

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:	Valley School Age-Joel School	Date of Inspection:	12/12/2024	Time of Arrival:	1240PM
Address:	137A Glenwood Rd.	License Number:	14115	Expiration Date:	4/30/2026
Town:	Clinton, CT. 06413-1425	Telephone Number:	860-304-2691	Summer Care:	Closed
Operator:	Valley Shore YMCA	# of Staff Present:	3	# over 3 Present:	18
Email:	bbrun@symca.org	Total Capacity:	60	Total Under 3 capacity:	0
Designated Director:	Britney M. Bruno	Hours/Days of Operation:	M-F 7AM-330AM 3PM-6PM Halfdays 1215PM-6PM	Ages Served:	5-12yrs

Instruction Codes: N/A = Not applicable at this time √ = Regulation in Compliance O = 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

1. (c)(8) Local Health Inspection-Date: 12/12/2024

ADMINISTRATION 19a-79-3a

- 2. (a) Ensuring health & safety of children
- 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
 - (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
 - (d)(1) Daily attendance-children/staff- keep 1 yr.
- 12. ACCESS
- 13. Immediate access by parents
- 14. Immediate access by OEC-facility/records
- 15. (l) 2.8 yr olds enrolled in preschool-authorization
- 16. (m) Motor vehicle laws-transportation
- 17. (n) Capacity
- 18. (o) Respond to OEC-no false, misleading statements or documents
- 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
 - (e)(6) Developmental Milestones posted

STAFFING and CONSULTANTS 19a-79-4a cont.

- 19. (a)(1)
 - 20. (a)(3)
 - 21. (b)
 - 22. (b)(4)
 - 23. (d)
 - 24. (d)(1)
 - 25. (d)(2)
 - 26. (d)(3)(A-C)
 - 27. (d)(4)(A)
 - 28. (d)(4)(B)
 - 29. (d)(6)
 - 30. (d)(4)(D)
 - 31. (d)(5)
 - 32. (d)(5)(A)
 - 33. (d)(5)(B)
 - 34. (e)(1)
 - 35. (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)
- 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

	Contracts	Logs	Visits
Education	✓	✓	
Health	✓	✓	✓
Soc. Serv.	✓	✓	
Dietitian	N/A	N/A	

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

PROGRAM NAME		LICENSE NUMBER	DATE OF INSPECTION
Nalley School Age-Joel School		14115	12/12/2024
RECORD KEEPING 19a-79-5		PHYSICAL PLANT 19a-79-7a cont.	
☒ 36. (a)(1)(A-C) Children's Enrollment information ☒ 37. (a)(1)(D)(i) PARENT PERMISSIONS ☒ (a)(1)(D)(ii) Emergency medical permission ☒ (a)(1)(D)(iii) Authorized release permission ☒ (a)(1)(D)(iv) Field trip permission ☒ 38. (a)(2)(A-B) Transportation permission ☒ 39. (a)(2)(C) Child Health Records ☒ 40. (a)(2)(E) Immunization records ☒ 41. (a)(3)(A) Individual care plan-signed by parents/staff ☒ 42. (a)(3)(B) Injury, Illness, Incident, Accident reports ☒ 43. (a)(3)(C)(i-ii) Parent notification of illness or injury ☒ 44. (a)(3)(D) Notify OEC of serious injuries, fatality ☒ 45. (a)(4) Notify DPH, local health-reportable diseases ☒ Video recordings- keep 30 days	☒ 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) 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) 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. <u>TOILETING</u> Shared toilets/sinks-supervision plan Toileting needs met Potty chairs-nonporous, emptied, disinfected Required toilets/sinks-1:16 Required toilets/sinks-1:25 schl age only Toileting Supplies-Hand drying-Garbage Handwashing staff/children Toilets/sinks located-at the facility or licensed premises Well lighted/ventilated toilet rooms Mechanical ventilation (Grp Homes N/A) Staff personal articles inaccessible <u>AIR TEMPERATURE</u> Air temp 65 °F at 3 ft –non-mercury thermometer affixed to wall (Schl age only N/A) Air temp <65°F comfortable (Schl age only-N/A) Air temp > 80 °F - ↑ fluids/ventilation Water temperature 60 °F – 120 °F Portable space heaters prohibited Walls/ceilings/floors/rugs-clean/good repair Rugs- not tripping/slipping hazard Hot water/Steam pipes protected Working phone on each level Emergency numbers posted-adjacent to phones Parents provided direct on site phone number <u>LIGHTING</u> All areas min. 1 foot candle of lighting Adequate lighting-30/50 candle feet-mapping children-sufficient lighting to be visible Schl age only-lighting for comfort Light fixtures shielded/shatter proof Potentially hazardous substances, materials – labeled, inaccessible Garbage/rubbish-disposed of daily, containers in good repair Stairs-protected/good repair-handrails Toxic plants/materials inaccessible Pets or other animals-in good health, written care plan including access to children Prevention of vermin-openings screened Radon test- Results: _____ (N/A) Results posted-Date: _____ (Schls-N/A) Carbon monoxide detector-each level N/A Program space-adequate-35 sq. ft. per child Equipment-clean and safe, good repair, non-toxic-sturdy, free from protruding nails, rust Adequate equipment for rest-cleaned-cots (Grp Homes-mats/sleeping bags) Air conditioners, water heaters, fuse boxes inaccessible Developmentally app equipment, materials		
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	☒ 83. (d)(10)(A) ☒ 84. (d)(10)(B) ☒ 85. (d)(10)(C) ☒ 86. (d)(10)(C) ☒ 87. (d)(10)(D) ☒ 88. (d)(10)(E) ☒ 89. (d)(10)(E) ☒ 90. (d)(10)(F) ☒ 91. (d)(10)(G) ☒ 92. (d)(10)(H) ☒ 93. (d)(11) ☒ 94. (e)(1) ☒ 95. (e)(1) ☒ 96. (e)(2) ☒ 97. (e)(3) ☒ 98. (e)(4) ☒ 99. (e)(5) ☒ 100. (e)(5) ☒ 101. (e)(6) ☒ 102. (e)(7) ☒ 103. (e)(7) ☒ 104. (e)(7) ☒ 105. (e)(8) ☒ 106. (e)(9) ☒ 107. (e)(9) ☒ 108. (e)(10) ☒ 109. (e)(11) ☒ 110. (e)(12) ☒ 111. (e)(13) ☒ 112. (e)(14-15) ☒ 113. (e)(16) ☒ 114. (e)(17) ☒ 115. (e)(18) ☒ 116. (f)(1)(A) ☒ 117. (g)(1) ☒ 118. (g)(2) ☒ 119. (g)(3) ☒ 120. (g)(4)		
PHYSICAL PLANT 19a-79-7a			
☒ 62. (a)(2) Fire marshal codes/certificate 8/30/2024 ☒ 63. (b) Indoor/Outdoor space inspected/approved ☒ 64. (b)(1)-(5) Construction/expansion/renovation/conversion ☒ 65. (b)(6) 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. <u>WATER SUPPLY</u> – Public/Well (Schools-N/A) Lead Water Test – Date: _____ Bact./Chem Test-Date: _____ (N/A) Drinking water available/accessible <u>LEAD PAINT</u> - Peeling Paint – Y/N Inside/Outside Building Pre-78: Y/N Lead Test: Y/N Results No lead identified Lead Management Plan N/A ☒ 70. (c)(5)(A) ☒ (c)(5)(B) ☒ (c)(5)(C) ☒ 71. (d)(1) Emergency vehicle access			

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

PROGRAM NAME		LICENSE NUMBER		DATE OF INSPECTION	
Valley School Age- Toddler School		14115		12/12/2024	
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	☒ 129.		<u>LINENS/CLOTHING</u>
☒ 109.	(g)(6)	Indoor climbing play equipment-shock absorbing materials under and around		☐ (f)(1)	Linens/emergency clothing available
☒ 110.	(j)	No weapons/no facsimile of a firearm		☐ (f)(2)	Linens washed weekly or as needed
☒ 111.		<u>OUTDOOR SPACE</u>	☒ 130.	☐ (f)(3)	Linens/clothing stored individually
	☒ (h)(1)	Adequate space- 75 sq. ft. per child		☐ (f)(4)	Cribs/cots cleaned-linens changed when shared
	☒ (h)(2)	Shock absorbing surfaces-minimum 8"		☐ (g)(1)	<u>SAFE SLEEP</u>
	☒ (h)(3)	Playground free from hazards		☐ (g)(1)	Under 12 mths placed on back for sleeping
	☒ (h)(4)	Nuts, bolts, screws-tight, covered/protected		☐ (g)(2)	Crib-snug fitting mattress/tightly fitted sheet
	☒ (h)(5)	Outside equipment anchored-anchors buried		☐ (g)(3)	Alternate sleep position/equipment-medical documentation for medical reason on file
	☒ (h)(6)	New equip- cert playg. Inspection upon request		☐ (g)(4)	Infants allowed to adopt other sleep positions
	☐ (h)(8)	Drinking water available/accessible		☐ (g)(5)	No items in/on cribs-blankets, toys, bumpers, pillows, weighted blankets/sleepers/swaddles
	☒ (h)(9)	Equipment arranged for safety-equip/fences/structures not hazardous		☐ (g)(6)	No unapproved sleeping-car seats/swings/beds, etc.
☒ 112.		<u>OUTDOOR PROTECTED/FENCING</u>		☐ (g)(7)	No swaddling w/o written documentation from MD/PA/APRN- instructions/timeframes
	☒ (h)(7)	Playground protected from traffic, water, gullies or other hazards		☐ (g)(8)	Observe/assess infants at least every 15 minutes
☒ 113.	☒ (h)(7)(A)	Fences installed to protect from hazards-4 ft		☐ (h)(1)	Teething necklaces/bracelets, jewelry inaccessible
	☒ (h)(7)(B)	Fences installed to protect from water-4 ft, self closing and self latching devices or locks		☐ (h)(1)	Safe sleep policies posted/parents informed
	☒ (h)(7)(C)	Rooftop play areas-6 ft. wall/barrier		☐ (h)(2)	Infant toys-separate/washed/sanitized daily
☒ 114.	☒ (i)	<u>WATER HAZARDS</u>		☐ (h)(2)	Toddler toys-washed/sanitized weekly
	☒ (i)	Pools, swimming areas-			No toys/objects less than 1 1/4" diameter
	☒ (l)	conforms to 19-13-B33b and 19a-36-B61			Plastic bags/balloons/styrofoam inaccessible unless under direct supervision
		Wading pools prohibited			Health consultant visits/documentation
		Hot tubs/spas/saunas-locked/inaccessible			<u>FEEDING</u>
EDUCATIONAL REQUIREMENTS 19a-79-8a					Infants held for bottles - chairs for feeding - individual attn, tummy time, crawl/toddle
☒ 115.	(a)	Written daily/weekly educational plan-developmentally appropriate		☐ (k)(1)	Written feeding schedule from parent-updated
☒ 116.	(a)	<u>EDUCATIONAL REQUIREMENTS</u>		☐ (k)(2)	Unused formula/milk discarded after feedings
	☒ (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		☐ (k)(3)	Clean bottles/disposable bottles/appvd washing
	☒ (b)	Limited access to screen time/video games		☐ (k)(4)	Baby food served from dish or whole jar
				☐ (k)(5)	Bottles labeled with child's name
				☐ (l)(1)	Outdoor spaced fenced-4 ft lic. after 1/1/25
				☐ (l)(2)	Outdoor equipment-developmentally appropriate for ages of the children
				☐ (l)(3)	Shock ab materials less than 1 1/4"-or measures in place to ensure their health & safety
UNDER THREE ENDORSEMENT 19a-79-10 Y/N			SCHOOL AGE ENDORSEMENT 19a-79-11 Y/N		
☐ 117.	(b)	Approved Under 3 Endorsement	☒ 140.	(b)	Approved Schl Age Endorsement
☐ 118.	(c)(2)	Ratios- 1:4 (6wks-24mths), 1:5 (24-36mths)	☒ 141.	☒ (c)	<u>SCHEDULE - ACTIVITIES</u>
☐ 119.	(c)(3)	Group size-max 8 (6wks-24mths), max 10 (24-36mths)	☒ 142.	☒ (c)(1)	Written daily program plan-flexible schedule-available to staff/parents
☐ 120.	(c)(4)	Physical barriers- indoors/outdoors		☒ (c)(2)	Activities not a duplication of child's day
☐ 121.	(d)(1)(A-C)	Adequate sinks in program space (Grp Homes accessible) handwashing-diapering-food prep		☒ (c)(3)	Activities include cognitive, physical, social, emotional needs of the children
☐ 122.	(d)(2)(A-iii)	Cribs-in compliance w/CPSC (manf. after 6/28/11)			Program includes free time, snacks, creative/physical/small group/self-concept activities, homework time, special events
☐ 123.	(d)(2)(B)	Washable cots	☒ 143.	(d)	Ratio- 1:15
☐ 124.	(d)(2)(C)	Chairs for feeding-stable base-safety straps-locking tray	☒ 144.	(e)	Group size- max. 30
☐ 125.	(d)(2)(D)	Dev. appropriate tables/chairs/equipment	☒ 145.	(f)	4 yr. olds enrolled in schl age-written authorization/permission from director/parent
☐ 126.	(d)(2)(E)	Refrigerator and food prep facilities	☒ 146.	(g)	Head teacher approved- 60%
☐ 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			

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

PROGRAM NAME <u>Valley School Age - Joel School</u>		LICENSE NUMBER <u>14115</u>	DATE OF INSPECTION <u>12/12/2024</u>
NIGHT CARE ENDORSEMENT 19a-79-12 (10pm-5am) <u>Y/N</u>		MONITORING OF DIABETES 19a-79-13 <u>Y/N</u>	
☐ 147.	(b)	Approved Night Care Endorsement	☒ 171. (a)(1)
☐ 148.	(b)(1)	Person in charge-head teacher	☐ 172.
☐ 149.	(b)(2)	Written plan for program activities- meet individual needs, sleep patterns, quiet activities	☒ (b)(1)(A)
☐ 150.	(b)(3)	Written plan for supervision including cot placement and evacuation	☐ (b)(1)(B) (i)-(iii)
☐ 151.	(b)(4)	Children in care no more than 12 hrs. in 24	☐ (b)(2)
☐ 152.	(b)(5)	Staff awake and available	☐ (b)(3)
☐ 153.		<u>SLEEP PROVISIONS</u>	☐ (c)(2)
	☒ (b)(6)	Individual cot/crib with bedding	☒ (c)(3)
	☐ (b)(6)(A)	Sleeping apparel/toiletries labeled	
	☐ (b)(6)(B)	Required bedding	☒ 174. (d)(1)
	☐ (b)(6)(C)	Required toiletries	☒ 175. (d)(2)
	☐ (b)(6)(D)	Bedding/sleeping apparel laundered weekly	☐ 176. (d)(3)
	☐ (b)(7)	Sleep arrangements for infants	☒ 177. (e)(1)
☐ 154.	(b)(8)	Air temp 65 °F at 3 ft	☒ 178. (e)(2)
☐ 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
☒ 158.	(9a)	Permit enrollment of children with asthma, allergies, diabetes
☒ 159.		<u>NONPRESC. TOPICAL MEDICATION</u>
	☒ (a)(2)	Admin/Parent permission/report errors
	☒ (a)(3)(A-B)	Labeling and Storage
	☒ (a)(3)(C)	Unused/expired meds destroyed/returned
☐ 160.		<u>MEDICATION TRAINING</u>
	☒ (b)(1)(A/C)	Medication training-general-oral/top/inhalant
	☒ (b)(1)(D)	Injectable premeasured autoinjector medication
	☒ (b)(1)(E)	Rectal medication
	☒ (b)(1)(F)	Injectable other than premeasured auto-injector
	☒ (b)(2)(A-B)	Training approval documents/certificates
	☐ (b)(2)(C)	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 <u>N/A</u>

☒ 180.	<u>N/A</u>	Consent Order/Negotiated Corrective Action Plan conditions <u>N/A</u>
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DISCUSSIONS - COMMENTS

Discussed new regulations. Health Consultant logging minimum 2 visits/year 1 of 8 students missing physical/immunization record. Renewed professional development file for 1 staff without 1% training with head teacher

SIGNATURE OF OEC STAFF
Jen Schulz / Bridget L. McKim

PRINTED NAME
Jen Schulz / BRIDGET L. MCKIM

SIGNATURE OF PERSON IN CHARGE
Matthew Hoyal

PRINTED NAME
Matthew Hoyal

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: 12/26/2024

CAP: <https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf/>

November 2024

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Valley School Age-Joel School License # 14115 Date: 12/12/2009

Observations/Corrections needed:

- #40- observed 2 individual care plans not ^{signed} by all staff responsible for child's care in medical emergency
- #33(h)(i): 1 staff missing documentation of annual review of policies and no documentation of professional development equal to 1% of annual hours worked for 1 staff
- #160- observed no authorization from prescriber for Insulin
- #160(b)(2)(c): observed medications training outline to be unavailable
- #172(b)(1)(B): observed no documentation of staff training in use/storage/maintenance of monitoring equipment, reading test results, appropriate actions taken
- (b)(2): observed no documentation of Diabetes training staff at least every 3 years
- (b)(3): See above
- (b)(c)(2): observed no training document to verify staff on site are trained while child with Diabetes is present.
- #176- observed no signed agreement with parents regarding equipment, supplies, materials to be discarded
- ~~#178~~

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: [Signature]
(OEC Representative)
Print Name: Brenda L. Heckly/Jen Schulz

CORRECTIVE PLAN SHALL BE RETURNED TO

OEC BY: 12/26/2009

Signature: [Signature]
(Person in Charge)
Print Name: Matthew Horvath