



DIVISION OF LICENSING

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 Email: oeclicensing@ct.gov Website: www.ctoec.org

CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

Program Name	VILLAGE GREEN PRE-SCHOOL					License Number	DCCC.12472		Date of Inspection	06/25/2024	
						Expiration Date	2/28/2025		Time of Inspection	08:40 AM	
Address	15 HARTFORD RD BROOKLYN CT 06234-1711					Telephone	(860) 774-3439		Licensed Capacity	30	
						Hours of Operation	FROM: 7:00AM TO: 5:00PM		Infant/Toddler Capacity	0	
Is this a Change of Address?	Yes?		No?		X				Summer Care	Open	
New Address						Minimum Age Served	3 years	Maximum Age Served	12 years	Water Supply	Public Water
						Program's Email	villagegreenpreschool15@gmail.com				
Operator	CAROLYN OTTO					Name of Inspector	Karen Kellerman				
Director	CAROLYN OTTO					Inspector's Email	karen.kellerman@ct.gov				
Key:	Compliant = X	# of Infants - Toddlers Present	0	# of Total Children Present	14	# of Staff Present	3	Type of Inspection	UNANNOUNCED INSPECTION - FULL		
Non-Compliant = O											

LICENSURE PROCEDURES 19a-79-2a

X	1. Local Health Inspection	
	Date: 01/31/2023	
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	12/13/2023	
X	10. OEC Complaint procedure		
	11. Food Service Certificate	N/A?	
	Date	X	
X	12. Menus		
X	13. Emergency plans		
X	14. No Smoking Signs		
X	15. Radon Test	N/A?	
	Date	Results	
	04/03/2013	1.9	
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					
X	24. CPR Certified Staff (Group Home N/A)					
X	25. First Aid Trained Staff					
X	26. Consultants- Agreements and Contracts					
X	27. Logs – Visits documented					
	Not in Compliance?	Education	Health	Social Service	Dental	Dietician N/A? X
	Contracts					
	Logs					
	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					
X	35. Field trip permission					
X	36. Transportation permission					

☐	37. Child health records and immunizations	Failed to maintain complete immunization records for 1 child with flu.	
☐	38. Individual care plan (signed by parents and staff)	Failed to maintain individual care plan for 1 child with asthma.	
☒	39. Injury, Illness, Accident reports		
HEALTH AND SAFETY 19a-79-6a			
☒	40. Nutritious snacks and meals (required food groups)		
☒	41. Proper refrigeration (max 45°)		
☒	42. Kitchen separated	N/A?	
☒	43. Hand washing – before eating or food handling		
☒	44. First Aid Kit(s) – Indoor, Outdoor, Field Trips, Inventory		
PHYSICAL PLANT 19a-79-7a			
☐	45. License premises – clean, good repair, hazard free	Failed to maintain the building, equipment and services when observed dusty vent in 1 bathroom.	
☒	47b. Plans for new construction, expansion, renovation or conversion		
☒	48. Sanitary drinking fountains – disposable cups		
☒	49. Lead Water Test (N/A?) 01/30/2023	Bacterial/Chemical Test (N/A?) ☒	
☒	50. Walkways maintained		
☒	51. Designated staff toilet/sink		
☒	52. All openings for ventilation screened		
☒	53. Windows protected to prevent falls		
☒	54. Glass protected up to 36"		
☒	55. Overhead doors – locking devices, spring protectors		
☒	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	
		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	
	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 prop 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	
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

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

YES or NO?
Yes

WERE VIOLATIONS CITED DURING THIS VISIT?

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)
Karen Kellerman (Printed Name)		07/09/2024	Deanna LaRoche (Printed Name)