



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

<b>Program Name</b>	WESTVILLE COMMUNITY NURSERY SCHOOL				<b>License Number</b>	DCCC.13435	<b>Date of Inspection</b>	09/04/2024
					<b>Expiration Date</b>	1/31/2026	<b>Time of Inspection</b>	12:10 PM
<b>Address</b>	3 TOUR AVE  NEW HAVEN CT 06515-1712				<b>Telephone</b>	(203) 387-6660	<b>Total Capacity</b>	32
					<b>Days and Hours</b>	8AM- 5:30PM M-F Summer 9-3 until 1st week of August	<b>Under Three Capacity</b>	0
<b>#Children Present</b>	0	<b># Under 3 Present</b>	0	<b># Staff Present</b>	4	<b>Summer Care</b>	Open	
<b>Purpose of Inspection</b>	Follow up to 7/18/24 full inspection				<b>Name of Inspector</b>	Bridget Merrill		
<b>Program's Email</b>	shannon@wensplay2learn.org				<b>Inspector's Email</b>	bridget.merrill@ct.gov		

**Regulatory Violations**

<b>Statute and/or Regulation:</b> [19a-79-4a(b)]	<b>Description:</b> 018b-Background Checks
Failed to ensure that 1 staff has a completed background checks	
<b>Statute and/or Regulation:</b> [19a-79-4a(h)(2)(G)]	<b>Description:</b> 027-Logs/Visits Documented
Failed to document annual review of policies, plans, procedures and education programs by health & education consultants	
<b>Statute and/or Regulation:</b>	<b>Description:</b>
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<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>Other Findings – Regulations In Compliance</b>	
<b>Statute and/or Regulation:</b> [19a-79-2a(c)(7)]	<b>Description:</b> 001-Local Health Inspection
<b>Statute and/or Regulation:</b> [19a-79-3a]	<b>Description:</b> 001b-Administration-Ensuring the safety, health & development of children

<b>Statute and/or Regulation:</b> [19a-79-3a(b)(8)(B)]	<b>Description:</b> 004-Documentation of Behavioral Management Techniques Discussed with Parents

<b>Statute and/or Regulation:</b> [19a-79-3a(d)(1)]	<b>Description:</b> 007-Daily Attendance Records: Children/Staff



<b>Statute and/or Regulation:</b> [19a-79-3a(e)(2)]	<b>Description:</b> 009-Current Fire Marshal Certificate

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

Discussed/ gave new OEC complaint procedure.

**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:	 (Signature of Person in Charge)
Bridget Merrill (Printed Name)	(Printed Name)	09/18/2024	Shannon Knudsen (Printed Name)