



DIVISION OF LICENSING
 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103
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 Email: oeclicensing@ct.gov Website: www.ctoec.org

**CHILD CARE CENTER/GROUP CHILD CARE HOME
 SUPPLEMENTAL INSPECTION**

Program Name	KOKOPELLI DISCOVERY CENTER				License Number	DCCC.70504	Date of Inspection	08/28/2024
					Expiration Date	8/31/2027	Time of Inspection	08:25 AM
Address	44 SMITH ST SEYMOUR CT 06483-3715				Telephone	(203) 881-2400	Total Capacity	50
					Days and Hours	MONDAY - FRIDAY 6:30AM - 6PM	Under Three Capacity	0
#Children Present	42	# Under 3 Present	0	# Staff Present	4	Summer Care	Open	
Purpose of Inspection	Foloow up on supervision				Name of Inspector	Kristi Morgan		
Program's Email	kokopellidiscovery@gmail.com				Inspector's Email	kristi.morgan@ct.gov		

Regulatory Violations

Statute and/or Regulation: [19a-79-4a(c)(4)(A) thru (C) &/or 19a-79-4a(c)(6)]	Description: 021-Ratio: 1 Staff to 10 Children
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Failed to maintain proper staff/child ratios. Observed 42 children overall with only 4 staff on site. 2 rooms in ratio and 1 room over by 3. Children continued to be dropped off without additional teachers coming in.

Statute and/or Regulation:	Description:
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Other Findings – Regulations In Compliance	
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:

Statute and/or Regulation:	Description:

Statute and/or Regulation:	Description:



Statute and/or Regulation:	Description:

<u>YES/NO:</u> Yes	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

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NOTE: Items left blank on this form were not monitored during this visit.
 Only the regulations marked as compliant or non-compliant 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: 09/11/2024	 (Signature of Person in Charge)
Kristi Morgan (Printed Name)	(Printed Name)		Katie onofrio (Printed Name)