

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:	Room to Grow	Date of Inspection:	12/14/24	Time of Arrival:	11:20
Address:	405A Bantam Rd	License Number:	19192	Expiration Date:	3/31/25
Town:	Litchfield	Telephone Number:	(860)567-8422	Summer Care:	Open
Operator:	Room to Grow	# of Staff Present:	8	# over 3 Present:	22
Email:	roomtogrow.info@gmail.com	Total Capacity:	74	Total Under 3 capacity:	40
Designated Director:	Julia Hrica	Hours/Days of Operation:		# under 3 Present:	15
				Ages Served:	4wks to 12yr

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

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

1. (c)(8) Local Health Inspection-Date: 3/1/23

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. (d)(2)(A) POLICIES-COMplete/IMPLEMENTED
- 12. (d)(2)(B-C) Discipline policy
- 13. (d)(3) Child Protection policy
- 14. (d)(4)(A) Closing time policy
- 15. (d)(4)(B) Medical emergency policy
- 16. (d)(5) Multi-Hazards policy-annual drill
- 17. (d)(6) Supervision policy
- 18. (d)(6)(C) General Operating policies
- 19. (d)(7) Administrative Oversight policy
- 20. (d)(1) Personnel policies
- 21. (d)(1) Daily attendance-children/staff- keep 1 yr.
- 22. (f) ACCESS
- 23. (h) Immediate access by parents
- 24. (l) Immediate access by OEC-facility/records
- 25. (m) 2.8 yr olds enrolled in preschool-authorization
- 26. (n) Motor vehicle laws-transportation
- 27. (o) Capacity
- 28. (o) Respond to OEC-no false, misleading statements or documents
- 29. (e)(1) POSTINGS
- 30. (e)(2) License posted
- 31. (e)(3) OEC Complaint Procedure posted
- 32. (e)(4) Menus posted
- 33. (e)(5) No Smoking posted signs at entrances
- 34. (e)(6) OEC Inspection report posted or available
- 35. (e)(6) Developmental Milestones posted

- 19. (a)(1) Staff health records
- 20. (a)(3) Disciplinary actions
- 21. (b) Comprehensive Background Checks
- 22. (b)(4) Evidence of compliance
- 23. (d) Adequate staffing
- 24. (d)(1) Designated head teacher-approved-60%
- 25. (d)(2) Two staff present-age 18 or older
- 26. (d)(3)(A-C) Personal qualities of staff
- 27. (d)(4)(A) RATIOS
- 28. (d)(4)(B) Ratio 1:10 - Indoors/Outdoors
- 29. (d)(6) Mixed age group-ratios
- 30. (d)(4)(D) Nap time ratio
- 31. (d)(5) Supervision-Indoors/Outdoors
- 32. (d)(5)(A) GROUP SIZE
- 33. (d)(5)(B) Group Size-Indoors/Outdoors
- 34. (e)(1) Group Size-school age field trips/outdoors
- 35. (f)(1) Mixed age group-group size
- 36. (f)(2) Designated director-training
- 37. (a)(2) CPR certified program staff
- 38. (h)(1)(2) First aid certified program staff
- 39. (h)(1)(2) PROFESSIONAL DEVELOPMENT
- 40. (4)(C)(ii-v) Documentation
- 41. (e)(6) Health & Safety training
- 42. (e)(6) 1% annual hours
- 43. (i)(1)(A)-(D) SWIMMING ACTIVITIES - Y/N
- 44. (i)(2) Swimming-Ratios
- 45. (i)(2)(A-H) Non-swimmers identified
- 46. (F) CPR certified staff-age 20 or older
- 47. (i)(2) Lifeguard-certified-supervising
- 48. (i)(2) CONSULTANTS
- 49. (i)(2) Consultants-Education, Health, Social Service, Dietitian (N/A)
- 50. (i)(2) Consultant agreements-signed annually
- 51. (i)(2) Agreements complete w/required services
- 52. (i)(2) Consultant logs-documented activities, observations and required services
- 53. (i)(2) 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
Room to Grow		14192	12/16/24
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) 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	☒ 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> ☒ (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 ☒ (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 ☒ (e)(1) <u>AIR TEMPERATURE</u> ☒ (e)(1) Air temp 65 °F at 3 ft –non-mercury thermometer affixed to wall (Schl age only N/A) ☒ (e)(2) Air temp <65°F comfortable (Schl age only-N/A) ☒ (e)(2) Air temp > 80 °F - ↑ fluids/ventilation ☒ (e)(3) Water temperature 60 °F – 120 °F ☒ (e)(4) Portable space heaters prohibited ☒ (e)(5) Walls/ceilings/floors/rugs-clean/good repair ☒ (e)(5) Rugs- not tripping/slipping hazard ☒ (e)(6) Hot water/Steam pipes protected ☒ (e)(7) Working phone on each level ☒ (e)(7) Emergency numbers posted-adjacent to phones ☒ (e)(7) Parents provided direct on site phone number ☒ (e)(8) <u>LIGHTING</u> ☒ (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 ☒ (e)(9) Schl age only-lighting for comfort ☒ (e)(10) Light fixtures shielded/shatter proof ☒ (e)(10) Potentially hazardous substances, materials – labeled, inaccessible ☒ (e)(11) Garbage/rubbish-disposed of daily, containers in good repair ☒ (e)(12) Stairs-protected/good repair-handrails ☒ (e)(13) Toxic plants/materials inaccessible ☒ (e)(14-15) Pets or other animals-in good health, written care plan including access to children ☒ (e)(16) Prevention of vermin-openings screened ☒ (e)(17) Radon test- Results: <u>1</u> N/A ☒ (e)(18) Results posted-Date: <u>2/14/25</u> (Schls-N/A) ☒ (f)(1)(A) Carbon monoxide detector-each level N/A ☒ (g)(1) Program space-adequate-35 sq. ft. per child ☒ (g)(1) Equipment-clean and safe, good repair, non-toxic-sturdy, free from protruding nails, rust ☒ (g)(2) Adequate equipment for rest-cleaned-cots (Grp Homes-mats/sleeping bags) ☒ (g)(3) Air conditioners, water heaters, fuse boxes inaccessible ☒ (g)(4) 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 <u>N/A</u> ☒ 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) <u>FIRST AID KITS</u> -portable, accessible to staff, closed container-Indoor/Outdoor/Field Trips ☒ 60. ☒ (c) <u>FIRST AID SUPPLIES</u> -Indoor/Outdoor-adhesive strips, 3-4" gauze squares, 2" rolled gauze, tape, scissors, tweezers, 2 cold packs, thermometer, gloves, CPR mouth barrier ☒ 61. ☒ (d) <u>FIRST AID SUPPLIES</u> -add'l for field trips water, phone, soap, emergency numbers, medications, plastic bags	☒ 83. ☒ 84. ☒ 85. ☒ 86. ☒ 87. ☒ 88. ☒ 89. ☒ 90. ☒ 91. ☒ 92. ☒ 93. ☒ 94.		
PHYSICAL PLANT 19a-79-7a			
☒ 62. (a)(2) Fire marshal codes/certificate <u>5/8/23</u> ☒ 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) ☒ (c)(5)(A) Lead Water Test – Date: <u>3/13/23</u> ☒ (c)(5)(B) Bact./Chem Test-Date: <u>n/a</u> (N/A) ☒ (c)(5)(C) Drinking water available/accessible ☒ 70. <u>LEAD PAINT</u> – ☒ (c)(6)(A) Peeling Paint – <u>Y/N</u> Inside/Outside ☒ (c)(6)(A) Building Pre-78: <u>Y/N</u> Lead Test: <u>Y/N</u> ☒ (c)(6)(B-D) Results _____ ☒ (d)(1) Lead Management Plan _____ ☒ 71. (d)(1) Emergency vehicle access	☒ 95. ☒ 96. ☒ 97. ☒ 98. ☒ 99. ☒ 100. ☒ 101. ☒ 102. ☒ 103. ☒ 104. ☒ 105. ☒ 106. ☒ 107.		

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

PROGRAM NAME		Room to Grow	LICENSE NUMBER		14192	DATE OF INSPECTION		12/16/24
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	☒ 129.		☒ (f)(1)	LINENS/CLOTHING		
☒ 109.	(g)(6)	Indoor climbing play equipment-shock absorbing materials under and around			☒ (f)(2)	Linens/emergency clothing available		
☒ 110.	(j)	No weapons/no facsimile of a firearm			☒ (f)(3)	Linens washed weekly or as needed		
☒ 111.		<u>OUTDOOR SPACE</u>	☒ 130.		☒ (f)(4)	Linens/clothing stored individually		
	☒ (h)(1)	Adequate space- 75 sq. ft. per child			☒ (g)(1)	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	☒ 131.		☒ (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	☒ 132.		☒ (h)(1)	Safe sleep policies posted/parents informed		
	☒ (h)(7)(C)	Rooftop play areas-6 ft. wall/barrier	☒ 133.		☒ (h)(2)	Infant toys-separate/washed/sanitized daily		
☒ 114.		<u>WATER HAZARDS</u>	☒ 134.		☒ (h)(2)	Toddler toys-washed/sanitized weekly		
	☒ (i)	Pools, swimming areas-				No toys/objects less than 1 1/4 " diameter		
	☒ (i)	conforms to 19-13-B33b and 19a-36-B61	☒ 135.		☒ (i)(1)(2A-C)	Plastic bags/balloons/styrofoam inaccessible unless under direct supervision		
	☒ (i)	Wading pools prohibited	☒ 136.		☒ (j)	Health consultant visits/documentation		
	☒ (i)	Hot tubs/spas/saunas-locked/inaccessible			☒ (k)(1)	<u>FEEDING</u>		
EDUCATIONAL REQUIREMENTS 19a-79-8a					☒ (k)(2)	Infants held for bottles - chairs for feeding - individual attn, tummy time, crawl/toddle		
☒ 115.	(a)	Written daily/weekly educational plan-developmentally appropriate			☒ (k)(3)	Written feeding schedule from parent-updated		
☒ 116.	(a)	<u>EDUCATIONAL REQUIREMENTS</u>			☒ (k)(4)	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	☒ 137.		☒ (k)(5)	Clean bottles/disposable bottles/appvd washing		
	☒ (b)	Limited access to screen time/video games	☒ 138.		☒ (l)(1)	Baby food served from dish or whole jar		
			☒ 139.		☒ (l)(2)	Bottles labeled with child's name		
UNDER THREE ENDORSEMENT 19a-79-10 (Y/N)					☒ (l)(3)	Outdoor spaced fenced-4 ft lic. after 1/1/25		
						Outdoor equipment-developmentally appropriate for ages of the children		
						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.	☒ (e)(1)	<u>DIAPERING</u>						
	☒ (e)(2)	Diaper area: elevated/sturdy/safety rail						
	☒ (e)(3)	Diaper area: used only for this purpose, located in the program area						
	☒ (e)(4)	Diaper area: non-porous surface/good repair						
	☒ (e)(5)	Diaper area: washed/disinfected after use						
	☒ (e)(6)(9)	Diaper area: disposable paper sheets						
	☒ (e)(7)	Covered waste receptacle-removed daily						
	☒ (e)(8)	Handwashing-staff/children						
	☒ (e)(10)(A-C)	Diapering-Handwashing policies-posted/followed						
		Cloth diapers-written plan developed						

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

PROGRAM NAME		Room to Grow		LICENSE NUMBER	14192	DATE OF INSPECTION	12/16/24
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.		STAFF TRAINING		
☐ 149.	(b)(2)	Written plan for program activities- meet individual needs, sleep patterns, quiet activities		☒ (b)(1)(A)	Staff training – first aid		
☐ 150.	(b)(3)	Written plan for supervision including cot placement and evacuation		☒ (b)(1)(B)	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		☒ (i)-(iii)	Training updated at least every 3 years		
☐ 152.	(b)(5)	Staff awake and available		☒ (b)(2)	Written documentation of training		
☐ 153.		SLEEP PROVISIONS		☒ (b)(3)	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			Written authorization from parent		
☐ 154.	(b)(8)	Air temp 65 °F at 3 ft	☒ 177.	(e)(1)	Testing results and actions taken – documented and kept on file, ensure parents are notified daily		
☐ 155.	(b)(9)	Fire marshal approval-hours specified	☒ 178.	(e)(2)			
☐ 156.	(b)(10)	Local health approval	☒ 179.	(e)(3)			
ADMINISTRATION OF MEDICATIONS 19a-79-9a Y/N				ADDITIONAL VIOLATION			
☒ 157.	(9a)	Written medication policies/procedures	☒ 180.	-	Consent Order/Negotiated Corrective Action Plan conditions		
☒ 158.	(9a)	Permit enrollment of children with asthma, allergies, diabetes			N/A		
☒ 159.		NONPRESC. TOPICAL MEDICATION	DISCUSSIONS - COMMENTS				
	☒ (a)(2)	Admin/Parent permission/report errors	reviewed new Regulations including updates needed for policies, Consultant Agreements (by 1/25), Health and Safety training (by 4/25), Reference checks, + new 2yr Old + School Age Ratios. Items checked off were either in compliance at visit or discussed.				
	☒ (a)(3)(A-B)	Labeling and Storage					
	☒ (a)(3)(C)	Unused/expired meds destroyed/returned					
☒ 160.		MEDICATION TRAINING					
	☒ (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					
SIGNATURE OF OEC STAFF		Jaime Fortin		SIGNATURE OF PERSON IN CHARGE		Julie L Hrica	
PRINTED NAME		Jaime Fortin		PRINTED NAME		Julie L Hrica	
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: 12/30/24		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: Room to Grow License # 14192 Date: 12/11/24

Observations/Corrections needed:

Discussed some peeling paint outside on Building - Building built after 78.

violations at visit:

- (40) Eare Plans (2 not observed and 1 missing information) for children with known chronic diseases.
- (62) Fire Marshall certificate not current (send in copy)
- (101) 1 medication form expired
- (128)(e)(2): Large Ride on toy located on diaper table during naptime

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: 
(OEC Representative)Print Name: Jaime Fortin

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: 
(Person in Charge)OEC BY: 12/30/24Print Name: Julie L Hrice