



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	HYLAND EARLY LEARNING CENTER				License Number	DCCC.12138		Date of Inspection	06/17/2024	
					Expiration Date	9/30/2026		Time of Inspection	09:40 AM	
Address	355 NEW BRITAIN AVE FL 1 HARTFORD CT 06106-3833				Telephone	(860) 757-0701		Licensed Capacity	65	
					Hours of Operation	MONDAY-FRIDAY 7:00AM-5:00PM		Infant/Toddler Capacity	8	
Is this a Change of Address?	Yes?		No?	X				Summer Care	Open	
New Address					Minimum Age Served	2 years	Maximum Age Served	12 years	Water Supply	Public Water
					Program's Email	jennifer.baglin@hartford.gov				
Operator	CITY OF HARTFORD				Name of Inspector	Johanne Dalo				
Director	JENNIFER BAGLIN				Inspector's Email	johanne.dalo@ct.gov				
Key:	Compliant = X	# of Infants - Toddlers Present	3	# of Total Children Present	27	# of Staff Present	6	Type of Inspection	UNANNOUNCED INSPECTION - FULL	
Non-Compliant = O										

LICENSURE PROCEDURES 19a-79-2a

X	1. Local Health Inspection	
	Date: 05/31/2024	
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	
O	9. Fire Marshal certificate	Failed to maintain a current fire marshal inspection
	Date	05/18/2024
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
	04/11/1994	0.1 pCi/L
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 complete medical statement(s) for 1 staff, missing statement of good health.
O	17. Professional development	Failed to document professional development for 5 staff
X	18. Disciplinary actions	
X	18b. Background checks	

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		
O	45. License premises – clean, good repair, hazard free	Failed to maintain the building, equipment and services free of hazards when observed 1 loose toilet seat (boys bathroom), rust on the large wall vent (downstairs Preschool).
X	47b. Plans for new construction, expansion, renovation or conversion	
X	48. Sanitary drinking fountains – disposable cups	
X	49. Lead Water Test (N/A?) 06/27/2024	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	
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	
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	
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 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	
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%; text-align: center;">O/T/I</td> <td style="width: 90%; text-align: center;">Injectable</td> </tr> <tr> <td style="text-align: center;">Y</td> <td style="text-align: center;">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					
Yes	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	<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					
X	132. No toys, objects less than 1/1/4" diameter					
X	133. Plastic bags, balloons, Styrofoam objects inaccessible					
O	134. Health consultant, doc. of visits	Failed to ensure the health consultant visit the program once a week for children up to 24 months when observed no documented visit between 04/11/24 and 06/06/24.				
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	




YES or NO?
Yes

WERE VIOLATIONS CITED DURING THIS VISIT?

DISCUSSIONS/COMMENTS

- cleaning supplies not locked, latch was dangling (Toddler Room)
- No current dates were observed on the menus.

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: 07/01/2024	 (Signature of Person in Charge)
Johanne Dalo (Printed Name)	 (Printed Name)		Jennifer Baglin (Printed Name)