



DIVISION OF LICENSING
 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103
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**CHILD CARE CENTER/GROUP CHILD CARE HOME
 SUPPLEMENTAL INSPECTION**

Program Name	HRA OF NBB FRANKLIN EARLY CHILDCARE LNG ADMY				License Number	DCCC.15645	Date of Inspection	04/01/2024
					Expiration Date	5/31/2025	Time of Inspection	12:15 PM
Address	180 CLINTON ST NEW BRITAIN CT 06053-3512				Telephone	(860) 348-2205	Total Capacity	498
					Days and Hours	FROM: 7:00AM TO: 5:00PM	Under Three Capacity	48
#Children Present	246	# Under 3 Present	39	# Staff Present	55	Summer Care	Open	
Purpose of Inspection	Finish inspection from 3/28/24				Name of Inspector	Betty Mayer		
Program's Email	agriswold@hranbct.org				Inspector's Email	elizabeth.mayer@ct.gov		

Violations

Statute and/or Regulation	Description	Comments
[-]	000 No Violations	No violations were cited during this inspection

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Other Findings - In Compliance

Statute and/or Regulation	Description	Comments
[19a-79-3a(b)(7) &/or 19a-79-4a(3)]	002-New Staff/Employee Orientation	
[19a-79-3a(b)(7) &/or 19a-79-4a(3)]	003-Annual Staff Training	
[19a-79-4a(a)(1) and/or 19a-79-4a(a)(2)]	016-Staff Health Records	
[19a-79-4a(a)(3) and/or 19a-79-4a(g)]	017-Professional Development	

[19a-79-4a(a)(4)]	018-Disciplinary Actions	
[19a-79-4a(b)]	018b-Background Checks	
[19a-79-4a(e)(1) and/or 19a-79-4a(f)]	024-CPR Certified Staff	
[19a-79-4a(e)(2) and/or 19a-79-4a(f)]	025-First Aid Trained Staff	



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

Discussions:

One staff missing statement of good health
 One staff missing annual policy review
 HRA medication authorization forms missing student address
 Staff with Heart Saver First Aid/CPR need supplemental certificate

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)	(Signature of OEC Representative)	DATE CORRECTIONS DUE BY:	 (Signature of Person in Charge)
Betty Mayer (Printed Name)	(Printed Name)		Amy Griswold (Printed Name)