

**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:	Alterine Johnson Early Learning Center @ Alliance for Community Empowerment	Date of Inspection:	5/6/25	Time of Arrival:	1:25 pm
Address:	909 Main St. Stratford	License Number:	16829	Expiration Date:	8/31/26
Town:	Stratford 06615	Telephone Number:	203-386-9040	Summer Care:	Open
Operator:	Alliance of Community Empowerment	# of Staff Present:	7	# over 3 Present:	11
Email:	bperry@alliancect.org	Total Capacity:	69	Total Under 3 capacity:	16
Designated Director:	Tanya Lloyd	Hours/Days of Operation:	7:30am - 5:30 PM.		

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

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**

1. (c)(8) Local Health Inspection-Date: 6/20/23

**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. POLICIES-COMLETE/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
- 12. (d)(1) Daily attendance-children/staff- keep 1 yr.
- 13. ACCESS
  - (f) Immediate access by parents
  - (h) Immediate access by OEC-facility/records
- 14. (l) 2.8 yr olds in prek-authorization
- 15. (m) Motor vehicle laws-transportation
- 16. (n) Capacity
- 17. (o) Respond to OEC-no false, misleading statements or documents
- 18. POSTINGS
  - 3a(e)(1) License posted
  - 3a(e)(2) OEC Complaint Procedure posted
  - 3a(d)(6)(C) Administrative Oversight policy
  - 3a(e)(3) Menus posted
  - 3a(e)(4) No Smoking posted signs at entrances
  - 3a(e)(5) OEC Inspection report posted or available
  - 3a(e)(6) Dev. Milestones posted
  - 7a(e)(17) Radon Test posted (Schls-N/A)
  - 10(g)(8) Safe Sleep policy posted

- 19. (a)(1) Staff health records
- 20. (a)(3) Disciplinary actions
- 21. (b) Comprehensive Background Checks
- 21a. (b)(2) Past employment history
- 22. (b)(4) Evidence of compliance with bknd cks/history
- 23. (d) Adequate staffing
- 24. (d)(1)-(e)(2) 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. RATIOS
  - (d)(4)(A) Ratio 1:10 - Indoors/Outdoors
  - (d)(4)(B) Mixed age group
  - (d)(6) Nap time ratio
  - (d)(4)(D) Supervision-Indoors/Outdoors
- 28. GROUP SIZE
  - (d)(5) Group Size-Indoors/Outdoors
  - (d)(5)(A) Group Size-school age field trips/outdoors
  - (d)(5)(B) Mixed age group-group size
- 30. (e)(1) Designated director-training
- 31. (f)(1) CPR certified program staff
- 32. (f)(2) First aid certified program staff
- 33. PROFESSIONAL DEVELOPMENT
  - (a)(2) Documentation of prof. dev/trainings
  - (h)(1) Health & Safety training
  - (h)(2) 1% annual hours
- 34. SWIMMING ACTIVITIES - Y/N
  - (4)(C)(ii-v) Swimming-Ratios
  - (4)(C)(i) Non-swimmers identified
  - (e)(6) CPR certified staff-age 20 or older
  - (e)(6) Lifeguard-certified-supervising
- 35. CONSULTANTS
  - (i)(1)(A)-(D) Consultants-Education, Health, Social Service, Dietitian (Dietitian N/A)
  - (i) - Consultant agreements-signed annually-agreements complete w/required services
  - (F) Consultant logs-documented activities, observations and required services
  - (i)(2) Consultant visits- Education/Health
 

	Contracts	Logs	Visits
Education	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Soc. Serv.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Dietitian	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM**

<b>PROGRAM NAME</b>	Aterine Johnson Early Learning Center	<b>LICENSE NUMBER</b>	16829	<b>DATE OF INSPECTION</b>	5/6/25
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<b>RECORD KEEPING 19a-79-5a</b> Alliance for community empowerment	<b>PHYSICAL PLANT 19a-79-7a cont.</b>
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36.	(a)(1)(A-C)	Children's Enrollment Information	71.	(d)(1)	Emergency vehicle access
37.		<b>PARENT PERMISSIONS</b>	72.	(d)(2)	Walkways maintained
	(a)(1)(D)(i)	Emergency medical permission	73.	(d)(3)	Windows protected to prevent falls
	(a)(1)(D)(ii)	Authorized release permission	74.	(d)(3)	Window screens
	(a)(1)(D)(iii)	Field trip permission	75.	(d)(4)	Glass/mirrors protected- 36"
	(a)(1)(D)(iv)	Transportation permission	76.	(d)(5)	Overhead doors-locking devices, spring protectors (N/A)
38.	(a)(2)(A-B)	Child Health Records	77.	(d)(6), (f)(3)	Exits, stairs, hallways unobstructed
39.	(a)(2)(C)	Immunization records	78.	(d)(7)	Individual storage of clothing and bedding
40.	(a)(2)(E)	Individual care plan-signed by parents/staff	79.		<b>SMOKING</b>
41.	(a)(3)(A)	Injury, Illness, Incident, Accident reports		(d)(8)	Smoking, vaping or other electronic nicotine device prohibited on premises/grounds
42.	(a)(3)(B)	Parent notification of illness or injury		(d)(8)	Matches/lighters inaccessible
43.	(a)(3)(C)(i-ii)	Notify OEC of serious injuries, fatality		(d)(9)	Electrical safety - outlets inaccessible - covered or protected
44.	(a)(3)(D)	Notify DPH, local health-reportable diseases	81.		<b>TOILETING</b>
45.	(a)(4)	Video recordings- keep 30 days	82.	(d)(10)(A)	Shared toilets/sinks-supervision plan

**HEALTH and SAFETY 19a-79-6a**

46.	(a)(1)	Preparation, transportation of food-follow DPH Model Food Code (N/A)	83.	(d)(10)(B)	Toileting needs met
47.	(a)(2)	Nutritious meals and snacks	84.	(d)(10)(C)	Potty chairs-nonporous, emptied, disinfected
48.	(a)(3)	Proper refrigeration-41 degrees		(d)(10)(C)	Required toilets/sinks-1:16
49.	(a)(4)	Menus-1 wk in advance- keep 3 mths		(d)(10)(E)	Toileting Supplies-Hand drying-Garbage
50.	(a)(5)	Food Service Inspection <u>6/20/23</u> (N/A)		(d)(10)(E)	Handwashing staff/children
51.	(a)(6)	Kitchen-clean/safe storage of food/supplies(N/A)		(d)(10)(F)	Toilets/sinks located at the facility
52.	(a)(7)	Separate hand washing facilities	86.	(d)(10)(G)	Well lighted/ventilated toilet rooms
53.	(a)(8)	Multi-use eating/drinking utensils	87.	(d)(10)(H)	Mechanical ventilation (after 1/1/94) (Grp Homes N/A)
54.	(a)(9)	Kitchen separated (N/A)	88.	(d)(11)	Staff personal articles inaccessible
55.	(a)(10)	Children supervised during meal prep		(e)(1)	<b>AIR TEMPERATURE</b>
56.	(a)(11)	Handwashing-staff/children		(e)(1)	Air temp 65 °F at 3 ft -non-mercury thermometer affixed to wall
57.	(b)(1)	Illness procedures-staff knowledgeable, children observed for signs/symptoms	89.	(e)(2)	Air temp > 80 °F - ↑ fluids/ventilation
58.	(b)(2)	Designated isolation area	90.	(e)(3)	Water temperature 60°F-120°F
59.	(c)	<b>FIRST AID KITS</b> -portable, accessible to staff, closed container-Indoor/Outdoor/Field Trips	91.	(e)(4)	Portable space heaters prohibited
	(c)	<b>FIRST AID SUPPLIES</b> -Indoor/Outdoor-adhesive strips, 3-4" gauze squares, 2" rolled gauze, tape, scissors, tweezers, 2 cold packs, thermometer, gloves, CPR mouth barrier		(e)(5)	<b>WALLS/CEILINGS/FLOORS/RUGS</b>
	(d)	<b>FIRST AID SUPPLIES</b> -add'l for field trips water, phone, soap, emergency numbers, medications, plastic bags (N/A)	92.	(e)(5)	Walls/ceilings/floors/rugs-clean/good repair
			93.	(e)(6)	Rugs- not a tripping/slipping hazard
			94.	(e)(7)	Hot water/Steam pipes protected
				(e)(7)	<b>TELEPHONE/TELEPHONE NUMBERS</b>
				(e)(7)	Working phone on each level
				(e)(7)	Emergency numbers posted-adjacent to phones
				(e)(8)	Parents provided direct on site phone number
				(e)(9)	<b>LIGHTING</b>
				(e)(9)	All areas min. 1 foot candle of lighting
				(e)(9)	Adequate lighting-30/50 candle feet-sufficient lighting to be visible
				(e)(10)	Enough lighting for comfort
				(e)(10)	Light fixtures shielded/shatter proof
				(e)(11)	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)	Measures to prevent vermin
				(e)(17)	Radon test- Results: <u>1.0</u> (Schls-N/A)
				(e)(18)	Carbon monoxide detector-each level N/A
				(f)(1)(A)	Program space-adequate-35 sq. ft. per child
				(g)(1)	Equipment-clean and safe, good repair, non-toxic-sturdy, free from protruding nails, free from rust
				(g)(2)	Adequate equipment for rest-cleaned-cots (Grp Homes only-mats/sleeping bags)
				(g)(3)	Air conditioners/water heaters/fuse boxes inaccessible
				(g)(4)	Developmentally app equipment, materials

**PHYSICAL PLANT 19a-79-7a**

62.	(a)(2)	Fire marshal codes/certificate <u>5/14/21</u>	95.	(e)(9)	Enough lighting for comfort
63.	(b)	Indoor/Outdoor space inspected/approved		(e)(9)	Light fixtures shielded/shatter proof
64.	(b)(1)-(5)	Construction/expansion/renovation/conversion		(e)(10)	Potentially hazardous substances, materials labeled, inaccessible
65.	(b)(6)	Space not inspected/approved but used for field trips-written parent permission	96.	(e)(11)	Garbage/rubbish-disposed of daily, containers in good repair
66.	(c)(2)	Licensed premises-clean, good repair, hazard free, maintenance program		(e)(12)	Stairs-protected/good repair-handrails
67.	(c)(3)	Building/Equipment/Furnishings-sanitary, hazard free (N/A)	97.	(e)(13)	Toxic plants/materials inaccessible
68.	(c)(4)	Testing of premises/grounds for chemicals	98.	(e)(14-15)	Pets or other animals-in good health, written care plan including access to children
69.		<b>WATER SUPPLY</b> - Public/Well (Schools-N/A)	99.		Measures to prevent vermin
	(c)(5)(A)	Lead Water Test - Date: <u>4/14/24</u>	100.	(e)(16)	Radon test- Results: <u>1.0</u> (Schls-N/A)
	(c)(5)(B)	Bact./Chem Test-Date: <u>                    </u> (N/A)	101.	(e)(17)	Carbon monoxide detector-each level N/A
	(c)(5)(C)	Drinking water available/accessibile	102.	(e)(18)	Program space-adequate-35 sq. ft. per child
70.		<b>LEAD PAINT</b> -	103.	(f)(1)(A)	Equipment-clean and safe, good repair, non-toxic-sturdy, free from protruding nails, free from rust
	(c)(6)(A)	Building Pre-78: Y/N Lead Test: Y/N Results <u>NA</u>	104.	(g)(1)	Adequate equipment for rest-cleaned-cots (Grp Homes only-mats/sleeping bags)
	(c)(6)(B-D)	Lead Management Plan <u>MP</u>	105.	(g)(2)	Air conditioners/water heaters/fuse boxes inaccessible
		Peeling Paint - Y/N Inside/Outside	106.	(g)(3)	Developmentally app equipment, materials
			107.	(g)(4)	

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<b>PHYSICAL PLANT 19a-79-7a cont.</b>	<b>UNDER THREE ENDORSEMENT 19a-79-10 cont.</b>
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✓	108.	(g)(5)	Manufacture guidelines followed-furniture, equipment and toys-CPSC unsafe/recalls
✓	109.	(g)(6)	Indoor climbing play equipment-shock absorbing materials under and around
✓	110.	(j)	No weapons/no facsimile of a firearm
✓	111.		<b>OUTDOOR SPACE</b>
✓		(h)(1)	Adequate space- 75 sq. ft. per child
✓		(h)(2)	Shock absorbing surfaces-minimum 8"
✓		(h)(3)	Playground free from hazards
✓		(h)(4)	Nuts, bolts, screws-tight, covered/protected
✓		(h)(5)	Outside equipment anchored-anchors buried
✓		(h)(6)	New equip- cert playg. Inspection upon request
✓		(h)(8)	Drinking water available/accessible
✓		(h)(9)	Equipment arranged for safety-equip/fences/structures not hazardous
✓	112.		<b>OUTDOOR PROTECTED/FENCED</b>
✓		(h)(7)	Playground protected from traffic, water, gullies or other hazards
✓		(h)(7)(A)	Fences installed to protect from hazards-4 ft
✓		(h)(7)(B)	Fences installed to protect from water-4 ft, self closing and self latching devices or locks
✓		(h)(7)(C)	Rooftop play areas-6 ft. wall/barrier (N/A)
✓	114.		<b>WATER HAZARDS</b>
✓		(i)	Pools, swimming areas-conforms to 19-13-B33b and 19a-36-B61 (N/A)
✓		(i)	Wading pools prohibited (N/A)
✓		(i)	Hot tubs/spas/saunas-locked/inaccessible (N/A)

**EDUCATIONAL REQUIREMENTS 19a-79-8a**

✓	115.	(a)	Written daily/weekly educational plan - developmentally appropriate- available to staff/parents
✓	116.	(a)	<b>EDUCATIONAL REQUIREMENTS</b>
✓		(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, moderate and vigorous physical activity that takes place outdoors
✓		(b)	Limited access to screen time, cell phones, computers, video games-no access under age 2, over age 2 only for educational/physical activity purposes

**UNDER THREE ENDORSEMENT 19a-79-10** Y/N

✓	117.	(b)	Approved Under 3 Endorsement
✓	118.	(c)(2)	Ratios- 1:4 (6wks-24mths), 1:5 (24-36mths)
✓	119.	(c)(3)	Group size-maximum of 8 (6wks-24mths), Maximum of 10 (24-36mths)
✓	120.	(c)(4)	Physical barriers separating each group of children- indoors/outdoors
✓	121.	(d)(1)(A-C)	Adequate sinks in program space (Grp Homes accessible) handwashing-diapering-food prep
✓	122.	(d)(2)(Ai-iii)	Cribs/Pack-n-Plays -in compliance w/CPSC
✓	123.	(d)(2)(B)	Washable cots
✓	124.	(d)(2)(C)	Chairs for feeding-stable base-safety straps-locking tray
✓	125.	(d)(2)(D)	Dev. appropriate tables/chairs/equipment
✓	126.	(d)(2)(E)	Refrigerator and food prep facilities
✓	127.	(d)(3)(A-C)	Optional furniture/equip-safe/hazard free
✓	128.		<b>DIAPERING</b>
✓		(e)(1)	Diaper area: elevated/sturdy/safety rail

✓	128.	(e)(2)	<b>DIAPERING cont.</b> Diaper area: used only for this purpose, located in the program area Diaper area: non-porous surface/good repair Diaper area: washed/disinfected after use Diaper area: disposable paper sheets Covered waste receptacle-removed daily Handwashing-staff/children Diapering-Handwashing policies-posted/followed Cloth diapers-written plan developed
✓		(e)(3)	
✓		(e)(4)	
✓		(e)(5)	
✓		(e)(6-9)	
✓		(e)(7)	
✓		(e)(8)	
✓		(e)(10)(A-C)	
✓	129.	(f)(1)	
✓		(f)(2)	
✓		(f)(3)	
✓		(f)(4)	
✓	130.	(g)(1)	<b>LINENS/CLOTHING</b> Linens/emergency clothing available Linens washed weekly or as needed Linens/clothing stored individually Cribs/cots cleaned-linens changed when shared <b>SAFE SLEEP</b> Under 12 mths placed on back for sleeping Crib-slug fitting mattress/tightly fitted sheet Alternate sleep position/equipment-medical documentation for medical reason on file Infants allowed to adopt other sleep positions No items in/on cribs-blankets, toys, bumpers, pillows, weighted blankets/sleepers/swaddles No unapproved sleeping-car seats/swings/beds, etc. No swaddling w/o written documentation from MD/PA/APRN- instructions/timeframes Observe/assess infants at least every 15 minutes Teething necklaces/bracelets, jewelry inaccessible Safe sleep policies - parents informed <b>TOYS AND OTHER OBJECTS</b> Infant toys-separate/washed/sanitized daily Toddler toys-washed/sanitized weekly No toys/objects less than 1 1/4 " diameter Plastic bags/balloons/styrofoam inaccessible unless under direct supervision Health consultant visits/documentation <b>FEEDING</b> Infants held for bottles - chairs for feeding - individual attn, tummy time, crawl/toddle Written feeding schedule from parent-updated Unused formula/milk discarded after feedings Clean bottles/disposable bottles/appvd washing Baby food served from dish or whole jar Bottles labeled with child's name Outdoor spaced fenced-4 ft (lic. after 1/1/25)
✓		(g)(1)	
✓		(g)(1)	
✓		(g)(1)	
✓		(g)(2)	
✓		(g)(3)	
✓		(g)(4)	
✓		(g)(5)	
✓		(g)(6)	
✓		(g)(7)	
✓		(g)(8)	
✓	131.	(h)(1)	
✓		(h)(1)	
✓		(h)(2)	
✓		(h)(2)	
✓	135.	(i)(1)(2A-C)	
✓	136.	(j)	
✓		(k)(1)	
✓		(k)(2)	
✓		(k)(3)	
✓		(k)(4)	
✓		(k)(5)	
✓	137.	(l)(1)	
✓	138.	(l)(2)	
✓	139.	(l)(3)	

**SCHOOL AGE ENDORSEMENT 19a-79-11** Y/N

✓	140.	(b)	<b>Approved Schl Age Endorsement</b> <b>SCHEDULE - ACTIVITIES</b> Written daily program plan-flexible schedule-available to staff/parents Activities not a duplication of child's day Activities include cognitive, physical, social, emotional needs of the children Program includes free time, snacks, creative/physical/small group/self-concept activities, homework time, special events Ratio- 1:15 Group size- max. 30
✓	141.	(c)	
✓		(c)(1)	
✓		(c)(2)	
✓		(c)(3)	
✓		(c)(3)	
✓	143.	(d)	
✓	144.	(e)	

**CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM**

*Center Alliance for Community Empowerment*

<b>PROGRAM NAME</b>	Alterine Johnson Early Learning	<b>LICENSE NUMBER</b>	16829	<b>DATE OF INSPECTION</b>	5/6/25
<b>SCHOOL AGE ENDORSEMENT 19a-79-11</b>	Y <input checked="" type="checkbox"/> N	<b>MONITORING OF DIABETES 19a-79-13</b>		Y <input checked="" type="checkbox"/> N	

<input checked="" type="checkbox"/>	145.	(f)	<i>NA</i>	4 yr. olds enrolled in schl age-written authorization/permission from director/parent
<input checked="" type="checkbox"/>	146.	(g)		Designated Head teacher approved- 60%

<input checked="" type="checkbox"/>	171.	(a)(1)		Written policies and procedures
<input checked="" type="checkbox"/>	172.	(b)(1)(A)		<b>STAFF TRAINING</b>
		(b)(1)(B)		Staff training – first aid
		(i)-(iii)		Staff training – use/storage/maintenance of monitoring equipment, reading test results, appropriate actions
		(b)(2)		Training updated at least every 3 years
		(b)(3)		Written documentation of training
		(c)(2)		Trained staff on site when child is present
<input checked="" type="checkbox"/>	173.	(c)(3)		Self-administration - written authorization and under supervision of trained staff
<input checked="" type="checkbox"/>	174.	(d)(1)		Equipment provided by parents
<input checked="" type="checkbox"/>	175.	(d)(2)		Equipment labeled and inaccessible
<input checked="" type="checkbox"/>	176.	(d)(3)		Signed agreement with parent regarding equipment, supplies, materials to be discarded
<input checked="" type="checkbox"/>	177.	(e)(1)		Authorized prescriber written order
<input checked="" type="checkbox"/>	178.	(e)(2)		Written authorization from parent
<input checked="" type="checkbox"/>	179.	(e)(3)		Testing results and actions taken – documented and kept on file, ensure parents are notified daily

**NIGHT CARE ENDORSEMENT 19a-79-12 (10pm-5am) Y  N**

<input checked="" type="checkbox"/>	147.	(b)		Approved Night Care Endorsement
<input checked="" type="checkbox"/>	148.	(b)(1)		Person in charge-head teacher
<input checked="" type="checkbox"/>	149.	(b)(2)		Written plan for program activities- meet individual needs, sleep patterns, quiet activities
<input checked="" type="checkbox"/>	150.	(b)(3)		Written plan for supervision including cot placement and evacuation
<input checked="" type="checkbox"/>	151.	(b)(4)		Children in care no more than 12 hrs. in 24
<input checked="" type="checkbox"/>	152.	(b)(5)		Staff awake and available
<input checked="" type="checkbox"/>	153.			<b>SLEEP PROVISIONS</b>
		(b)(6)		Individual cot/crib with bedding
		(b)(6)(A)		Sleeping apparel/toiletries labeled
		(b)(6)(B)		Required bedding
		(b)(6)(C)		Required toiletries
		(b)(6)(D)		Bedding/sleeping apparel laundered weekly
		(b)(7)		Sleep arrangements for infants
<input checked="" type="checkbox"/>	154.	(b)(8)		Air temp 65 °F at 3 ft
<input checked="" type="checkbox"/>	155.	(b)(9)		Fire marshal approval-hours specified
<input checked="" type="checkbox"/>	156.	(b)(10)		Local health approval

**ADMINISTRATION OF MEDICATIONS 19a-79-9a Y  N**

<input checked="" type="checkbox"/>	157.	(9a)		Written medication policies/procedures
<input checked="" type="checkbox"/>	158.	(9a)		Permit enrollment of children with asthma, allergies, diabetes
<input checked="" type="checkbox"/>	159.			<b>NONPRESC. TOPICAL MEDICATION</b>
		(a)(2)		Admin/Parent permission/report errors
		(a)(3)(A-B)		Labeling and Storage
		(a)(3)(C)		Unused/expired meds destroyed/returned
<input checked="" type="checkbox"/>	160.			<b>MEDICATION TRAINING</b>
		(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
<input checked="" type="checkbox"/>	161.	(b)(3)(A-B)		Authorized prescriber/parent permission
<input checked="" type="checkbox"/>	162.	(b)(3)(D)		Medication errors- documentation, parent(s) and OEC notification
<input checked="" type="checkbox"/>	163.	(b)(4)(A-B)		Medication Administration Records (MAR)
<input checked="" type="checkbox"/>	164.	(b)(5)(A-B)		Labeling and Storage
<input checked="" type="checkbox"/>	165.	(b)(5)(C)		Emergency medication inaccessible
<input checked="" type="checkbox"/>	166.	(b)(5)(D)		Unused/Expired meds-destroyed/returned
<input checked="" type="checkbox"/>	167.	(b)(5)(E)		Auto-injector/inhalant equipment
<input checked="" type="checkbox"/>	168.	(b)(6)		Self-administration documentation
<input checked="" type="checkbox"/>	169.	(b)(7)(A-B)		Petition for special medication authorization
<input checked="" type="checkbox"/>	170.	(d)		Potassium Iodide (KI) emergency distribution–permission and storage (N/A)

**ADDITIONAL VIOLATION**

<input checked="" type="checkbox"/>	180.	- NA	Consent Order/Negotiated Corrective Action Plan conditions (N/A)
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**DISCUSSIONS/COMMENTS**

*1) New regulations from 10/2024*

*2) Program updated policies to reflect new regulations. On site policy review was not conducted at this visit. Review checklist on website.*

*3) Education consultant to visit site w/ 1 year of signature of contract to provide newly added services per new regulations.*

*\*NO violations at this visit*

NOTE: Only regulations marked as compliant or non-compliant were monitored or discussed during the visit.

<b>Signature of OEC staff</b>	<i>fil Montanye</i>	<i>Alterine Johnson</i>	<b>Signature of person in charge</b>
<b>Printed Name</b>	<i>fil Montanye</i>	<i>Alterine Johnson</i>	<b>Printed Name</b>

OEC DIVISION OF LICENSING  
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 Website: [www.ctoec.org/licensing](http://www.ctoec.org/licensing) Email: [oeclicensing@ct.gov](mailto:oeclicensing@ct.gov)

Inspection shall be posted or available for review upon request.

Written Corrective Action Plan Due by: \_\_\_\_\_

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