

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Right at School at Bear Path Date: 12/16/24 Time: 3:40

Location Address: 10 Kirk Rd Hamden Telephone #: 203 817 1146

e-mail address: michelle.higgins@rightatschool.com License #: 70501 Expiration Date: 8/31/27

Capacity: 80 # of Children Present: 23 # of Staff Present: 2

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 _____
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Purpose of visit: Investigation 2024-1263

Observations/Corrections needed:

Ⓟ 19a-79-3a(b)(7)(A) Child behavior management - pending
completion of interviews with AM staff and administration.

Ⓢ 19a-79-11(d) School-age ratio - ratio of 1:15 was not in compliance when one staff was observed with 22 students in the gym upon arrival.

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: 12/30/2024
or upon return from holiday break -

Signature: Karen Hicks
(OEC Representative)
Print Name: Karen Hicks

Signature: Wataasha Carter
(Person in Charge)
Print Name: Wataasha Carter