



**DIVISION OF LICENSING**  
 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103  
 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552  
 Email: [oc.licensing@ct.gov](mailto:oc.licensing@ct.gov) Website: [www.ctoec.org](http://www.ctoec.org)

## CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

<b>Program Name</b>	<b>KIDZ TYME LEARNING CENTER</b>				<b>License Number</b>	<b>DCCC.70570</b>	<b>Date of Inspection</b>	<b>10/07/2024</b>		
					<b>Expiration Date</b>	<b>9/30/2028</b>	<b>Time of Inspection</b>	<b>08:55 AM</b>		
<b>Address</b>	<b>560 ELLA T GRASSO BLVD NEW HAVEN CT 06519-1806</b>				<b>Telephone</b>	<b>(475) 331-6125</b>	<b>Licensed Capacity</b>	<b>131</b>		
					<b>Hours of Operation</b>	<b>6:30AM-6:00PM</b>	<b>Infant/Toddler Capacity</b>	<b>80</b>		
<b>Is this a Change of Address?</b>	<b>Yes?</b>		<b>No?</b>	<b>X</b>			<b>Summer Care</b>	<b>Open</b>		
<b>New Address</b>					<b>Minimum Age Served</b>	<b>6 weeks</b>	<b>Maximum Age Served</b>	<b>12 years</b>	<b>Water Supply</b>	<b>Public Water</b>
					<b>Program's Email</b>	<b>kidztyme19@gmail.com</b>				
<b>Operator</b>	<b>KIDZ TYME LEARNING CENTER LLC</b>				<b>Name of Inspector</b>	<b>Bridget Merrill</b>				
<b>Director</b>	<b>SHADAE EVANS</b>				<b>Inspector's Email</b>	<b>bridget.merrill@ct.gov</b>				
<b>Key:</b> Compliant = X Non-Compliant = O	<b># of Infants - Toddlers Present</b>	<b>34</b>	<b># of Total Children Present</b>	<b>40</b>	<b># of Staff Present</b>	<b>19</b>	<b>Type of Inspection</b>	<b>UNANNOUNCED INSPECTION - FULL</b>		

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

<b>X</b>	<b>1. Local Health Inspection</b>	
	Date: 07/12/2023	
<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>	

<input type="radio"/>	5. Notification of Change	Failed to provide notification of change in head teacher.	
<input checked="" type="checkbox"/>	6. Program policies	Including discipline, supervision, child protection, general operating, personnel, closing time	
<input checked="" type="checkbox"/>	7. Daily Attendance Records- staff and children		
<b>ITEMS POSTED – ACCESSIBLE</b>			
<input checked="" type="checkbox"/>	8. License		
<input type="radio"/>	9. Fire Marshal certificate	Failed to maintain a current fire marshal inspection. Posted inspection is more than 1yr old.	
	Date	08/03/2023	
<input checked="" type="checkbox"/>	10. OEC Complaint procedure		
	11. Food Service Certificate	N/A?	
	Date	X	
<input checked="" type="checkbox"/>	12. Menus		
<input checked="" type="checkbox"/>	13. Emergency plans		
<input checked="" type="checkbox"/>	14. No Smoking Signs		
<input checked="" type="checkbox"/>	15. Radon Test	N/A?	
	Date	Results	
	01/11/2023	.5	
<input checked="" type="checkbox"/>	15a. Developmental Milestones		
<input checked="" type="checkbox"/>	15b. Access		
<input checked="" type="checkbox"/>	15bb. 32-36 mths enrolled in prek-permissions		
<b>STAFFING 19a-79-4a</b>			
<input checked="" type="checkbox"/>	15c. Staffing		
<input type="radio"/>	16. Staff Health records – TB tests	Failed to maintain current medical statement(s) for 1 staff. Failed to maintain a written report of negative TB test(s) for 1 staff.	
<input checked="" type="checkbox"/>	17. Professional development		
<input checked="" type="checkbox"/>	18. Disciplinary actions		
<input type="radio"/>	18b. Background checks	Failed to maintain evidence of compliance with background checks. Staff were able to access the BCIS roster.	

<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	Director was hired January 2024 & is in the process of completing the 3 credit course in administration/ supervision of ECE programs.																		
<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?	<table border="1"> <tr> <td>Education</td> <td>Health</td> <td>Social Service</td> <td>Dental</td> <td>Dietician N/A?</td> <td><b>X</b></td> </tr> <tr> <td>Contracts</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Logs</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Education	Health	Social Service	Dental	Dietician N/A?	<b>X</b>	Contracts						Logs					
Education	Health	Social Service	Dental	Dietician N/A?	<b>X</b>															
Contracts																				
Logs																				
	Do they take children swimming?	N SWIMMING																		
<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>O</b>	33. Emergency medical permission	Failed to maintain emergency medical permission forms for 3 children.																		
<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°)	
<b>X</b>	42. Kitchen separated	N/A?
<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 when stained ceiling tiles were observed in room 7, 6, 5, 10, before/ after school, small gross motor room & Caterpillars & lights out in Preschool, room 9 & hallway area. Observed 1 toilet in back hallway to be inoperable.
<b>X</b>	47b. Plans for new construction, expansion, renovation or conversion	
<b>X</b>	48. Sanitary drinking fountains – disposable cups	
<b>X</b>	49. Lead Water Test (N/A?) 01/11/2023	Bacterial/Chemical Test (N/A?) <b>X</b>
<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	

<b>X</b>	57. Individual storage of clothing and bedding	
<b>X</b>	58. Smoking prohibited	
<b>X</b>	59. Matches and lighters inaccessible	
<b>X</b>	60. Electrical safety – outlets/cords	
<b>X</b>	61. Toileting needs met	
<b>X</b>	62. Required toilets, sinks, supplies	
<b>X</b>	63. Potty chairs – nonporous, emptied, disinfected	
<b>X</b>	64. Hand washing after toileting – staff and children	
<b>X</b>	65. Ventilation in toilet rooms	
<b>O</b>	66. Air temperature 65 degrees, thermometer affixed	Failed to ensure that every area used by children has a thermometer affixed to the wall in Preschool & large gross motor room.
<b>O</b>	67. Water temperature 60° – 115°	Failed to ensure the water temperature is between 60-115 degrees in room 5 (117.9*) & front 2 hallway bathrooms (118.9*)
<b>X</b>	68. Portable space heaters	
<b>X</b>	69. Walls, ceilings, floors and rugs – clean, good repair	
<b>O</b>	70. Rugs secure	Failed to ensure that rugs are secured to the floor in back hall by entry door.
<b>X</b>	71. Hot water, steam pipes protected	
<b>X</b>	72. Working phone on each level	
<b>X</b>	73. Emergency numbers posted	
<b>X</b>	74. Adequate lighting - 50/30 candle feet	
<b>O</b>	75. Light fixtures shielded, shatter proof	Failed to maintain light fixtures that are shielded or shatter proof in back hallway bathroom.
<b>O</b>	76. Potentially hazardous substances locked	Failed to ensure that potentially hazardous substances are stored in a locked area. Observed bleach under kitchenette sink & paints in back hallway closets to be unlocked.
<b>X</b>	77. Garbage, rubbish disposed daily	

<b>X</b>	78. Stairs protected, good repair, handrails	
<b>X</b>	79. Pets – maintained, care plan	Y/N N
<b>X</b>	80. Operable CO detector on each level	N/A? Y
<b>X</b>	81. Program space-adequate square footage per child	
<b>X</b>	82. Equipment clean, good repair, safe, non-toxic	
<b>X</b>	83. Cots stored, maintained, adequate number	
<b>X</b>	84. Developmentally appropriate equipment	
<b>X</b>	85. Hot tubs, spas, saunas – locked and inaccessible	Y/N N
<b>X</b>	86. No weapons, no facsimile of a firearm on premises	
<b>OUTDOOR SPACE</b>		
<b>X</b>	87. Outdoor space - adequate square footage per child	
<b>X</b>	88. Impact absorbing material under equipment	
<b>X</b>	89. Playground free from hazards	
<b>X</b>	92. Equipment anchored, safely arranged	
<b>X</b>	93. Outdoor play area protected, fenced	
<b>X</b>	94. Drinking water available, accessible	
<b>EDUCATIONAL REQUIREMENTS 19a-79-8a</b>		
<b>X</b>	95. Written plan for daily program available to parents/staff	
<b>X</b>	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>		
<b>X</b>	97. Written policies, procedures	
<b>X</b>	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%; padding: 2px;">O/T/I</td> <td style="padding: 2px;">Injectable</td> </tr> <tr> <td style="text-align: center; padding: 2px;">Y</td> <td style="text-align: center; padding: 2px;">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>Yes</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>X</b>	114. Free standing, well-constructed, safe cribs					
<b>X</b>	115. Washable cots					
<b>X</b>	116. Chairs for feeding, stable, safety straps, locking tray					
<b>X</b>	117. Developmentally appropriate tables, chairs, equipment					
<b>X</b>	118. Refrigerators and food prep facilities					

<b>X</b>	119. Diaper area- sturdy, safety rail, nonporous, exclusive use			
<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	
			<b>X</b>	
<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>Yes</b>	Is there an approved endorsement?	<b>SCHOOL AGE ENDORSEMENT 19a-79-11</b>
<b>X</b>	143. Approved endorsement	
<b>X</b>	144. Activity choices appropriate	
<b>X</b>	145. Ratio – 1 staff to 15 children	
<b>X</b>	146. Group size – maximum 30 children	
<b>X</b>	146b. 4 yr olds enrolled in school age-permissions	
<b>X</b>	147. Education Consultant appropriate	
<b>Yes</b>	Is there an approved endorsement?	<b>NIGHT CARE ENDORSEMENT 19a-79-12 (10pm-5am)</b>
<b>X</b>	148. Approved endorsement	
<b>X</b>	149. Written program plan, supervision	
<b>X</b>	150. Staff awake and available	
<b>X</b>	151. Cot, crib, bedding, toiletries, sleep apparel	
<b>X</b>	152. Individual storage of personal items	
<b>X</b>	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**

Discussed/ gave new OEC complaint procedure. Program to post all emergency plans, in addition to C4K emergency plans in a conspicuous area.

**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>Bridget Merrill</b> (Printed Name)	 (Printed Name)	<b>10/21/2024</b>	<b>Shades Evans</b> (Printed Name)