

Initial Unannounced Full/Partial Follow-up Location Change Investigation Other _____

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Right at School @ West Woods Date: 11/18/24 Time: 3:00

Location Address: 350 W. Todd St. Hamden Telephone #: 262 237-9475

e-mail address: michelle.higgins@rightatschool.com License #: 70502 Expiration Date: 8/31/27

Capacity: 110 # of Children Present: 18 # of Staff Present: 3

**Consent to Inspect
Family Child Care Home**

I agree to allow the Office of Early Childhood to have access to and inspect this facility and all child care records as required by Family Child Care Home Regulations.
Provider/Applicant/Substitute's Signature _____

Purpose of visit: Investigation 2024-1191

Observations/Corrections needed:

(NS) 19a-79-3a(f) Immediate access by parents - insufficient evidence to support a regulatory violation

(P) 19a-79-3a(d)(6)(B) Agreements with parents - pending completion of interviews

(S) 19a-79-4a(d)(2) Two people present when children present - regulation not met when one staff person was present for 17 minutes with children present.

(S) 19a-79-11(d) School age ratio of 1 adult to 15 children - regulation not met when 1 adult was present with more than 15 children for 12 minutes.

Discussed having chain of command posted where parents have access. Complete the new complaint procedure - info left blank on posting. (19a-79-3a(d)(6)(c))

S = Substantiated NS = Not Substantiated P = Pending (if applicable)

Operators/providers are required by regulations and statutes to be in compliance at all times.

Signature: Karen Hicks
(OEC Representative)

Print Name: Karen Hicks

Signature: Johanna Darby
(Person in Charge)

Print Name: Johanna Darby

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 12/2/2024