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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Country Kids Child Care Date: 5/5/25 Time: 8:35

Location Address: 107 Old State Rd. Brookfield Telephone #: 480 607-7552

e-mail address: director.oldstate@cadence.academy License #: 70750 Expiration Date: 4/30/28

Capacity: 225/79 # of Children Present: com 127/64 # of Staff Present: 22

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: Follow-up for investigation 2025-433

Observations/Corrections needed:

(S) 19a-79-7a(f)(1)(A) Program space/35 sq. ft. per child - Regulation not met when space requirements was not met in room 1. Space near window was observed with as many as 10 children with one staff, and space closest to door had 13 and 15 children with two staff. Each side is currently approved for 8 children on each side, (with measurements ~~marked at~~ maximum allowance of 9 children per side by square footage.)

(S) 19a-79-3a(c) Notification of change - regulation not met when operator changed Room 1 from an "Under 3s" room to a room providing care for children 3 and over without notifying the agency.

(P) 19a-79-4a(d)(4) Maintain ratios at all times - pending review of attendance records obtained at this visit.

(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: 5/19/2025

Signature: Karen Hicks (OEC Representative)

Print Name: Karen Hicks

Signature: Kaylee Cerrato (Person in Charge)

Print Name: Kaylee Cerrato