Connecticut Office of Early Childhood

DIVISION OF LICENSING
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CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

Program Name	CREATIVE STARTS LEARNING CENTER - OXFORD	License Number	DCCC.70524	Date of Inspection	09/03/2024
		Expiration Date	10/31/2027	Time of Inspection	08:36 AM
Address	35 OLD STATE ROAD 67 OXFORD CT 06478-1905	Telephone	(203) 888-1020	Licensed Capacity	59
		Hours of Operation	MON-FRI 6:30-6:00	Infant/Toddler Capacity	32
Is this a Change of Address?	Yes? X No?			Summer Care	Open
New Address	482 Oxford Road Oxford CT 06478	Minimum Age Served	6 weeks	Maximum Age Served: 12 years	Water Supply: Public Water
		Program's Email	Marta@creativestartslc.com		
Operator	OXFORD LEARNING CENTER LLC	Name of Inspector	Jaime Fortin		
Director	MARTA SAKLAWSKA	Inspector's Email	jaime.fortin@ct.gov		
Key: Compliant = X Non-Compliant = O	# of Infants – Toddlers Present: 0; # of Total Children Present: 0; # of Staff Present: 1	Type of Inspection	CHANGE OF ADDRESS		

LICENSURE PROCEDURES 19a-79-2a

O	1. Local Health Inspection Date:	Failed to maintain local health inspection
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: 08/29/2024	
X	10. OEC Complaint procedure	
	11. Food Service Certificate Date:	N/A? X
X	12. Menus	
X	13. Emergency plans	
X	14. No Smoking Signs	Failed to post No Smoking signs at entrances
O	15. Radon Test Date / Results	N/A? Failed to ensure that the radon test was conducted during the months between November and April- will conduct if still at location in November- letter submitted
X	15a. Developmental Milestones	
X	15b. Access	
X	15bb. 32-36 mths enrolled in prek- permissions	
	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	Failed to maintain current consultant agreements
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	

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- approved lead management plan needed from Local health. Dust wipe results needed for bathroom**
X	**47b. Plans for new construction, expansion, renovation or conversion**	
X	**48. Sanitary drinking fountains – disposable cups**	
O	**49. Lead Water Test (N/A?)**	**Bacterial/Chemical Test (N/A?)** X **Failed to conduct a lead water test**
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	
O	62. Required toilets, sinks, supplies	Failed to provide at least 1 toilet and sink for every 16 children. Shared bathroom plan approved for use until lead testing is completed on child's bathroom. However- dust wipes results pending and must be within limits for use
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	Failed to ensure that every area used by children is adequately ventilated
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	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		

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	Failed to develop and post a written plan for the daily program
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: Y Injectable: 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**	**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**	
X	**134. Health consultant, doc. of visits**	
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 15 children	
X	146. Group size – maximum 30 children	
X	146b. 4 yr olds enrolled in school age-permissions	
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

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

YES or NO?	WERE VIOLATIONS CITED DURING THIS VISIT?
Yes	

DISCUSSIONS/COMMENTS

measurements:
prek/schoolage room: 25.7x33.2=853.24/35=24- (newer room did not require lead test)
Toddler room: 33.3x10.3-(19.2x2.9) + 12.5x11.1=426.06/35=12. Requesting 8 (supervision plan for room) Newer room
Infant room: 14.6x14.1-(3.2x3.4/= 194.98/35=5.5 Requesting 4- Newer room no lead test
Waddled room: 22.9x10.4- (2.9x.4) =237/35=6 Requesting 4- Newer room- No lead
pending dust wipe results for all 3 bathrooms
4 total toilets for children and 4 sinks. 1 adult toilet/sink- pending dust wipe approval
fenced in playground: 37.8x26.6=1005.48/75=13
Back field 100x100=10000/75= 133
Program will not use back blacktop area and cars will not be using parking lot-Program will cone off and limit car access
program capacity= 40 with 16 under the age of 3
Local Health email approval of portable sinks granted -okay for use
PENDING the following: Local health approval, Local health approval of lead management plan, Lead water test results.
No bare soil exposed on playgrounds. Lead testing would be needed if bare soil was exposed.
Corrective action plan required
Mechanical ventilation switch was turned on during inspection for bathroom- 2 hour timer
Local Health waiting results of dust wipes to okay temporary bathrooms until 5 stall bathroom is approved. 2 temporary bathrooms only dust wipe sampling - if still used would require XRF testing
Pending -use of bottled water as temporary measure until testing is received

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)
Jaime Fortin (Printed Name)	(Printed Name)	09/17/2024	Marta Saklawska (Printed Name)