



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 Website: www.ctoec.org

CHILD CARE CENTER/GROUP CHILD CARE HOME INSPECTION

Program Name	ST THOMAS MORE HAPPINESS PRESCHOOL				License Number	DCCC.13246	Date of Inspection	10/07/2024		
					Expiration Date	10/31/2025	Time of Inspection	10:00 AM		
Address	374 MIDDLESEX ROAD DARIEN CT 06820				Telephone	(203) 655-6053	Licensed Capacity	104		
					Hours of Operation	MONDAY-FRIDAY 9:00AM-1:00PM	Infant/Toddler Capacity	8		
Is this a Change of Address?	Yes?		No?	X			Summer Care	Closed		
New Address					Minimum Age Served	18 months	Maximum Age Served	5 years	Water Supply	Public Water
					Program's Email	majsoliveira@aol.com				
Operator	ST THOMAS MORE R C CHURCH CORP				Name of Inspector	Lori Mangano				
Director	MARIA OLIVEIRA				Inspector's Email	lori.mangano@ct.gov				
Key: Compliant = X Non-Compliant = O	# of Infants - Toddlers Present	8	# of Total Children Present	50	# of Staff Present	10	Type of Inspection	UNANNOUNCED INSPECTION - FULL		

LICENSURE PROCEDURES 19a-79-2a

X	1. Local Health Inspection	
	Date: 11/14/2022	
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	
O	6. Program policies	Including discipline, supervision, child protection, general operating, personnel, closing time Failed to maintain complete written policies, plans and procedures when policies are incomplete or not written for review. Plan for consultative services, education program plan, child abuse and neglect, operating policy, personnel policy and medication policy. See checklist provided.
X	7. Daily Attendance Records- staff and children	
ITEMS POSTED – ACCESSIBLE		
X	8. License	
X	9. Fire Marshal certificate	
	Date	09/18/2024
X	10. OEC Complaint procedure	
	11. Food Service Certificate	N/A?
	Date	X
X	12. Menus	
X	13. Emergency plans	
X	14. No Smoking Signs	
X	15. Radon Test	N/A?
	Date	Results
	11/26/2001	0.7
X	15a. Developmental Milestones	
X	15b. Access	
X	15bb. 32-36 mths enrolled in prek-permissions	
STAFFING 19a-79-4a		
X	15c. Staffing	
O	16. Staff Health records – TB tests	Failed to maintain complete medical statement(s) when 3 staff are missing physician name, address and phone number on medical statements.
X	17. Professional development	
X	18. Disciplinary actions	
X	18b. Background checks	

<input checked="" type="checkbox"/>	19. Designated Head Teacher	
<input checked="" type="checkbox"/>	20. Two Staff present	
<input checked="" type="checkbox"/>	20a. Staff Qualities	
<input checked="" type="checkbox"/>	21. Ratio: 1 staff to 10 children	
<input checked="" type="checkbox"/>	21b. Supervision	
<input checked="" type="checkbox"/>	22. Group Size – maximum 20 children	
<input checked="" type="checkbox"/>	23. Designated director - Training	
<input checked="" type="checkbox"/>	24. CPR Certified Staff (Group Home N/A)	
<input checked="" type="checkbox"/>	25. First Aid Trained Staff	
<input type="radio"/>	26. Consultants- Agreements and Contracts	Failed to maintain current consultant agreement for dental consultant.
<input type="radio"/>	27. Logs – Visits documented	Failed to document annual review of policies, plans, procedures and education programs for dental consultant.
	Not in Compliance?	Education Health Social Service Dental Dietician N/A? X
	Contracts	
	Logs	
	Do they take children swimming? N	SWIMMING
<input checked="" type="checkbox"/>	28. Non-swimmers identified	
<input checked="" type="checkbox"/>	29. Staff/Child Ratios	
<input checked="" type="checkbox"/>	30. CPR certified staff (20 years of age)	
<input checked="" type="checkbox"/>	31. Lifeguard certified - supervision	
RECORD KEEPING 19a-79-5a		
<input checked="" type="checkbox"/>	32. Enrollment information	
<input checked="" type="checkbox"/>	33. Emergency medical permission	
<input checked="" type="checkbox"/>	34. Authorized release permission	
<input checked="" type="checkbox"/>	35. Field trip permission	
<input checked="" type="checkbox"/>	36. Transportation permission	

X	37. Child health records and immunizations	
O	38. Individual care plan (signed by parents and staff)	Failed to maintain complete individual care plans when one is missing staff signatures of those that are responsible for child's care.
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 equipment when multiple pieces of wood furniture are not secured. room 6-refrigerator, toddler-2 sinks, room 4-sink and dress up unit, room 2-doll house and sink
X	47b. Plans for new construction, expansion, renovation or conversion	
X	48. Sanitary drinking fountains – disposable cups	
X	49. Lead Water Test (N/A?) 09/18/2024	Bacterial/Chemical Test (N/A?) X
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	
X	62. Required toilets, sinks, supplies	
X	63. Potty chairs – nonporous, emptied, disinfected	
X	64. Hand washing after toileting – staff and children	
X	65. Ventilation in toilet rooms	
X	66. Air temperature 65 degrees, thermometer affixed	
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	
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		
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					
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; font-size: small;">O/T/I</td> <td style="width: 10%; font-size: small;">Injectable</td> </tr> <tr> <td style="text-align: center; font-size: small;">Y</td> <td style="text-align: center; font-size: small;">Y</td> </tr> </table>	O/T/I	Injectable	Y	Y	
O/T/I	Injectable					
Y	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 prep 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	
No	Is there an approved endorsement?	SCHOOL AGE ENDORSEMENT 19a-79-11
	143. Approved endorsement	
	144. Activity choices appropriate	
	145. Ratio – 1 staff to 15 children	
	146. Group size – maximum 30 children	
	146b. 4 yr olds enrolled in school age-permissions	
	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



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

YES or NO?
Yes

WERE VIOLATIONS CITED DURING THIS VISIT?

DISCUSSIONS/COMMENTS

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)		DATE CORRECTIONS DUE BY:	 (Signature of Person in Charge)
Lori Mangano (Printed Name)	 (Printed Name)	10/21/2024	Geraldine Flynn (Printed Name)