



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	CENTRO RENACER BEFORE & AFTER SCHOOL				License Number	DCGH.80008		Date of Inspection	04/05/2024	
					Expiration Date	11/30/2027		Time of Inspection	08:50 AM	
Address	24 SALEM ST NEW HAVEN CT 06519-2235				Telephone	(203) 996-7143		Licensed Capacity	10	
					Hours of Operation	6:30A-6P		Infant/Toddler Capacity	0	
Is this a Change of Address?		Yes?						No?	x	
New Address					Minimum Age Served	3 years	Maximum Age Served	12 years	Water Supply	Public Water
					Program's Email	centroderenacer@yahoo.com				
Operator	CENTRO RENACER DAY CARE & LEARNING #2, LLC				Name of Inspector	Bridget Merrill				
Director	IVONNE M VARGAS				Inspector's Email	bridget.merrill@ct.gov				
Key: Compliant = X Non-Compliant = O	# of Infants - Toddlers Present	0	# of Total Children Present	4	# of Staff Present	3	Type of Inspection	UNANNOUNCED INSPECTION - FULL		

LICENSURE PROCEDURES 19a-79-2a

X	1. Local Health Inspection	
	Date:	
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	
X	4. Documentation of Behavior M. Tech Discussed w/parents	
X	4b. Failure to report	

X	5. Notification of Change	
X	6. Program policies	Including discipline, supervision, child protection, general operating, personnel, closing time
O	7. Daily Attendance Records- staff and children	Failed to record daily attendance for children 1 & Failed to record daily attendance for staff 2.
ITEMS POSTED – ACCESSIBLE		
X	8. License	
X	9. Fire Marshal certificate	
	Date	06/27/2022
X	10. OEC Complaint procedure	
	11. Food Service Certificate	<u>N/A?</u>
	Date	X
X	12. Menus	
X	13. Emergency plans	
X	14. No Smoking Signs	
X	15. Radon Test	<u>N/A?</u>
	Date	Results
	01/18/2016	1.2
X	15a. Developmental Milestones	
X	15b. Access	
X	15bb. Endorsements	
STAFFING 19a-79-4a		
X	15c. Staffing	
X	16. Staff Health records – TB tests	
X	17. Professional development	
X	18. Disciplinary actions	
X	18b. Background checks	

X	19. Designated Head Teacher																													
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																													
	24. CPR Certified Staff (Group Home N/A)																													
X	25. First Aid Trained Staff																													
○	26. Consultants- Agreements and Contracts	Failed to maintain current consultant agreement for social services. Agreement on site is more than 1 yr old.																												
○	27. Logs – Visits documented	Failed to document annual review of policies, plans, procedures and education programs by social service consultant. Review on site is more than 1 yr old.																												
	Not in Compliance?	<table border="1"> <thead> <tr> <th>Education</th> <th>Health</th> <th>Social Service</th> <th>Dental</th> <th>Dietician</th> <th>N/A?</th> <th>x</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>x</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Contracts</td> <td></td> <td>x</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Logs</td> <td></td> <td>x</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Education	Health	Social Service	Dental	Dietician	N/A?	x			x					Contracts		x					Logs		x				
Education	Health	Social Service	Dental	Dietician	N/A?	x																								
		x																												
Contracts		x																												
Logs		x																												
	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																													
X	33. Emergency medical permission																													
X	34. Authorized release permission																													
○	35. Field trip permission	Failed to maintain field trip permission forms for 3 children.																												
X	36. Transportation permission																													

X	37. Child health records and immunizations		
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)		
X	41. Proper refrigeration (max 45°)		
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			
X	45. License premises – clean, good repair, hazard free		
X	47b. Plans for new construction, expansion, renovation or conversion		
X	48. Sanitary drinking fountains – disposable cups		
X	49. Lead Water Test (N/A?)	Bacterial/Chemical Test (N/A?)	X
	06/28/2022		
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	
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	
O	67. Water temperature 60° – 115°	Failed to ensure the water temperature is between 60-115 degrees at the classroom sink. Water temperature was 116.5*
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	
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	
		Y	
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		
X	98. Training outline on file		

NONPRESCRIPTION TOPICAL MEDICATIONS						
X	99. Administration, parent permission, MAR					
X	100. Labeling, storage					
ORAL/TOPICAL/INHALENT MEDICATIONS						
X	101. Med trained staff, certificates					
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; padding: 2px;">O/T/I</td> <td style="padding: 2px;">Injectable</td> </tr> <tr> <td style="text-align: center; padding: 2px;">Y</td> <td style="text-align: center; padding: 2px;">Y</td> </tr> </table>	O/T/I	Injectable	Y	Y	
O/T/I	Injectable					
Y	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				
	109. Approved endorsement					
	110. Ratio: 1 staff to 4 children					
	111. Group size: no larger than 8					
	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 prep 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	
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	
Is there	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	
Is there	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



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

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

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)		DATE CORRECTIONS DUE BY:	 (Signature of Person in Charge)
Bridget Merrill (Printed Name)		04/19/2024	Barbara M. Cruz (Printed Name)