

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

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Kindercare Learning Center Date: 12/23/24 Time: 1:20

Location Address: 35 South Rd. Farmington Telephone #: 860 677-1810

e-mail address: Farmingtonsouthroad@kindercare.com License #: 16040 Expiration Date: 7/31/26

Capacity: 140/80 # of Children Present: 92/53 # of Staff Present: 21

**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 \_\_\_\_\_

Purpose of visit: Investigation 2024-1331 self-report

Observations/Corrections needed:

(NS) 19a-79-4a(a)(2) Professional development documentation - in compliance at time of visit.

(S) 19a-79-3a(d)(2)(A) Implement program policies related to discipline - staff did not implement the program behavior management policy when she pulled a child's hair to demonstrate that he hurt another child. Physical actions to demonstrate what it "feels like" to be a victim of aggression is clearly prohibited in the program's policy.

Shared OEC website page: [www.ctoec.org/supporting-young-children-with-challenging-behavior/](http://www.ctoec.org/supporting-young-children-with-challenging-behavior/) for resources to share with staff.

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: 1/6/2025

Signature: Karen Hicks  
(OEC Representative)

Print Name: Karen Hicks

Signature: \_\_\_\_\_  
(Person in Charge)

Print Name: Nichole Charron