

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Creating Kids at CT Children's Date: 11/19/24 Time: 10:14am

Location Address: 22 Wall Street ^{Museum} New Haven Telephone #: 203-789-1622
06511

e-mail address: creatingkids@snet.net License #: 13946 Expiration Date: 6/30/25

Capacity: 48 # of Children Present: 28 # of Staff Present: 8
√3 = 16

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

Purpose of visit: Partial inspection for inspections dated 4/18/24 and 5/23/24

Observations/Corrections needed:

- 19a-79-10(e)(2): Exclusive use of diaper changing table in compliance at this visit.
- 19a-79-10(c)(3): Group size for under 3 in compliance at this visit
- 19a-79-4a(d)(6) nap time ratio in compliance at this visit (observed 3:1 ratio in infant nap room)
- 19a-79-7a(e)(9) lighting during nap time in compliance at this visit
- 19a-79-3a: ensuring health + safety of children in compliance at this visit
- 19a-79-7a(d)(4)(D) supervision in compliance at this visit.
- 19a-79-10(h)(2) observed mulch on under 3's playground which is 1 1/4 in diameter which poses choking hazard.

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

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

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 12/3/24

Signature: Fil Montanye
(OEC Representative)
Print Name: Fil Montanye
Signature: Sarah A. Fortier
(Person in Charge)
Print Name: Sarah A. Fortier

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Creating Kids at CT Children's Museum License # 13946 Date: 11/19/24

Observations/Corrections needed:

• Pa-79-4a (b)(4) Evidence of compliance with comprehensive background checks in compliance at this visit

Discussion

• immediate access by OEC upon entering

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Operators/providers are required by regulations and statutes to be in compliance at all times. Signature: [Signature]
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO Signature: [Signature]
(Person in Charge)

OEC BY: 12/3/24