

CHILD CARE CENTER/GROUP INSPECTION FORM

INITIAL  UNANNOUNCED  FULL/PARTIAL  FOLLOW UP  LOCATION CHANGE  OTHER

Program Name: <u>Over the Rainbow</u>	License Number: <u>16547</u>	Date of Inspection: <u>7.17.24</u>	Time of Arrival: <u>1:00</u>
Address: <u>1481 Highland Ave</u>	Expiration Date: <u>7/31/26</u>	Licensed Capacity: <u>88</u>	Under 3 Capacity: <u>48</u>
Town: <u>Cheshire 06410</u>	Telephone: <u>203-699-9900</u>	# of children present: <u>29</u>	# of staff present: <u>8</u>
Operator: <u>Foxtail LLC</u>	Director: <u>Jaime Moran</u>	Head Teacher: <u>Elizabeth Kelly</u>	
Email: <u>info@overtherainbowkids.com</u>	Summer Care: <u>open</u>		
Hours of Operation: <u>M-F 6:30am to 6:00pm</u>	Instruction Codes: N/A = Not applicable at this time √ = Compliance/No violation found O = Non-compliance/Violation found		
Ages Served: <u>6 weeks to 5 years</u>	<input checked="" type="checkbox"/> School Age (5y & up) <input type="checkbox"/> Night Care (6wks & up)		
Endorsements: <input checked="" type="checkbox"/> Under Three (6wks - 36m) <input checked="" type="checkbox"/> Preschool (3y - 5y)			

- Licensure Procedures 19a-79-2a**
- 1. Local Health Date: 6/17/23
- Administration 19a-79-3a**
- 2. New Staff-Employee Orientation
  - 3. Annual Staff Policy Training
  - 4. Documentation of Behavior M. Tech Discussed w/Parents
  - 5. Notification of Change
  - 6. Policies: Discipline/Supervision/Child Protection/General Operating Policies/Personnel Policies/Closing Time Policy
  - 7. Daily Attendance Records: Children/Staff
- Items Posted: Conspicuous/Accessible**
- 8. License
  - 9. Current Fire Marshal Certificate Date: 6/13/24
  - 10. OEC Complaint Procedure
  - 11. Food Service Certificate Date: n/a
  - 12. Menus
  - 13. Emergency Plans
  - 14. No Smoking Signs
  - 15. Radon Test (Y/N) Date: 4/29/08 Results: 1.5
  - 15a. Developmental Milestones
- Staffing 19a-79-4a**
- 16. Staff Health Records/TB Tests
  - 17. Professional Development
  - 18. Disciplinary Actions
  - 18b. Background Checks
  - 19. Designated Head Teacher/60%
  - 20. Two Staff Present
  - 21. Ratio: 1 Staff to 10 Children
  - 22. Group Size: Maximum 20 Children
  - 23. Designated Director/Training
  - 24. CPR Certified Staff
  - 25. First Aid Trained Staff
- Consultants**
- 26. Agreements/Contracts (Complete/Signed Annually)
- |                | Contracts  | Logs       |
|----------------|------------|------------|
| Education      | ✓          | ✓          |
| Health         | ✓          | ✓          |
| Social Service | ✓          | ✓          |
| Dental         | ✓          | ✓          |
| Dietitian      | <u>n/a</u> | <u>n/a</u> |
- 27. Logs/Visits Documented
- Swimming: (Y/N)**
- 28. Non-Swimmers Identified

- Swimming cont.**
- 29. Staff/Child Ratios
  - 30. CPR Certified Staff (20 years of age)
  - 31. Lifeguard Certified/Supervision
- Record Keeping 19a-79-5a**
- 32. Enrollment Information
  - 33. Emergency Medical Permission
  - 34. Authorized Released Permission
  - 35. Field Trip Permission
  - 36. Transportation Permission
  - 37. Child Health Records/Immunizations/TB
  - 38. Individual Care Plan (Signed by Parent/Staff)
  - 39. Injury/Illness/Accident Reports
- Health and Safety 19a-79-6a**
- 40. Nutritious Snacks/Meals (Required Food Groups)
  - 41. Proper Refrigeration
  - 42. Kitchen Separated
  - 43. Hand Washing Before Eating/Food Handling
  - 44. First Aid Kit(s): Indoor/Outdoor/Field Trip/Inventory
- Physical Plant 19a-79-7a**
- 45. License Premise: Clean/Good Repair/Hazard Free
  - 48. Sanitary Drinking Fountains/Disposable Cups  
Water Supply: Public/Well
  - 49. Lead Water Test Date: \_\_\_\_\_  
Bacterial/Chemical Test (Y/N) Date: \_\_\_\_\_
  - 50. Walkways Maintained
  - 51. Designated Staff Toilet/Sink
  - 52. All Openings for Ventilation Screened
  - 53. Windows Protected to Prevent Falls
  - 54. Glass Protected to 36"
  - 55. Overhead Doors Locking Devices/Spring Protectors
  - 56. Exits/Hallways and Stairs Unobstructed
  - 57. Individual Storage of Clothing/Bedding
  - 58. Smoking Prohibited
  - 59. Matches/Lighters Inaccessible
  - 60. Electrical Safety: Outlets/Cords
  - 61. Toileting Needs Met
  - 62. Required Toilets/Sinks/Supplies
  - 63. Potty Chairs: Nonporous/Emptied/Disinfected
  - 64. Hand Washing After Toileting: Staff/Children
  - 65. Ventilation in Toilet Room
  - 66. Air Temp 65°, Thermometer Affixed

Signature of OEC Representative: <u>Betty Mayer</u>	Written Corrective Action Plan Due to OEC by: <u>7/31/24</u>	Signature of Person in Charge: <u>Tammy Vertucci</u>
Print name: <u>Betty Mayer</u>		Print name: <u>Tammy Vertucci</u>

## CHILD CARE CENTER/GROUP INSPECTION FORM

Program Name:

Over the Rainbow

License Number:

16547

Date of

Inspection: 7-17-24

Physical Plant continued:

- 67. Water Temperature 60°-115°
- 68. Portable Space Heaters
- 69. Walls/Ceilings/Floors/Rugs: Clean/Good Repair
- 70. Rugs Secure
- 71. Hot Water/Steam Pipes Protected
- 72. Working Phone on Each Level
- 73. Emergency Numbers Posted
- 74. Adequate Lighting: 50/30 Candle Feet
- 75. Light Fixtures Shielded/Shatter Proof
- 76. Potentially Hazardous Substances Locked
- 77. Garbage/Rubbish Disposed Daily
- 78. Stairs Protected/Good Repair/Handrails
- 79. Pets: Maintained/Care Plan (Y/N)
- 80. Operable CO Detector on Each Level (Y/N)
- 81. Program Space/Adequate Sq. Ft. Per Child
- 82. Equipment: Good Repair/Safe/Non-toxic
- 83. Cots Stored/Maintained/Adequate Number
- 84. Developmentally Appropriate Equipment/Materials
- 85. Hot Tubs/Spas/Saunas: Locked/Inaccessible (Y/N)
- 86. No Weapons/No Facsimile of a Firearm on Premise

Outdoor Space

- 87. Outdoor Space Adequate Sq. Ft. Per Child
- 88. Impact Absorbing Material under Equipment
- 89. Playground Free from Hazards
- 90. Peeling Paint (Y/N) Sample Taken (Y/N)
- 91. Lead Management Plan (Y/N)
- 92. Equipment Anchored/Safely Arranged
- 93. Outdoor Play Area Protected/Fenced
- 94. Drinking Water Available/Accessible

Educational Requirements 19a-79-8a

- 95. Written Plan for Daily Program Available to Parents/Staff
- 96. 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

- 97. Written Policies/Procedures
- 98. Training Outline on file
- Nonprescription Topical Medications
- 99. Administration/Parent Permission/MAR
- 100. Labeling/Storage
- Oral/Topical/Inhalant/Injectable Medications
- 101. Med Trained Staff/Certificates
- 102. Authorized Prescriber/Parent Permission/MAR
- 103. Labeling/Storage
- 104. Unused/Expired Meds Returned/Disposed
- Self-Administration
- 105. Authorized Prescriber/Parent Permission/MAR
- 106. Labeling/Storage
- 107. Approved Petition For Special Med Authorization

Emergency Distribution of Potassium Iodide

- 108. KI Pills Parent Permission/Storage

Under Three 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/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. Dev. Appropriate Tables/Chairs/Equipment
- 118. Refrigerators and Food Prep Facilities
- 119. Sturdy/Safety Rail/Nonporous/Exclusive Use
- 120. Washed/Disinfected
- 121. Disposable Paper Sheets
- 122. Covered Waste Receptacle
- 123. Diaper Changing Policy Posted
- 124. Hand Washing Policy Posted
- 125. Individual Storage of Personal Items
- 126. Cribs/Cots Washed/Disinfected
- 127. Under 12 Months Placed on Back for Sleeping
- 128. Alternate Sleep Position/Equip-Medical Document (Y/N)
- 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 1/4" Diameter
- 133. Plastic Bags/Balloons/Styrofoam Objects Inaccessible
- 134. Health Consultant/Documentation of Visits
- 135. Infants Held for Bottles/Individual Attn/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 w/Child's Name

Outdoor Play Space-Under Three:

- 141. Play Space Fenced
- 142. Outdoor Equipment: Dev. Appropriate

School Age Children Endorsement 19a-79-11

- 143. Approved Endorsement
- 144. Activity choices appropriate
- 145. Ratio: 1 Staff to 10 Children
- 146. Group Size: Max. 20 Children
- 147. Education Consultant Appropriate

Night Care Endorsement 19a-79-12 (10pm-5am)

- 148. Approved Endorsement
- 149. Written Program Plan/Supervision
- 150. Staff Awake/Available
- 151. Cot/Crib/Bedding/Toiletries/Sleep Apparel
- 152. Individual Storage of Personal Items
- 153. Bedding/Sleeping Apparel Laundered Weekly

Monitoring of Diabetes 19a-79-13 no one currently

- 154. Written Policies/Procedures enrolled
- 155. On Site Staff Trained in First Aid/Glucose Testing
- 156. Training Current/Documented
- 157. Supervision of Self Administration
- 158. Equipment/Supplies: Labeled/Inaccessible
- 159. Signed Agreement w/Parent Regarding Equipment
- 160. Materials Discarded Appropriately
- 161. Authorized Prescriber/Parent Permission
- 162. Documentation of Test Results/Actions Taken
- 163. Daily Written Parent Notifications

Signature of OEC Representative

Betty mayer

Written Corrective Action Plan

Due to OEC by:  
7/31/24

Signature of Person in Charge

Tammy L Vertucci

Print Name: Betty Mayer

Print Name: Tammy Vertucci

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Over the Rainbow License # 10547 Date: 7-17-24

Observations/Corrections needed:

#37 one child's physical expired, two children missing documentation of TB risk.

#38 care plan for one child missing staff signatures.

#43 children did not wash hands prior to eating snack in preschool and toddler 1.

#45 observed unclean toilets in waddler, TOD 1 and TOD 2. unclean garbage cans observed in preschool and TOD 1. Toilet seat worn/loose in preschool bathroom and unclean microwave in infant 2.

#82 observed porous/unclean tape on changing table in infant 2. Swing in infant 1 missing feet protectors, metal bars exposed/cord accessible. 5 bikes and picnic table observed with rust on over 3 playground. cubby in preschool unsecure.

#89 observed overgrown weeds around fencing and shed on playground.

#103 observed one epi pen unlabeled.

Discussed:  
① NO therm in infant room.  
② Per staff infant toys washed every other day not daily. ③ small gap in fence.

S = Substantiated NS = Not Substantiated P = Pending (if applicable)

Operators/providers are required by regulations and statutes to be in compliance at all times.

Signature: Betty mayer

Print Name: Betty Mayer  
(OEC Representative)

Signature: Tammy Vertucci

Print Name: Tammy Vertucci  
(Person in Charge)

CORRECTIVE PLAN SHALL BE RETURNED TO

OEC BY: 7/31/24