



Connecticut Office of
Early Childhood

DIVISION OF LICENSING

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CHILD CARE CENTER/GROUP CHILD CARE HOME SUPPLEMENTAL INSPECTION

Program Name	SCHA PRESCHOOL DOWNTOWN				License Number	DCCC.70709	Date of Inspection	10/10/2024
					Expiration Date	6/30/2027	Time of Inspection	10:55 AM
Address	97 WHITNEY AVE NEW HAVEN CT 06510-1232				Telephone	(203) 795-5261	Total Capacity	24
					Days and Hours	Monday- Friday 9AM-3PM Sept-Aug closed 3 weeks in Aug	Under Three Capacity	24
#Children Present	8	# Under 3 Present	8	# Staff Present	5	Summer Care	Open	
Purpose of Inspection	Follow up to 9-25-24 follow up inspection				Name of Inspector	Bridget Merrill		
Program's Email	lpill@schacademy.org				Inspector's Email	bridget.merrill@ct.gov		

Regulatory Violations

Statute and/or Regulation: [-]	Description: 000 No Violations
No violations were cited during this inspection	
Statute and/or Regulation:	Description:
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Other Findings – Regulations In Compliance	
Statute and/or Regulation: [19a-79-4a(a)(1) and/or 19a-79-4a(a)(2)]	Description: 016-Staff Health Records
Statute and/or Regulation: [19a-79-9a(a)(2)]	Description: 099-Nonprescription Topical Medications: Administration/Parent Permission/MAR

Statute and/or Regulation: [19a-79-10(c)(2) and/or 19a-79-4a(c)(6)]	Description: 110-Under Three Endorsement: Ratio: 1 Staff to 4 Children
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Statute and/or Regulation:	Description:
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Statute and/or Regulation:	Description:
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YES/NO: No	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

Observed all violations from 9-25-24 follow up inspection to be corrected/ in compliance.

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)		Lorie pill (Printed Name)