66. Air temperature 65 degrees, thermometer affixed	Failed to ensure that every area used by children has a thermometer affixed to the wall in Rainy Day room, 1A/B, 2A, 2B & 3A
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 trim was observed to be coming off the walls in Activity room & Rainy Day room.
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 in tall brown metal cabinets in kitchen, 3B bathroom & upper cabinet in 4B.
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	
O	89. Playground free from hazards	Failed to ensure that nuts, bolts and screws are tight, and those that protrude are covered or protected in School age yard between fencing with neighboring yard & under 3 yards. Observed a broken ride on car with a missing roof in Preschool yard.
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	
X	98. Training outline on file	

NONPRESCRIPTION TOPICAL MEDICATIONS		
O	99. Administration, parent permission, MAR	Per staff of 2A, administration of diaper cream is not kept on site. Failed to maintain written parent permission for medication for 5 diaper creams on site.
X	100. Labeling, storage	
ORAL/TOPICAL/INHALENT MEDICATIONS		
X	101. Med trained staff, certificates O/T/I: Y Injectable: Y	
X	102. Authorized prescriber, parent permission, MAR	
X	103. Labeling, storage	
X	104. Unused, expired meds returned/disposed	
SELF-ADMINISTRATION		
X	105. Authorized prescriber, parent permission, MAR	
X	106. Labeling, storage	
X	107. Approved petition for special medication authorization	
No	Is there an approved endorsement?	**INFANT/TODDLER ENDORSEMENT 19a-79-10**
X	109. Approved endorsement	
X	110. Ratio: 1 staff to 4 children	
X	111. Group size: no larger than 8	
X	112. Physical barriers, groups of 8 (indoors and outdoors)	
X	113. Adequate sinks in program space	
X	114. Free standing, well-constructed, safe cribs	
X	115. Washable cots	
X	116. Chairs for feeding, stable, safety straps, locking tray	
X	117. Developmentally appropriate tables, chairs, equipment	
X	118. Refrigerators and food prop facilities	

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

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

YES or NO?	WERE VIOLATIONS CITED DURING THIS VISIT?
Yes	

DISCUSSIONS:

Observed broken light switch cover in 1of 2 staff bathrooms & a broken bin with dominos in School age room.

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)
Bridget Merrill		04/04/2024	Nicole Carta one]
(Printed Name)	(Printed Name)		(Printed Name)