



**DIVISION OF LICENSING**  
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## CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

<b>Program Name</b>	<b>BRIGHT HORIZONS AT WILTON</b>				<b>License Number</b>	<b>DCCC.15879</b>	<b>Date of Inspection</b>	<b>04/29/2024</b>		
					<b>Expiration Date</b>	<b>3/31/2025</b>	<b>Time of Inspection</b>	<b>09:00 AM</b>		
<b>Address</b>	<b>7 GODFREY PL</b>				<b>Telephone</b>	<b>(203) 834-2616</b>	<b>Licensed Capacity</b>	<b>86</b>		
	<b>WILTON CT 06897-3011</b>				<b>Hours of Operation</b>	<b>M-F 8:00AM - 6:00PM</b>	<b>Infant/Toddler Capacity</b>	<b>56</b>		
<b>Is this a Change of Address?</b>	<b>Yes?</b>		<b>No?</b>	<b>X</b>			<b>Summer Care</b>	<b>Open</b>		
<b>New Address</b>					<b>Minimum Age Served</b>	<b>6 weeks</b>	<b>Maximum Age Served</b>	<b>12 years</b>	<b>Water Supply</b>	<b>Public Water</b>
					<b>Program's Email</b>	<b>lauren.halpin@brighthorizons.com</b>				
<b>Operator</b>	<b>BRIGHT HORIZONS CHILDREN'S CENTERS LLC</b>				<b>Name of Inspector</b>	<b>Terri Ruducha-Roberts</b>				
<b>Director</b>	<b>DAPHNE ROBERTS</b>				<b>Inspector's Email</b>	<b>terri.ruducha-roberts@ct.gov</b>				
<b>Key:</b> Compliant = X Non-Compliant = O	<b># of Infants - Toddlers Present</b>	<b>39</b>	<b># of Total Children Present</b>	<b>57</b>	<b># of Staff Present</b>	<b>16</b>	<b>Type of Inspection</b>	<b>UNANNOUNCED INSPECTION - FULL</b>		

### LICENSURE PROCEDURES 19a-79-2a

<b>X</b>	<b>1. Local Health Inspection</b>	
	Date: <b>09/27/2023</b>	
<b>X</b>	<b>1a. False or Misleading Statements</b>	

### ADMINISTRATION 19a-79-3a

<b>X</b>	<b>1b. Administration</b>	
<b>X</b>	<b>1bb. Capacity</b>	
<b>X</b>	<b>2. New Staff – Employee Orientation</b>	
<b>X</b>	<b>3. Annual Staff Policy Training</b>	
<b>X</b>	<b>3b. Managing child behavior</b>	
<b>X</b>	<b>4. Documentation of Behavior M. Tech Discussed w/parents</b>	
<b>X</b>	<b>4b. Failure to report</b>	

<input type="radio"/>	5. Notification of Change	Failed to provide notification of change for playground renovation and new head teacher	
<input type="radio"/>	6. Program policies	Including discipline, supervision, child protection, general operating, personnel, closing time Failed to implement policies, plans and procedures when staff in infant two did not wash own hands and child's hands before diapering, in toddler 3 didn't wash children's hands before and after diapering and in infant 1 didn't wash own hands and child's hands before diapering as observed	
<input checked="" type="checkbox"/>	7. Daily Attendance Records- staff and children		
<b>ITEMS POSTED – ACCESSIBLE</b>			
<input checked="" type="checkbox"/>	8. License		
<input type="radio"/>	9. Fire Marshal certificate	Failed to post fire marshal inspection in a conspicuous location	
	Date	05/12/2023	
<input checked="" type="checkbox"/>	10. OEC Complaint procedure		
	11. Food Service Certificate	N/A?	
	Date	X	
<input checked="" type="checkbox"/>	12. Menus		
<input checked="" type="checkbox"/>	13. Emergency plans		
<input checked="" type="checkbox"/>	14. No Smoking Signs		
<input checked="" type="checkbox"/>	15. Radon Test	N/A?	
	Date	Results	
	12/08/2006	0.1 and	
<input checked="" type="checkbox"/>	15a. Developmental Milestones		
<input checked="" type="checkbox"/>	15b. Access		
<input checked="" type="checkbox"/>	15bb. Endorsements		
<b>STAFFING 19a-79-4a</b>			
<input checked="" type="checkbox"/>	15c. Staffing		
<input checked="" type="checkbox"/>	16. Staff Health records – TB tests		
<input type="radio"/>	17. Professional development	Failed to document professional development when 3 staff didn't meet required hours for 2023	
<input checked="" type="checkbox"/>	18. Disciplinary actions		
<input checked="" type="checkbox"/>	18b. Background checks		

<b>X</b>	19. Designated Head Teacher	
<b>X</b>	20. Two Staff present	
<b>X</b>	20a. Staff Qualities	
<b>X</b>	21. Ratio: 1 staff to 10 children	
<b>X</b>	21b. Supervision	
<b>X</b>	22. Group Size – maximum 20 children	
<b>X</b>	23. Designated director - Training	
<b>X</b>	24. CPR Certified Staff (Group Home N/A)	
<b>X</b>	25. First Aid Trained Staff	
<b>X</b>	26. Consultants- Agreements and Contracts	
<b>X</b>	27. Logs – Visits documented	
	Not in Compliance?	<b>Education</b>
	Contracts	<b>Health</b>
	Logs	<b>Social Service</b>
		<b>Dental</b>
		<b>Dietician N/A? X</b>
Do they take children swimming? <b>N</b> <b>SWIMMING</b>		
<b>X</b>	28. Non-swimmers identified	
<b>X</b>	29. Staff/Child Ratios	
<b>X</b>	30. CPR certified staff (20 years of age)	
<b>X</b>	31. Lifeguard certified - supervision	
<b>RECORD KEEPING 19a-79-5a</b>		
<b>O</b>	32. Enrollment information	Failed to maintain complete enrollment information for each child when 4 out of 9 did not have an enrollment date
<b>X</b>	33. Emergency medical permission	
<b>X</b>	34. Authorized release permission	
<b>X</b>	35. Field trip permission	
<b>X</b>	36. Transportation permission	

<b>X</b>	37. Child health records and immunizations		
<b>O</b>	38. Individual care plan (signed by parents and staff)	Failed to maintain complete individual care plans when staff signatures were missing	
<b>X</b>	39. Injury, Illness, Accident reports		
<b>HEALTH AND SAFETY 19a-79-6a</b>			
<b>X</b>	40. Nutritious snacks and meals (required food groups)		
<b>X</b>	41. Proper refrigeration (max 45°)		
<b>X</b>	42. Kitchen separated	N/A?	
<b>X</b>	43. Hand washing – before eating or food handling		
<b>O</b>	44. First Aid Kit(s) – Indoor, Outdoor, Field Trips, Inventory	Failed to maintain complete first aid kit(s) missing 1 instant cold pack, 1 triangular bandage, current first aid manual, CPR face shield, and thermometer	
<b>PHYSICAL PLANT 19a-79-7a</b>			
<b>X</b>	45. License premises – clean, good repair, hazard free		
<b>O</b>	47b. Plans for new construction, expansion, renovation or conversion	Failed to notify the Agency prior to the start of construction of the renovated playground	
<b>X</b>	48. Sanitary drinking fountains – disposable cups		
<b>X</b>	49. Lead Water Test (N/A?) 01/24/2023	Bacterial/Chemical Test (N/A?)	<b>X</b>
<b>X</b>	50. Walkways maintained		
<b>X</b>	51. Designated staff toilet/sink		
<b>X</b>	52. All openings for ventilation screened		
<b>X</b>	53. Windows protected to prevent falls		
<b>X</b>	54. Glass protected up to 36”		
<b>X</b>	55. Overhead doors – locking devices, spring protectors		
<b>X</b>	56. Exits, Hallways and Stairs unobstructed		

<b>X</b>	57. Individual storage of clothing and bedding	
<b>X</b>	58. Smoking prohibited	
<b>X</b>	59. Matches and lighters inaccessible	
<b>X</b>	60. Electrical safety – outlets/cords	
<b>X</b>	61. Toileting needs met	
<b>X</b>	62. Required toilets, sinks, supplies	
<b>X</b>	63. Potty chairs – nonporous, emptied, disinfected	
<b>X</b>	64. Hand washing after toileting – staff and children	
<b>X</b>	65. Ventilation in toilet rooms	
<b>O</b>	66. Air temperature 65 degrees, thermometer affixed	Failed to ensure that the ambient air temperature is at least 65 degrees when measured 62 degrees Fahrenheit in infant 1 and infant 2 rooms
<b>O</b>	67. Water temperature 60° – 115°	Failed to ensure the water temperature is between 60-115 degrees when measured 117.9 degrees Fahrenheit in toddler 4, 117.7 degrees Fahrenheit in toddler 2, 119.1 degrees Fahrenheit in toddler 2 bathroom, 116.8 degrees Fahrenheit in the lab, and 117.1 degrees Fahrenheit in Kprep
<b>X</b>	68. Portable space heaters	
<b>X</b>	69. Walls, ceilings, floors and rugs – clean, good repair	
<b>X</b>	70. Rugs secure	
<b>X</b>	71. Hot water, steam pipes protected	
<b>X</b>	72. Working phone on each level	
<b>X</b>	73. Emergency numbers posted	
<b>X</b>	74. Adequate lighting - 50/30 candle feet	
<b>X</b>	75. Light fixtures shielded, shatter proof	
<b>X</b>	76. Potentially hazardous substances locked	
<b>X</b>	77. Garbage, rubbish disposed daily	

<b>X</b>	78. Stairs protected, good repair, handrails		
<b>X</b>	79. Pets – maintained, care plan	Y/N Y	
<b>X</b>	80. Operable CO detector on each level	N/A? Y	
<b>X</b>	81. Program space-adequate square footage per child		
<b>O</b>	82. Equipment clean, good repair, safe, non-toxic	Failed to ensure that equipment is free from protruding nails, rust, toxic material and other hazards when 1 toilet seat was loose in the preschool 3 bathroom, 2 toilet seats were porous in the preschool 3 bathroom, mirror not secured in lab	
<b>X</b>	83. Cots stored, maintained, adequate number		
<b>X</b>	84. Developmentally appropriate equipment		
<b>X</b>	85. Hot tubs, spas, saunas – locked and inaccessible	Y/N N	
<b>X</b>	86. No weapons, no facsimile of a firearm on premises		
<b>OUTDOOR SPACE</b>			
<b>X</b>	87. Outdoor space - adequate square footage per child		
<b>O</b>	88. Impact absorbing material under equipment	No documentation on site to verify new poured rubber surface and grass turf meets or exceeds 8 inches of impact material	
<b>X</b>	89. Playground free from hazards		
<b>X</b>	92. Equipment anchored, safely arranged		
<b>X</b>	93. Outdoor play area protected, fenced		
<b>X</b>	94. Drinking water available, accessible		
<b>EDUCATIONAL REQUIREMENTS 19a-79-8a</b>			
<b>X</b>	95. Written plan for daily program available to parents/staff		
<b>X</b>	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	
<b>ADMINISTRATION OF MEDICATIONS 19a-79-9a</b>			
<b>X</b>	97. Written policies, procedures		
<b>X</b>	98. Training outline on file		

NONPRESCRIPTION TOPICAL MEDICATIONS		
<input type="radio"/>	99. Administration, parent permission, MAR	Failed to maintain written parent permission for medication for 8 topical ointments and 1 expired 10.31.23
<input checked="" type="checkbox"/>	100. Labeling, storage	
ORAL/TOPICAL/INHALENT MEDICATIONS		
<input checked="" type="checkbox"/>	101. Med trained staff, certificates O/T/I    Injectable  Y        Y	
<input type="radio"/>	102. Authorized prescriber, parent permission, MAR	Failed to maintain written order from prescriber for medication for two medication and two medication orders were missing a parent signature
<input checked="" type="checkbox"/>	103. Labeling, storage	
<input type="radio"/>	104. Unused, expired meds returned/disposed	Failed to ensure that expired medication is destroyed or returned to the parent when an epi pen with an expiration date of 1/2024 was on site
SELF-ADMINISTRATION		
<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	
<b>Yes</b>	Is there an approved endorsement?	INFANT/TODDLER ENDORSEMENT 19a-79-10
<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 type="radio"/>	116. Chairs for feeding, stable, safety straps, locking tray	Failed to maintain safety straps on all high chairs when 1 strap was missing in infant 2 and 3 straps were missing in infant 3
<input checked="" type="checkbox"/>	117. Developmentally appropriate tables, chairs, equipment	
<input checked="" type="checkbox"/>	118. Refrigerators and food prep facilities	

<b>X</b>	119. Diaper area- sturdy, safety rail, nonporous, exclusive use			
<b>X</b>	120. Diaper area- washed, disinfected			
<b>X</b>	121. Diaper area- disposable paper sheets			
<b>X</b>	122. Covered waste receptacle			
<b>X</b>	123. Diaper changing policy posted, followed			
<b>X</b>	124. Hand washing policy posted, followed			
<b>X</b>	125. Individual storage of personal items			
<b>X</b>	126. Cribs/cots washed and disinfected			
<b>X</b>	127. Under 12 months- placed on back for sleeping			
<b>X</b>	128. Alternate sleep position- equipment, medical documentation	Yes	No	
			<b>X</b>	
<b>X</b>	129. Crib, bed used for infant sleeping			
<b>X</b>	130. Crib, bed free from observable hazards			
<b>X</b>	131. Infant toys separate, washed, disinfected daily			
<b>X</b>	132. No toys, objects less than 1/1/4" diameter			
<b>X</b>	133. Plastic bags, balloons, Styrofoam objects inaccessible			
<b>X</b>	134. Health consultant, doc. of visits			
<b>X</b>	135. Infants held for bottles, indiv. attention, tummy time			
<b>X</b>	136. Written statement, feeding schedule from parent			
<b>X</b>	137. Unused portions of liquids discarded			
<b>X</b>	138. Clean Bottles, disp. bottles, approved bottle washing			
<b>X</b>	139. Food served from dish or whole jar served			
<b>X</b>	140. Bottles individually identified with child's name			

**OUTDOOR PLAY SPACE - UNDER THREE**

<b>X</b>	141. Play space fenced	
<b>X</b>	142. Outdoor equipment developmentally appropriate	
<b>Yes</b>	Is there an approved endorsement?	<b>SCHOOL AGE ENDORSEMENT 19a-79-11</b>
<b>X</b>	143. Approved endorsement	
<b>X</b>	144. Activity choices appropriate	
<b>X</b>	145. Ratio – 1 staff to 10 children	
<b>X</b>	146. Group size – maximum 20 children	
<b>X</b>	147. Education Consultant appropriate	
<b>No</b>	Is there an approved endorsement?	<b>NIGHT CARE ENDORSEMENT 19a-79-12 (10pm-5am)</b>
	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	
<b>Y</b>	Child with diabetes enrolled?	<b>MONITORING OF DIABETES 19a-79-13</b>
<b>X</b>	154. Written policies and procedures	
<b>X</b>	155. On site staff trained in first aid, glucose testing	
<b>X</b>	156. Training current and documented	
<b>X</b>	157. Supervision of self-administration	
<b>X</b>	158. Equipment, supplies labeled and inaccessible	

<b>X</b>	159. Signed agreement with parents regarding equipment	
<b>X</b>	160. Materials discarded appropriately	
<b>X</b>	161. Authorized prescriber, parent permission	
<b>X</b>	162. Documentation of test results, actions taken	
<b>X</b>	163. Daily written parent notification	

**ADDITIONAL VIOLATIONS**

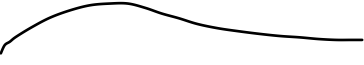


	62. Consent Order - Negotiated Corrective Action Plan	N/A?	
		<b>X</b>	

<b>YES or NO?</b> Yes	<b>WERE VIOLATIONS CITED DURING THIS VISIT?</b>
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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)	 (Signature of OEC Representative)	DATE CORRECTIONS DUE BY:	 (Signature of Person in Charge)
<b>Terri Ruducha-Roberts</b> (Printed Name)	<b>Terri Ruducha-Roberts</b> (Printed Name)	<b>05/13/2024</b>	<b>Nerissa Mancini</b> (Printed Name)