



**DIVISION OF LICENSING**  
 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103  
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 Email: [oe.licensing@ct.gov](mailto:oe.licensing@ct.gov) Website: [www.ctoec.org](http://www.ctoec.org)

## CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

<b>Program Name</b>	<b>METZUYAN CARE</b>				<b>License Number</b>	<b>DCCC</b>	<b>Date of Inspection</b>	<b>06/27/2024</b>	
					<b>Expiration Date</b>		<b>Time of Inspection</b>	<b>09:54 AM</b>	
<b>Address</b>	<b>145 GROVE ST WATERBURY CT 06710-2202</b>				<b>Telephone</b>	<b>(516) 695-3488</b>	<b>Licensed Capacity</b>	<b>29</b>	
					<b>Hours of Operation</b>		<b>Infant/Toddler Capacity</b>	<b>29</b>	
<b>Is this a Change of Address?</b>	<b>Yes?</b>		<b>No?</b>	<b>X</b>			<b>Summer Care</b>		
<b>New Address</b>					<b>Minimum Age Served</b>		<b>Maximum Age Served</b>	<b>Water Supply</b>	<b>Public Water</b>
					<b>Program's Email</b>	<b>mommynmee@gmail.com</b>			
<b>Operator</b>	<b>METZUYAN CARE LLC</b>				<b>Name of Inspector</b>	<b>Kristi Morgan</b>			
<b>Director</b>	<b>RACHEL F KIRSCH</b>				<b>Inspector's Email</b>	<b>kristi.morgan@ct.gov</b>			
<b>Key:</b> Compliant = X Non-Compliant = O	<b># of Infants - Toddlers Present</b>	<b>0</b>	<b># of Total Children Present</b>	<b>0</b>	<b># of Staff Present</b>	<b>2</b>	<b>Type of Inspection</b>	<b>INITIAL CREDENTIAL INSPECTION</b>	

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

<b>X</b>	<b>1. Local Health Inspection</b>	
	Date: <b>06/07/2024</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>	

<b>X</b>	5. Notification of Change	
	6. Program policies	Including discipline, supervision, child protection, general operating, personnel, closing time
<b>X</b>	7. Daily Attendance Records- staff and children	
<b>ITEMS POSTED – ACCESSIBLE</b>		
<b>X</b>	8. License	
<b>X</b>	9. Fire Marshal certificate	
	Date	06/21/2024
<b>X</b>	10. OEC Complaint procedure	
	11. Food Service Certificate	<u>N/A?</u>
	Date	X
<b>X</b>	12. Menus	
<b>X</b>	13. Emergency plans	
<b>X</b>	14. No Smoking Signs	
<b>X</b>	15. Radon Test	<u>N/A?</u>
	Date	Results
<b>X</b>	15a. Developmental Milestones	
<b>X</b>	15b. Access	
<b>X</b>	15bb. Endorsements	
<b>STAFFING 19a-79-4a</b>		
<b>X</b>	15c. Staffing	
<b>X</b>	16. Staff Health records – TB tests	
<b>X</b>	17. Professional development	
<b>X</b>	18. Disciplinary actions	
<b>X</b>	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>	<b>Health</b>	<b>Social Service</b>	<b>Dental</b>	<b>Dietician N/A? X</b>
	Contracts					
	Logs					
	Do they take children swimming?	<b>N 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>X</b>	32. Enrollment information					
<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>X</b>	38. Individual care plan (signed by parents and staff)		
<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°)		
	42. Kitchen separated	N/A? <b>X</b>	
<b>X</b>	43. Hand washing – before eating or food handling		
<b>X</b>	44. First Aid Kit(s) – Indoor, Outdoor, Field Trips, Inventory		
<b>PHYSICAL PLANT 19a-79-7a</b>			
<b>O</b>	45. License premises – clean, good repair, hazard free	Failed to maintain the building, equipment and services. No mats observed under climbing equipment in the multipurpose room; bathroom unclean in multipurpose room; unsecured shelf in room 103.	
<b>X</b>	47b. Plans for new construction, expansion, renovation or conversion		
<b>X</b>	48. Sanitary drinking fountains – disposable cups		
<b>O</b>	49. Lead Water Test (N/A?)	Bacterial/Chemical Test (N/A?) <b>X</b>	Failed to conduct a lead water test every 2 years. Needed prior to license.
<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		

X	57. Individual storage of clothing and bedding	
X	58. Smoking prohibited	
X	59. Matches and lighters inaccessible	
O	60. Electrical safety – outlets/cords	Failed to ensure that electrical outlets are covered with safety covers or are approved safety outlets. Observed outlets uncovered in multipurpose rooms and an outlet in the infant room and multipurpose room without a plate. Observed cords unsecured in 2 rooms.
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	
O	65. Ventilation in toilet rooms	Failed to ensure that toilet rooms have mechanical ventilation.
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. Sinks do not have hot water.
X	68. Portable space heaters	
X	69. Walls, ceilings, floors and rugs – clean, good repair	
O	70. Rugs secure	Failed to ensure that rugs are secured to the floor in the infant room.
X	71. Hot water, steam pipes protected	
O	72. Working phone on each level	Failed to maintain a working phone on bottom 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
○	80. Operable CO detector on each level	N/A? Y
		Failed to maintain at least 1 operable carbon monoxide detector on each occupied level.
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	
<b>OUTDOOR SPACE</b>		
X	87. Outdoor space - adequate square footage per child	
○	88. Impact absorbing material under equipment	Failed to ensure a minimum of 8 inches of impact absorbing materials under swing and slide.
○	89. Playground free from hazards	Failed to ensure the playground is free of glass, debris, holes and other hazards. Observed poison ivy, large rocks, trash etc. on playground.
X	92. Equipment anchored, safely arranged	
○	93. Outdoor play area protected, fenced	Failed to protect outdoor play area from traffic, bodies of water, gullies and other hazards. Observed gaps in fencing by the gate.
X	94. Drinking water available, accessible	
<b>EDUCATIONAL REQUIREMENTS 19a-79-8a</b>		
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
<b>ADMINISTRATION OF MEDICATIONS 19a-79-9a</b>		
	97. Written policies, procedures	
X	98. Training outline on file	

NONPRESCRIPTION TOPICAL MEDICATIONS						
<b>X</b>	99. Administration, parent permission, MAR					
<b>X</b>	100. Labeling, storage					
ORAL/TOPICAL/INHALENT MEDICATIONS						
<b>X</b>	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					
<b>X</b>	102. Authorized prescriber, parent permission, MAR					
<b>X</b>	103. Labeling, storage					
<b>X</b>	104. Unused, expired meds returned/disposed					
SELF-ADMINISTRATION						
<b>X</b>	105. Authorized prescriber, parent permission, MAR					
<b>X</b>	106. Labeling, storage					
<b>X</b>	107. Approved petition for special medication authorization					
<b>No</b>	Is there an approved endorsement?	<b>INFANT/TODDLER ENDORSEMENT 19a-79-10</b>				
<b>X</b>	109. Approved endorsement					
<b>X</b>	110. Ratio: 1 staff to 4 children					
<b>X</b>	111. Group size: no larger than 8					
<b>X</b>	112. Physical barriers, groups of 8 (indoors and outdoors)					
<b>X</b>	113. Adequate sinks in program space					
<b>○</b>	114. Free standing, well-constructed, safe cribs	Failed to maintain well constructed, free standing cribs. No documentation of the date of manufacturing.				
<b>X</b>	115. Washable cots					
<b>X</b>	116. Chairs for feeding, stable, safety straps, locking tray					
<b>○</b>	117. Developmentally appropriate tables, chairs, equipment	Failed to maintain low tables and chairs according to children's size and development. Classroom observed to have minimal toys and tables that are not age appropriate.				
<b>X</b>	118. Refrigerators and food prop facilities					

<b>O</b>	119. Diaper area-sturdy, safety rail, nonporous, exclusive use	Failed to maintain a nonporous surface in good repair. Changing table in room 102 unclean and not non-porous. Changing pad in the infant room not non-porous.		
<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	
			X	
<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>No</b>	Is there an approved endorsement?	<b>SCHOOL AGE ENDORSEMENT 19a-79-11</b>
	143. Approved endorsement	
	144. Activity choices appropriate	
	145. Ratio – 1 staff to 10 children	
	146. Group size – maximum 20 children	
	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>N</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>	

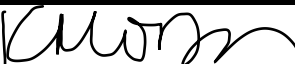


**YES or NO?**  
Yes

**WERE VIOLATIONS CITED DURING THIS VISIT?**

**DISCUSSIONS/COMMENTS**

Classroom measurements:  
 Infants -  $17.7 \times 19.2 - (2.8 \times 2.1) + (7.6 \times 6.5) + (17.7 \times 8.8) - (2.8 \times 10.7) - (2.8 \times 6.2) = 456.50 / 35 = 13.04$ . Classroom capacity 8 under threes  
 Classroom 101-  $16.4 \times 13 = 213.20 / 35 = 6.09$ . Classroom capacity 6 under threes  
 Classroom 102-  $20.26 \times 13.1 = 265.40 / 35 = 7.58$ . Classroom capacity 7 under threes  
 Classroom 103-  $18 \times 19.2 - (3.7 \times 12.9) = 297.87 / 35 = 8.51$ . Classroom capacity 8 under threes  
 Playground-  $51.1 \times 51.1 = 2611.21 / 75 = 34.81$ . Playground capacity 34 Must adhere to under threes group size  
 Multi purpose room-  $17.5 \times 22.9 = 400.75 / 35 = 11.5$ . Capacity 11 Must adhere to under three group size  
 Children's toilets - 2  
 Children's sinks - 3  
 Adult bathrooms - 1  
 Total Capacity - 29  
 Under three capacity - 29  
 - supervision plan needed for infant room "kitchen area"  
 - shared bathroom use policy for rooms 101 and 102.

**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>Kristi Morgan</b> (Printed Name)	<b>Lauren Hull</b> (Printed Name)		<b>Rachel Kirsch</b> (Printed Name)