

CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM

Type of Inspection: ☐ Initial ☒ Unannounced Full ☐ Announced Full ☐ Partial ☐ Follow-Up ☐ Change of Location

Program Name:	Ed Advance Basics Ann Antolini	Date of Inspection:	12/4/24	Time of Arrival:	3:00
Address:	30 Antolini Rd.	License Number:	14058	Expiration Date:	3/3/24
Town:	New Hartford, CT 06057	Telephone Number:		Summer Care:	Closed
Operator:	Ed Advance	# of Staff Present:	2	# over 3 Present:	15
Email:	viscaric110@edadvance.org	Total Capacity:	210	Total Under 3 capacity:	0
Designated Director:	Surran Moran	Hours/Days of Operation:	M-F 3:00 - 6:00pm		

Instruction Codes: N/A = Not applicable at this time ✓ = Regulation in Compliance ○ = Regulation not in Compliance

Endorsements: ☐ Under Three (6wks - 36m) ☐ Preschool (3y - 5y) ☒ School Age (5y & up) ☐ Night Care (6wks & up)

LICENSURE PROCEDURES 19a-79-2a		STAFFING and CONSULTANTS 19a-79-3a cont.																					
✓ 1.	(c)(8)	Local Health Inspection-Date: <u>10/25/23</u>																					
ADMINISTRATION 19a-79-3a																							
✓ 2.	(a)	Ensuring health & safety of children	☐ 19. ☒ 20. ☐ 21. ☒ 22. ☒ 23. ☒ 24. ☒ 25. ☒ 26. ☒ 27. ☒ 28. ☒ 29. ☒ 30. ☒ 31. ☒ 32. ☒ 33. ☒ 34. ☐ 35.																				
✓ 3.	(b)	Overall management of program																					
✓ 4.	(b)(6)	Employee orientation for new program staff																					
✓ 5.	(b)(6)	Annual policy training for program staff																					
✓ 6.	(b)(7)(A)	Child behavior management																					
✓ 7.	(b)(7)(B)	Documentation that parents were informed of behavior management techniques																					
✓ 8.	(b)(7)(C)	Child Protection																					
✓ 9.	(b)(7)(E)	Mandated Reporting																					
✓ 10.	(c)(1-4)	Notification of Change																					
✓ 11.		POLICIES-COMplete/IMPLEMENTED																					
	✓ (d)(2)(A)	Discipline policy	☒ (a)(1) ☒ (a)(3) ☐ (b) ☒ (b)(4) ☐ (d) ☒ (d)(1) ☒ (d)(2) ☒ (d)(3)(A-C) ☒ (d)(4)(A) ☒ (d)(4)(B) ☒ (d)(6) ☒ (d)(4)(D) ☒ (d)(5) ☒ (d)(5)(A) ☒ (d)(5)(B) ☐ (e)(1) ☐ (f)(1) ☐ (f)(2) ☒ (a)(2) ☒ (h)(1)(2) ☒ (h)(1)(2) ☒ (4)(C)(ii-v) ☒ (4)(C)(i) ☒ (e)(6) ☒ (e)(6) ☒ (i)(1)(A)-(D) ☒ (i) ☒ (i)(2)(A-H) ☐ (F) ☐ (i)(2) ☐ (H)(i)-(I)(i)																				
	✓ (d)(2)(B-C)	Child Protection policy																					
	✓ (d)(3)	Closing time policy																					
	✓ (d)(4)(A)	Medical emergency policy																					
	✓ (d)(4)(B)	Multi-Hazards policy-annual drill																					
	✓ (d)(5)	Supervision policy																					
	✓ (d)(6)	General Operating policies																					
	✓ (d)(6)(C)	Administrative Oversight policy																					
	✓ (d)(7)	Personnel policies																					
✓ 12.	(d)(1)	Daily attendance-children/staff- keep 1 yr.																					
✓ 13.		ACCESS																					
	✓ (f)	Immediate access by parents																					
	✓ (h)	Immediate access by OEC-facility/records																					
✓ 14.	(l) <u>11A</u>	2.8 yr olds enrolled in preschool-authorization																					
✓ 15.	(m)	Motor vehicle laws-transportation																					
✓ 16.	(n)	Capacity																					
✓ 17.	(o)	Respond to OEC-no false, misleading statements or documents																					
✓ 18.		POSTINGS																					
	✓ (e)(1)	License posted																					
	✓ (e)(2)	OEC Complaint Procedure posted																					
	✓ (e)(3)	Menus posted																					
	✓ (e)(4)	No Smoking posted signs at entrances																					
	✓ (e)(5)	OEC Inspection report posted or available																					
N/A	✓ (e)(6)	Developmental Milestones posted																					
		STAFF health records Disciplinary actions Comprehensive Background Checks Evidence of compliance Adequate staffing Designated head teacher-approved-60% Two staff present-age 18 or older Personal qualities of staff RATIOS Ratio 1:10 - Indoors/Outdoors Mixed age group-ratios Nap time ratio Supervision-Indoors/Outdoors GROUP SIZE Group Size-Indoors/Outdoors Group Size-school age field trips/outdoors Mixed age group-group size Designated director-training CPR certified program staff First aid certified program staff PROFESSIONAL DEVELOPMENT Documentation Health & Safety training 1% annual hours SWIMMING ACTIVITIES - Y/N Swimming-Ratios Non-swimmers identified CPR certified staff-age 20 or older Lifeguard-certified-supervising CONSULTANTS Consultants-Education, Health, Social Service, Dietitian (N/A) Consultant agreements-signed annually Agreements complete w/required services Consultant logs-documented activities, observations and required services Consultant visits- Education/Health																					
		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Contracts</th> <th>Logs</th> <th>Visits</th> </tr> </thead> <tbody> <tr> <td>Education</td> <td>✓</td> <td>✓</td> <td>✓</td> </tr> <tr> <td>Health</td> <td>✓</td> <td>✓</td> <td>0</td> </tr> <tr> <td>Soc. Serv.</td> <td>✓</td> <td>✓</td> <td></td> </tr> <tr> <td>Dietitian</td> <td>N/A</td> <td>N/A</td> <td></td> </tr> </tbody> </table>			Contracts	Logs	Visits	Education	✓	✓	✓	Health	✓	✓	0	Soc. Serv.	✓	✓		Dietitian	N/A	N/A	
	Contracts	Logs	Visits																				
Education	✓	✓	✓																				
Health	✓	✓	0																				
Soc. Serv.	✓	✓																					
Dietitian	N/A	N/A																					

CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM - page 2

PROGRAM
NAME

Edaadvance Bases Ann Antekin

LICENSE
NUMBER

14058

DATE OF
INSPECTION

12/1/24

RECORD KEEPING 19a-79-5

- ☒ 36. (a)(1)(A-C) Children's Enrollment information
- ☒ 37. PARENT PERMISSIONS
- ☒ (a)(1)(D)(i) Emergency medical permission
- ☒ (a)(1)(D)(ii) Authorized release permission
- ☒ (a)(1)(D)(iii) Field trip permission
- ☒ (a)(1)(D)(iv) Transportation permission
- ☒ 38. (a)(2)(A-B) Child Health Records
- ☒ 39. (a)(2)(C) Immunization records
- ☒ 40. (a)(2)(E) Individual care plan-signed by parents/staff
- ☒ 41. (a)(3)(A) Injury, Illness, Incident, Accident reports
- ☒ 42. (a)(3)(B) Parent notification of illness or injury
- ☒ 43. (a)(3)(C)(i-ii) Notify OEC of serious injuries, fatality
- ☒ 44. (a)(3)(D) Notify DPH, local health-reportable diseases
- ☒ 45. (a)(4) Video recordings- keep 30 days

HEALTH and SAFETY 19a-79-6a

- ☒ 46. (a)(1) Preparation, transportation of food-follow DPH Model Food Code N/A
- ☒ 47. (a)(2) Nutritious meals and snacks
- ☒ 48. (a)(3) Proper refrigeration-41 degrees
- ☒ 49. (a)(4) Menus-1 wk in advance- keep 3 mths
- ☒ 50. (a)(5) Food Service Inspection N/A
- ☒ 51. (a)(6) Kitchen-clean, safe storage of food/supplies
- ☒ 52. (a)(7) Separate hand washing facilities
- ☒ 53. (a)(8) Multi-use eating/drinking utensils
- ☒ 54. (a)(9) Kitchen separated (Schl age only N/A)
- ☒ 55. (a)(10) Children supervised during meal prep
- ☒ 56. (a)(11) Handwashing-staff/children
- ☒ 57. (b)(1) Illness procedures-staff knowledgeable, children observed for signs/symptoms
- ☒ 58. (b)(2) Designated isolation area
- ☒ 59. ☒ (c) FIRST AID KITS-portable, accessible to staff, closed container-Indoor/Outdoor/Field Trips
- ☒ 60. ☒ (c) FIRST AID SUPPLIES-Indoor/Outdoor-adhesive strips, 3-4" gauze squares, 2" rolled gauze, tape, scissors, tweezers, 2 cold packs, thermometer, gloves, CPR mouth barrier
- ☒ 61. ☒ (d) FIRST AID SUPPLIES-add'l for field trips water, phone, soap, emergency numbers, medications, plastic bags

PHYSICAL PLANT 19a-79-7a

- ☒ 62. (a)(2) Fire marshal codes/certificate 8/16/24
- ☒ 63. (b) Indoor/Outdoor space inspected/approved
- ☒ 64. (b)(1)-(5) Construction/expansion/renovation/conversion
- ☒ 65. (b)(6) N/A Space not inspected/approved but used for field trips-written parent permission
- ☒ 66. (c)(2) Licensed premises-clean, good repair, hazard free, maintenance program established
- ☒ 67. (c)(3) Building/Equipment/Furnishings-sanitary, hazard free (Schl age only) N/A
- ☒ 68. (c)(4) Testing of premises/grounds for chemicals
- ☒ 69. WATER SUPPLY - Public/Well (Schools-N/A)
- ☒ (c)(5)(A) Lead Water Test - Date: _____
- ☒ (c)(5)(B) Bact./Chem Test-Date: _____ N/A
- ☒ (c)(5)(C) Drinking water available/accessible
- ☒ 70. LEAD PAINT -
- ☒ (c)(6)(A) Peeling Paint - Y N Inside/Outside Building Pre-78: N Lead Test: N Results no lead identified
- ☒ (c)(6)(B-D) Lead Management Plan _____
- ☒ 71. (d)(1) Emergency vehicle access

PHYSICAL PLANT 19a-79-7a cont.

- ☒ 72. (d)(2) Walkways maintained
- ☒ 73. (d)(3) Windows protected to prevent falls
- ☒ 74. (d)(3) Window screens (Schl age only- N/A)
- ☒ 75. (d)(4) N/A Glass and mirrors protected to 36"
- ☒ 76. (d)(5) Overhead doors-locking devices, spring protectors N/A
- ☒ 77. (d)(6), (f)(3) Exits, stairs, hallways unobstructed
- ☒ 78. (d)(7) N/A Individual storage of clothing/bedding
- ☒ 79. (d)(8) Smoking or vaping prohibited on premises/grounds
- ☒ 80. (d)(8) Matches/lighters inaccessible
- ☒ 81. (d)(9) Electrical safety-outlets inaccessible -covered or protected (Schl age only-N/A)
- ☒ 82. TOILETING
- ☒ (d)(10)(A) Shared toilets/sinks-supervision plan
- ☒ (d)(10)(B) Toileting needs met
- ☒ (d)(10)(C) Potty chairs-nonporous, emptied, disinfected
- ☒ (d)(10)(C) Required toilets/sinks-1:16 N/A
- ☒ (d)(10)(D) Required toilets/sinks-1:25 schl age only
- ☒ (d)(10)(E) Toileting Supplies-Hand drying-Garbage
- ☒ (d)(10)(E) Handwashing staff/children
- ☒ (d)(10)(F) Toilets/sinks located-at the facility or licensed premises
- ☒ (d)(10)(G) Well lighted/ventilated toilet rooms
- ☒ (d)(10)(H) Mechanical ventilation (Grp Homes N/A)
- ☒ (d)(11) Staff personal articles inaccessible
- ☒ 83. AIR TEMPERATURE
- ☒ 84. (e)(1) Air temp 65 °F at 3 ft -non-mercury thermometer affixed to wall (Schl age only N/A)
- ☒ 85. (e)(1) Air temp <65°F comfortable (Schl age only-N/A)
- ☒ 86. (e)(2) Air temp > 80 °F - ↑ fluids/ventilation
- ☒ 87. (e)(3) N/A Water temperature 60 °F - 120 °F
- ☒ 88. (e)(4) Portable space heaters prohibited
- ☒ 89. (e)(5) N/A Walls/ceilings/floors/rugs-clean/good repair
- ☒ 90. (e)(5) Rugs- not tripping/slipping hazard
- ☒ 91. (e)(6) Hot water/Steam pipes protected
- ☒ 92. (e)(7) Working phone on each level
- ☒ 93. (e)(7) Emergency numbers posted-adjacent to phones
- ☒ 94. (e)(7) Parents provided direct on site phone number
- ☒ (e)(8) LIGHTING
- ☒ (e)(9) All areas min. 1 foot candle of lighting
- ☒ (e)(9) Adequate lighting-30/50 candle feet-napping children-sufficient lighting to be visible N/A
- ☒ (e)(9) Schl age only-lighting for comfort
- ☒ (e)(9) Light fixtures shielded/shatter proof
- ☒ (e)(10) Potentially hazardous substances, materials - labeled, inaccessible
- ☒ 95. (e)(11) Garbage/rubbish-disposed of daily, containers in good repair
- ☒ 96. (e)(12) Stairs-protected/good repair-handrails
- ☒ 97. (e)(13) Toxic plants/materials inaccessible
- ☒ 98. (e)(14-15) Pets or other animals-in good health, written care plan including access to children N/A
- ☒ 99. (e)(16) N/A Prevention of vermin-openings screened
- ☒ 100. (e)(17) N/A Radon test- Results: _____
- ☒ 101. (e)(17) N/A Results posted-Date: _____
- ☒ 102. (e)(18) Carbon monoxide detector-each level N/A
- ☒ 103. (f)(1)(A) Program space-adequate-35 sq. ft. per child
- ☒ 104. (g)(1) Equipment-clean and safe, good repair, non-toxic-sturdy, free from protruding nails, rust
- ☒ 105. (g)(2) N/A Adequate equipment for rest-cleaned-cots (Grp Homes-mats/sleeping bags)
- ☒ 106. (g)(3) N/A Air conditioners, water heaters, fuse boxes inaccessible
- ☒ 107. (g)(4) Developmentally app equipment, materials

CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM – page 3

PROGRAM NAME	Edaavance Bays Ann Antolin	LICENSE NUMBER	14058	DATE OF INSPECTION	12/4/24
--------------	----------------------------	----------------	-------	--------------------	---------

PHYSICAL PLANT 19a-79-7a cont.

UNDER THREE ENDORSEMENT 19a-79-10 cont.

- | | | |
|--|---|--|
| ☒ 108. | (g)(5) | Manufacture guidelines followed-furniture, equipment and toys-CPSC unsafe/recalls |
| ☒ 109. | (g)(6) | Indoor climbing play equipment-shock absorbing materials under and around |
| ☒ 110. | (j) | No weapons/no facsimile of a firearm |
| ☒ 111. | | <u>OUTDOOR SPACE</u> |
| | ☒ (h)(1) | Adequate space- 75 sq. ft. per child |
| | ☒ (h)(2) | Shock absorbing surfaces-minimum 8" |
| | ☒ (h)(3) | Playground free from hazards |
| | ☒ (h)(4) | Nuts, bolts, screws-tight, covered/protected |
| | ☒ (h)(5) | Outside equipment anchored-anchors buried |
| | ☒ (h)(6) | New equip- cert playg. Inspection upon request |
| | ☒ (h)(8) | Drinking water available/accessible |
| | ☒ (h)(9) | Equipment arranged for safety-equip/fences/structures not hazardous |
| ☒ 112. | | <u>OUTDOOR PROTECTED/FENCING</u> |
| | ☒ (h)(7) | Playground protected from traffic, water, gullies or other hazards |
| ☒ 113. | ☒ (h)(7)(A) | Fences installed to protect from hazards-4 ft |
| ☒ 114. | ☒ (h)(7)(B) | Fences installed to protect from water-4 ft, self closing and self latching devices or locks |
| | ☒ (h)(7)(C) | Rooftop play areas-6 ft. wall/barrier |
| | | <u>WATER HAZARDS</u> |
| | ☒ (i) | Pools, swimming areas-conforms to 19-13-B33b and 19a-36-B61 |
| | ☒ (i) | Wading pools prohibited |
| | ☒ (i) | Hot tubs/spas/saunas-locked/inaccessible |

- | | | |
|--|--------------|--|
| ☒ 129. | (f)(1) | <u>LINENS/CLOTHING</u> |
| | (f)(2) | Linens/emergency clothing available |
| | (f)(3) | Linens washed weekly or as needed |
| | (f)(4) | Linens/clothing stored individually |
| ☒ 130. | | <u>SAFE SLEEP</u> |
| | (g)(1) | Cribs/cots cleaned-linens changed when shared |
| | (g)(1) | Under 12 mths placed on back for sleeping |
| | (g)(1) | Crib-snug fitting mattress/tightly fitted sheet |
| | (g)(1) | Alternate sleep position/equipment-medical documentation for medical reason on file |
| | (g)(2) | Infants allowed to adopt other sleep positions |
| | (g)(3) | No items in/on cribs-blankets, toys, bumpers, pillows, weighted blankets/sleepers/swaddles |
| | (g)(4) | No unapproved sleeping-car seats/swings/beds, etc. |
| | (g)(5) | No swaddling w/o written documentation from MD/PA/APRN- instructions/timeframes |
| | (g)(6) | Observe/assess infants at least every 15 minutes |
| | (g)(7) | Teething necklaces/bracelets, jewelry inaccessible |
| | (g)(8) | Safe sleep policies posted/parents informed |
| ☒ 131. | (h)(1) | Infant toys-separate/washed/sanitized daily |
| ☒ 132. | (h)(1) | Toddler toys-washed/sanitized weekly |
| ☒ 133. | (h)(2) | No toys/objects less than 1 ¼ " diameter |
| ☒ 134. | (h)(2) | Plastic bags/balloons/styrofoam inaccessible unless under direct supervision |
| ☒ 135. | (i)(1)(2A-C) | Health consultant visits/documentation |
| ☒ 136. | | <u>FEEDING</u> |
| | (j) | Infants held for bottles - chairs for feeding - individual attn, tummy time, crawl/toddle |
| | (k)(1) | Written feeding schedule from parent-updated |
| | (k)(2) | Unused formula/milk discarded after feedings |
| | (k)(3) | Clean bottles/disposable bottles/appvd washing |
| | (k)(4) | Baby food served from dish or whole jar |
| | (k)(5) | Bottles labeled with child's name |
| ☒ 137. | (l)(1) | Outdoor spaced fenced-4 ft lic. after 1/1/25 |
| ☒ 138. | (l)(2) | Outdoor equipment-developmentally appropriate for ages of the children |
| ☒ 139. | (l)(3) | Shock ab materials less than 1 ¼ "-or measures in place to ensure their health & safety |

EDUCATIONAL REQUIREMENTS 19a-79-8a

- | | | |
|--|--|--|
| ☒ 115. | (a) | Written daily/weekly educational plan-developmentally appropriate |
| ☒ 116. | (a) | <u>EDUCATIONAL REQUIREMENTS</u> |
| | ☒ (1)-(11) | Indoor/outdoor, flexible schedule, cultural content, balanced experiences, exploration and discovery, variety of materials, rest/sleep/quiet time, meals/snacks, toileting, individual/small group activities, physical activity |
| | ☒ (b) | Limited access to screen time/video games |

UNDER THREE ENDORSEMENT 19a-79-10 YN

SCHOOL AGE ENDORSEMENT 19a-79-11 YN

- | | | |
|--|--|--|
| ☒ 117. | (b) | Approved Under 3 Endorsement |
| ☒ 118. | (c)(2) | Ratios- 1:4 (6wks-24mths), 1:5 (24-36mths) |
| ☒ 119. | (c)(3) | Group size-max 8 (6wks-24mths), max 10 (24-36mths) |
| ☒ 120. | (c)(4) | Physical barriers- indoors/outdoors |
| ☒ 121. | (d)(1)(A-C) | Adequate sinks in program space (Grp Homes accessible) handwashing-diapering-food prep |
| ☒ 122. | (d)(2)(Ai-iii) | Cribs-in compliance w/CPSC (manf. after 6/28/11) |
| ☒ 123. | (d)(2)(B) | Washable cots |
| ☒ 124. | (d)(2)(C) | Chairs for feeding-stable base-safety straps-locking tray |
| ☒ 125. | (d)(2)(D) | Dev. appropriate tables/chairs/equipment |
| ☒ 126. | (d)(2)(E) | Refrigerator and food prep facilities |
| ☒ 127. | (d)(3)(A-C) | Optional furniture/equip-safe/hazard free |
| ☒ 128. | | <u>DIAPERING</u> |
| | ☒ (e)(1) | Diaper area: elevated/sturdy/safety rail |
| | ☒ (e)(2) | Diaper area: used only for this purpose, located in the program area |
| | ☒ (e)(3) | Diaper area: non-porous surface/good repair |
| | ☒ (e)(4) | Diaper area: washed/disinfected after use |
| | ☒ (e)(5) | Diaper area: disposable paper sheets |
| | ☒ (e)(6)(9) | Covered waste receptacle-removed daily |
| | ☒ (e)(7) | Handwashing-staff/children |
| | ☒ (e)(8) | Diapering-Handwashing policies-posted/followed |
| | ☒ (e)(10)(A-C) | Cloth diapers-written plan developed |

- | | | |
|--|--|--|
| ☒ 140. | (b) | Approved Schl Age Endorsement |
| ☒ 141. | ☒ (c) | <u>SCHEDULE - ACTIVITIES</u> |
| ☒ 142. | ☒ (c)(1) | Written daily program plan-flexible schedule-available to staff/parents |
| | ☒ (c)(2) | Activities not a duplication of child's day |
| | ☒ (c)(3) | Activities include cognitive, physical, social, emotional needs of the children |
| | | Program includes free time, snacks, creative/physical/small group/self-concept activities, homework time, special events |
| ☒ 143. | (d) | Ratio- 1:15 |
| ☒ 144. | (e) | Group size- max. 30 |
| ☒ 145. | (f) | 4 yr. olds enrolled in schl age-written authorization/permission from director/parent |
| ☒ 146. | (g) | Head teacher approved- 60% |

CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM - page 4

PROGRAM NAME		Edaadvance Basics Ann		LICENSE NUMBER	14058	DATE OF INSPECTION	12/4/24
NIGHT CARE ENDORSEMENT 19a-79-12 (10pm-5am) Y/N				MONITORING OF DIABETES 19a-79-13 Y/N			
☒ 147.	(b)	Approved Night Care Endorsement	☒ 171.	(a)(1)	Written policies and procedures		
☒ 148.	(b)(1)	Person in charge-head teacher	☒ 172.	☒ (b)(1)(A)	STAFF TRAINING		
☒ 149.	(b)(2)	Written plan for program activities- meet individual needs, sleep patterns, quiet activities		☒ (b)(1)(B)	Staff training – first aid		
☒ 150.	(b)(3)	Written plan for supervision including cot placement and evacuation		(i)-(iii)	Staff training – use/storage/maintenance of monitoring equipment, reading test results, appropriate actions		
☒ 151.	(b)(4)	Children in care no more than 12 hrs. in 24		☒ (b)(2)	Training updated at least every 3 years		
☒ 152.	(b)(5)	Staff awake and available		☒ (b)(3)	Written documentation of training		
☒ 153.		SLEEP PROVISIONS		☒ (c)(2)	Trained staff on site when child is present		
	☒ (b)(6)	Individual cot/crib with bedding	☒ 173.	(c)(3)	Self-administration - written authorization and under supervision of trained staff		
	☒ (b)(6)(A)	Sleeping apparel/toiletries labeled	☒ 174.	(d)(1)	Equipment provided by parents		
	☒ (b)(6)(B)	Required bedding	☒ 175.	(d)(2)	Equipment labeled and inaccessible		
	☒ (b)(6)(C)	Required toiletries	☒ 176.	(d)(3)	Signed agreement with parent regarding equipment, supplies, materials to be discarded		
	☒ (b)(6)(D)	Bedding/sleeping apparel laundered weekly			Authorized prescriber written order		
	☒ (b)(7)	Sleep arrangements for infants	☒ 177.	(e)(1)	Written authorization from parent		
☒ 154.	(b)(8)	Air temp 65 °F at 3 ft	☒ 178.	(e)(2)	Testing results and actions taken – documented and kept on file, ensure parents are notified daily		
☒ 155.	(b)(9)	Fire marshal approval-hours specified	☒ 179.	(e)(3)			
☒ 156.	(b)(10)	Local health approval					
ADMINISTRATION OF MEDICATIONS 19a-79-9a Y/N				ADDITIONAL VIOLATION			
☒ 157.	(9a)	Written medication policies/procedures	☒ 180.	-	Consent Order/Negotiated Corrective Action		
☒ 158.	(9a)	Permit enrollment of children with asthma, allergies, diabetes		n/a	Plan conditions	N/A	
☒ 159.	☒ (a)(2)	NONPRESC. TOPICAL MEDICATION	DISCUSSIONS - COMMENTS				
	☒ (a)(3)(A-B)	Admin/Parent permission/report errors	See page 5				
	☒ (a)(3)(C)	Labeling and Storage					
☒ 160.		Unused/expired meds destroyed/returned					
	☒ (b)(1)(A/C)	MEDICATION TRAINING					
	☒ (b)(1)(D)	Medication training-general-oral/top/inhalant					
	☒ (b)(1)(E)	Injectable premeasured autoinjector medication					
	☒ (b)(1)(F)	Rectal medication					
	☒ (b)(2)(A-B)	Injectable other than premeasured auto-injector					
	☒ (b)(2)(C)	Training approval documents/certificates					
	☒ (b)(2)(D)	Training outline on file					
☒ 161.	(b)(3)(A-B)	Authorized prescriber/parent permission					
☒ 162.	(b)(3)(D)	Medication errors- documentation, parent(s) and OEC notification					
☒ 163.	(b)(4)(A-B)	Medication Administration Records (MAR)					
☒ 164.	(b)(5)(A-B)	Labeling and Storage					
☒ 165.	(b)(5)(C)	Emergency medication inaccessible					
☒ 166.	(b)(5)(D)	Unused/Expired meds-destroyed/returned					
☒ 167.	(b)(5)(E)	Auto-injector/inhalant equipment					
☒ 168.	(b)(6)	Self-administration documentation					
☒ 169.	(b)(7)(A-B)	Petition for special medication authorization					
☒ 170.	(d)	Potassium Iodide (KI) emergency distribution-permission and storage					
SIGNATURE OF OEC STAFF		Krishni Morgan		SIGNATURE OF PERSON IN CHARGE		Keith Hellhake	
PRINTED NAME		Krishni Morgan		PRINTED NAME		Keith Hellhake	
OEC DIVISION OF LICENSING 450 Columbus Blvd, Suite 302, Hartford, CT 06103 Help Desk: (800)282-6063 or (860)500-4450 Website: www.ctoec.org/licensing Email: oec.licensing@ct.gov				Inspection shall be posted or available for review upon request.			
				Written Corrective Action Plan Due by: 12/18/24		CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf	

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Ed advance Bases Ann License # 12/4/24 Date: 12/4/24
Antoini

Observations/Corrections needed:

- 19 - 1 staff health record not observed.
- 21 - 1 staff on site + supervising children observed without current background check.
- 39 - 1 child's physical missing immunization records.
- ~~49 - observed only current week menu posted.~~ OK (initials)
- 165 - observed medication bag on floor in classroom
- 35 - health consultant log/visit documentation not observed

Discussed:

- program responsible to ^{understand +} comply with all new regulations.
- expired license posted.
- policies to be updated to reflect new requirements.
- mulch on playground frozen - depth could not be determined.

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:

Kristin Morgan
 (OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature:

Keith Hellhake
 (Person in Charge)

OEC BY: 12/18/24