



DIVISION OF LICENSING

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

CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

Program Name	CHILDREN OF AMERICA WETHERSFIELD				License Number	DCCC.70648	Date of Inspection	04/22/2024		
					Expiration Date	5/31/2026	Time of Inspection	08:55 AM		
Address	1199 SILAS DEANE HWY WETHERSFIELD CT 06109-4301				Telephone	(959) 223-2100	Licensed Capacity	136		
					Hours of Operation	Monday to Friday 6:30am-6:30pm	Infant/Toddler Capacity	56		
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	coawethersfieldct@childrenofamerica.com				
Operator	CHILDREN OF AMERICA (WETHERSFIELD) LLC				Name of Inspector	Johanne Dalo				
Director	LAUREN ELDRIDGE				Inspector's Email	johanne.dalo@ct.gov				
Key: Compliant = X Non-Compliant = O	# of Infants - Toddlers Present	36	# of Total Children Present	65	# of Staff Present	17	Type of Inspection	UNANNOUNCED INSPECTION - FULL		

LICENSURE PROCEDURES 19a-79-2a

X	1. Local Health Inspection	
	Date: 03/30/2023	
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
X	7. Daily Attendance Records- staff and children	
ITEMS POSTED – ACCESSIBLE		
X	8. License	
X	9. Fire Marshal certificate	
	Date	04/19/2024
X	10. OEC Complaint procedure	
X	11. Food Service Certificate	N/A?
	Date	06/30/2024
X	12. Menus	
X	13. Emergency plans	
X	14. No Smoking Signs	
X	15. Radon Test	N/A?
	Date	Results
	12/02/2021	1.0pCi/L
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	

<input checked="" type="checkbox"/>	19. 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 type="checkbox"/>	24. CPR Certified Staff (Group Home N/A)	Failed to ensure at least one CPR trained staff is present during all hours of operation when per attendance no staff on site trained in CPR on 4/16 and 4/17 from 5:30pm -6:30pm.																				
<input type="checkbox"/>	25. First Aid Trained Staff	Failed to ensure at least one first aid trained staff is present during all operating hours when per attendance no staff on site trained in First Aid on 04/16 and 4/17 from 5:30pm-6:30pm.																				
<input type="checkbox"/>	26. Consultants- Agreements and Contracts	Failed to maintain current consultant agreements for the dietitian consultant.																				
<input type="checkbox"/>	27. Logs – Visits documented	Failed to document annual review of policies, plans, procedures and education programs by Dietitian Consultant.																				
	Not in Compliance?	<table border="1"> <thead> <tr> <th>Education</th> <th>Health</th> <th>Social Service</th> <th>Dental</th> <th>Dietician N/A?</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Contracts</td> <td></td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Logs</td> <td></td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> </tbody> </table>	Education	Health	Social Service	Dental	Dietician N/A?					<input type="checkbox"/>	Contracts				<input type="checkbox"/>	Logs				<input type="checkbox"/>
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				<input type="checkbox"/>																		
Contracts				<input type="checkbox"/>																		
Logs				<input type="checkbox"/>																		
	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 checked="" type="checkbox"/>	32. Enrollment information																					
<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																					

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		
O	44. First Aid Kit(s) – Indoor, Outdoor, Field Trips, Inventory	Failed to maintain complete first aid kit(s) when observed no first aid manual in the outdoor and indoor first aid kits.	
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		
O	49. Lead Water Test (N/A?) 11/23/2021	Bacterial/Chemical Test (N/A?) X	Failed to conduct a lead water test every 2 years
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	
○	66. Air temperature 65 degrees, thermometer affixed	Failed to ensure that every area used by children has a thermometer affixed to the wall when observed 3 classrooms without affixed thermometers.
X	67. Water temperature 60° – 115°	
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	
○	76. Potentially hazardous substances locked	Failed to ensure that potentially hazardous substances are stored in a locked area when observed Clorox wipes accessible to children on the counter in City Place and a cleaning spray not locked in Infant C
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	
O	82. Equipment clean, good repair, safe, non-toxic	Failed to ensure that equipment is clean and safe for children when observed 2 dramatic play oven not locked.
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		
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<input type="radio"/>	99. Administration, parent permission, MAR	Failed to maintain written parent permission for medication when observed 2 diaper cream without forms.
<input checked="" type="checkbox"/>	100. Labeling, storage	

ORAL/TOPICAL/INHALENT MEDICATIONS		
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<input type="radio"/>	101. Med trained staff, certificates	Failed to ensure staff are trained to administer injectable medications when observed 3 children attending the program requiring epinephrine and no staff on site trained.	
	O/T/I		Injectable
	N		N
<input checked="" type="checkbox"/>	102. Authorized prescriber, parent permission, MAR		
<input type="radio"/>	103. Labeling, storage	Failed to maintain proper storage of medication when observed Motrin not locked.	
<input checked="" type="checkbox"/>	104. Unused, expired meds returned/disposed		

SELF-ADMINISTRATION		
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<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		
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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	

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	<table border="1"> <tr> <td>Yes</td> <td>No</td> </tr> <tr> <td></td> <td>X</td> </tr> </table>	Yes	No		X
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					
O	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 observed small plastic object in the sensory and small cubes on shelf (Two's B)				
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

	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:

- 1 rug not secured
- 1 infant without feeding schedule
- 1 authorization to release permission with name other than parent name.

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)
Johanne Dalo (Printed Name)	Alexandra Rodriguez (Printed Name)	05/06/2024	Lauren Eldridge (Printed Name)