



CONNECTICUT OFFICE OF EARLY CHILDHOOD
DIVISION OF LICENSING



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:	Bright and Early	Date of Inspection:	5/13/25	Time of Arrival:	9:00		
Address:	1786 Southford Rd	License Number:	70682	Expiration Date:	12/31/26		
Town:	Southbury	Telephone Number:	(203) 264-3735	Summer Care:	Open		
Operator:	Bright and Early LLC	# of Staff Present:	13	# over 3 Present:	29	# under 3 Present:	24
Email:	Amanda@brightandearly.com	Total Capacity:	82	Total Under 3 capacity:	38	Ages Served:	6wks - 12yrs
Designated Director:	Amanda Semer Nyasig Perez	Hours/Days of Operation:	M-F 6:30 - 6:00pm	N/A = Not applicable at this time			

Instruction Codes: ☒ Regulation in Compliance ☐ 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

1. (c)(8) Local Health Inspection Date: 11/22/24

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-COMplete/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. | (i) | 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 |

STAFFING and CONSULTANTS 19a-79-4a

- | | | |
|------|---------------|---|
| 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 |
| 28. | (d)(4)(D) | Supervision-Indoors/Outdoors |
| 29. | | 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 |
| 35. | (e)(6) | Lifeguard-certified-supervising |
| | (i)(1)(A)-(D) | CONSULTANTS |
| | (i) - | Consultants-Education, Health, Social Service, Dietitian (Dietitian N/A) |
| | (i)(2)(A-H) | Consultant agreements-signed annually-agreements complete w/required services |
| | (i)(2) | Consultant logs-documented activities, observations and required services |
| | (H)(i)-(I)(i) | Consultant visits- Education/Health |

	Contracts	Logs	Visits
Education	✓	✓	✓
Health	✓	✓	✓
Soc. Serv.	na	na	na
Dietitian	na	na	na

CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM

PROGRAM NAME Bright and Early		LICENSE NUMBER 70682	DATE OF INSPECTION 5/13/25
RECORD KEEPING 19a-79-5a		PHYSICAL PLANT 19a-79-7a cont.	
36.	(a)(1)(A-C)	Children's Enrollment information	
37.		PARENT PERMISSIONS	71. (d)(1)
	☒ (a)(1)(D)(i)	Emergency medical permission	72. (d)(2)
	☒ (a)(1)(D)(ii)	Authorized release permission	73. (d)(3)
	☒ (a)(1)(D)(iii)	Field trip permission	74. (d)(3)
	☒ (a)(1)(D)(iv)	Transportation permission	75. (d)(4)
38.	(a)(2)(A-B)	Child Health Records	76. (d)(5)
39.	(a)(2)(C)	Immunization records	77. (d)(6), (f)(3)
40.	(a)(2)(E)	Individual care plan-signed by parents/staff	78. (d)(7)
41.	(a)(3)(A)	Injury, Illness, Incident, Accident reports	79.
42.	(a)(3)(B)	Parent notification of illness or injury	☒ 81. (d)(8)
43.	(a)(3)(C)(i-ii)	Notify OEC of serious injuries, fatality	☒ 82. (d)(9)
44.	(a)(3)(D)	Notify DPH, local health-reportable diseases	
45.	(a)(4)	Video recordings- keep 30 days	
HEALTH and SAFETY 19a-79-6a			
46.	(a)(1)	Preparation, transportation of food-follow DPH Model Food Code (N/A)	☒ 83. (d)(10)(A)
47.	(a)(2)	Nutritious meals and snacks	☒ 84. (d)(10)(B)
48.	(a)(3)	Proper refrigeration-41 degrees	☒ 86. (d)(10)(C)
49.	(a)(4)	Menus-1 wk in advance- keep 3 mths	☒ 87. (d)(10)(C)
50.	(a)(5)	Food Service Inspection (N/A)	☒ 88. (d)(10)(E)
51.	(a)(6)	Kitchen-clean/safe storage of food/supplies (N/A)	☒ 89. (d)(10)(F)
52.	(a)(7)	Separate hand washing facilities	☒ 90. (d)(10)(G)
53.	(a)(8)	Multi-use eating/drinking utensils	☒ 91. (d)(10)(H)
54.	(a)(9)	Kitchen separated (N/A)	
55.	(a)(10)	Children supervised during meal prep	☒ 92. (e)(1)
56.	(a)(11)	Handwashing-staff/children	☒ 93. (e)(2)
57.	(b)(1)	Illness procedures-staff knowledgeable, children observed for signs/symptoms	☒ 94. (e)(3)
58.	(b)(2)	Designated isolation area	☒ 95. (e)(4)
59.	☒ (c)	FIRST AID KITS -portable, accessible to staff, closed container-Indoor/Outdoor/Field Trips	☒ 96. (e)(5)
	☒ (c)	FIRST AID SUPPLIES -Indoor/Outdoor-adhesive strips, 3-4" gauze squares, 2" rolled gauze, tape, scissors, tweezers, 2 cold packs, thermometer, gloves, CPR mouth barrier	☒ 97. (e)(5)
	☒ (d)	FIRST AID SUPPLIES -add'l for field trips water, phone, soap, emergency numbers, medications, plastic bags (N/A)	☒ 98. (e)(6)
PHYSICAL PLANT 19a-79-7a			
62.	(a)(2)	Fire marshal codes/certificate 12/11/24	☒ 99. (e)(7)
63.	(b)	Indoor/Outdoor space inspected/approved	☒ 100. (e)(8)
64.	(b)(1)-(5)	Construction/expansion/renovation/conversion	☒ 101. (e)(9)
65.	(b)(6)	Space not inspected/approved but used for field trips-written parent permission	☒ 102. (e)(10)
66.	(c)(2)	Licensed premises-clean, good repair, hazard free, maintenance program	☒ 103. (e)(11)
67.	(c)(3)	Building/Equipment/Furnishings-sanitary, hazard free (N/A)	☒ 104. (e)(12)
68.	(c)(4)	Testing of premises/grounds for chemicals	☒ 105. (e)(13)
69.	☒ (c)(5)(A)	WATER SUPPLY - Public/Well (Schools-N/A)	☒ 106. (e)(14-15)
	☒ (c)(5)(B)	Lead Water Test - Date: 9/16/23	☒ 107. (e)(16)
	☒ (c)(5)(C)	Bact./Chem Test-Date: 4/1/25 (N/A)	☒ 108. (e)(17)
70.	☒ (c)(6)(A)	Drinking water available/accessible	☒ 109. (e)(18)
	☒ (c)(6)(B-D)	LEAD PAINT - Building Pre-78: ☒ N Lead Test: ☒ N Results <u>months</u>	☒ 110. (f)(1)(A)
		Peeling Paint - ☒ N Inside/Outside	☒ 111. (g)(1)
			☒ 112. (g)(2)
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			☒ 332. (g)(4)

NAME		BRIGHT AND EARLY		CHILD CARE HOME INSPECTION FORM	
PHYSICAL PLANT 19a-79-7a cont.		LICENSE NUMBER	70682	DATE OF INSPECTION	5/13/25
		UNDER THREE ENDORSEMENT 19a-79-10 cont.			
108.	(g)(5)	128.	(e)(2)	DIAPERING cont.	
109.	(g)(6)		(e)(3)	Diaper area: used only for this purpose, located in the program area	
110.	(j)		(e)(4)	Diaper area: non-porous surface/good repair	
111.	(h)(1)		(e)(5)	Diaper area: washed/disinfected after use	
	(h)(2)		(e)(6-9)	Diaper area: disposable paper sheets	
	(h)(3)		(e)(7)	Covered waste receptacle-removed daily	
	(h)(4)		(e)(8)	Handwashing-staff/children	
	(h)(5)		(e)(10)(A-C)	Diapering-Handwashing policies-posted/followed	
	(h)(6)	129.	(f)(1)	Cloth diapers-written plan developed	
	(h)(8)		(f)(2)	LINENS/CLOTHING	
	(h)(9)		(f)(3)	Linens/emergency clothing available	
112.	(h)(7)		(f)(4)	Linens washed weekly or as needed	
	(h)(7)(A)	130.	(g)(1)	Linens/clothing stored individually	
	(h)(7)(B)		(g)(1)	Crib/cots cleaned-linens changed when shared	
	(h)(7)(C)		(g)(2)	SAFE SLEEP	
114.	(i)		(g)(3)	Under 12 mths placed on back for sleeping	
	(i)		(g)(4)	Crib-snug fitting mattress/tightly fitted sheet	
	(i)		(g)(5)	Alternate sleep position/equipment-medical documentation for medical reason on file	
EDUCATIONAL REQUIREMENTS 19a-79-8a			(g)(6)	Infants allowed to adopt other sleep positions	
115.	(a)	131.	(g)(7)	No items in/on cribs-blankets, toys, bumpers, pillows, weighted blankets/sleepers/swaddles	
116.	(a)(1)-(11)		(g)(8)	No unapproved sleeping-car seats/swings/beds, etc.	
	(b)		(h)(1)	No swaddling w/o written documentation from MD/PA/APRN- instructions/timeframes	
			(h)(1)	Observe/assess infants at least every 15 minutes	
			(h)(2)	Teething necklaces/bracelets, jewelry inaccessible	
			(h)(2)	Safe sleep policies - parents informed	
		135.	(i)(1)(2A-C)	TOYS AND OTHER OBJECTS	
		136.	(j)	Infant toys-separate/washed/sanitized daily	
			(k)(1)	Toddler toys-washed/sanitized weekly	
			(k)(2)	No toys/objects less than 1 1/4" diameter	
			(k)(3)	Plastic bags/balloons/styrofoam inaccessible unless under direct supervision	
			(k)(4)	Health consultant visits/documentation	
			(k)(5)	FEEDING	
		137.	(l)(1)	Infants held for bottles - chairs for feeding - individual attn, tummy time, crawl/toddle	
		138.	(l)(2)	Written feeding schedule from parent-updated	
		139.	(l)(3)	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)	
				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	
		SCHOOL AGE ENDORSEMENT 19a-79-11			
117.	(b)	140.	(b)	Approved Schl Age Endorsement	
118.	(c)(2)	141.	(c)	SCHEDULE - ACTIVITIES	
119.	(c)(3)		(c)(1)	Written daily program plan-flexible schedule-available to staff/parents	
120.	(c)(4)		(c)(2)	Activities not a duplication of child's day	
121.	(d)(1)(A-C)		(c)(3)	Activities include cognitive, physical, social, emotional needs of the children	
122.	(d)(2)(Ai-iii)			Program includes free time, snacks, creative/physical/small group/self-concept activities, homework time, special events	
123.	(d)(2)(B)			Ratio- 1:15	
124.	(d)(2)(C)			Group size- max. 30	
125.	(d)(2)(D)				
126.	(d)(2)(E)				
127.	(d)(3)(A-C)				
128.	(e)(1)				

CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM

PROGRAM NAME		Bright and Early		LICENSE NUMBER		70682		DATE OF INSPECTION		5/13/25	
SCHOOL AGE ENDORSEMENT 19a-79-11 (Y/N)						MONITORING OF DIABETES 19a-79-13 (Y/N)					
☒ 145. (f)		4 yr. olds enrolled in schl age-written authorization/permission from director/parent		☐ 171. (a)(1)		Written policies and procedures STAFF TRAINING Staff training – first aid Staff training – use/storage/maintenance of monitoring equipment, reading test results, appropriate actions Training updated at least every 3 years Written documentation of training Trained staff on site when child is present Self-administration - written authorization and under supervision of trained staff Equipment provided by parents Equipment labeled and inaccessible Signed agreement with parent regarding equipment, supplies, materials to be discarded Authorized prescriber written order Written authorization from parent Testing results and actions taken – documented and kept on file, ensure parents are notified daily					
☒ 146. (g)		Designated Head teacher approved- 60%		☐ 172. (b)(1)(A)							
				☐ (b)(1)(B)							
				☐ (i)-(iii)							
NIGHT CARE ENDORSEMENT 19a-79-12 (10pm-5am) (Y/N)											
☐ 147. (b)		Approved Night Care Endorsement		☐ 173. (c)(2)							
☐ 148. (b)(1)		Person in charge-head teacher		☐ (b)(3)							
☐ 149. (b)(2)		Written plan for program activities- meet individual needs, sleep patterns, quiet activities		☐ (c)(3)							
☐ 150. (b)(3)		Written plan for supervision including cot placement and evacuation		☐ 174. (d)(1)							
☐ 151. (b)(4)		Children in care no more than 12 hrs. in 24		☐ 175. (d)(2)							
☐ 152. (b)(5)		Staff awake and available		☐ 176. (d)(3)							
☐ 153. (b)(6)		SLEEP PROVISIONS		☐ 177. (e)(1)							
☐ (b)(6)(A)		Individual cot/crib with bedding		☐ 178. (e)(2)							
☐ (b)(6)(B)		Sleeping apparel/toiletries labeled		☐ 179. (e)(3)							
☐ (b)(6)(C)		Required bedding									
☐ (b)(6)(D)		Required toiletries									
☐ (b)(7)		Bedding/sleeping apparel laundered weekly									
☐ 154. (b)(8)		Sleep arrangements for infants									
☐ 155. (b)(9)		Air temp 65 °F at 3 ft									
☐ 156. (b)(10)		Fire marshal approval-hours specified									
		Local health approval									
ADMINISTRATION OF MEDICATIONS 19a-79-9a (Y/N)						ADDITIONAL VIOLATION					
☒ 157. (9a)		Written medication policies/procedures		☒ 180. -		Consent Order/Negotiated Corrective Action Plan conditions (N/A)					
☒ 158. (9a)		Permit enrollment of children with asthma, allergies, diabetes		DISCUSSIONS/COMMENTS policy review checklist provided during inspection highlighting changes to the childcare center regulations effective Oct 16, 2024. Programs must ensure policies updated to reflect new Requirements all items ✓ were either in compliance or discussed at visit NOTE: Only regulations marked as compliant or non-compliant were monitored or discussed during the visit.							
☒ 159. (a)(2)		NONPRESC. TOPICAL MEDICATION									
☒ (a)(3)(A-B)		Admin/Parent permission/report errors									
☒ (a)(3)(C)		Labeling and Storage									
☒ 160. (b)(1)(A/C)		Unused/expired meds destroyed/returned									
☒ (b)(1)(D)		MEDICATION TRAINING									
☒ (b)(1)(E)		Medication training-general-oral/top/inhalant									
☒ (b)(1)(F)		Injectable premeasured autoinjector medication									
☒ (b)(2)(A-B)		Rectal medication									
☒ (b)(2)(C)		Injectable other than premeasured auto-injector									
☒ 161. (b)(3)(A-B)		Training approval documents/certificates									
☒ 162. (b)(3)(D)		Training outline on file									
☒ 163. (b)(4)(A-B)		Authorized prescriber/parent permission									
☒ 164. (b)(5)(A-B)		Medication errors- documentation, parent(s) and OEC notification									
☒ 165. (b)(5)(C)		Medication Administration Records (MAR)									
☒ 166. (b)(5)(D)		Labeling and Storage									
☒ 167. (b)(5)(E)		Emergency medication inaccessible									
☒ 168. (b)(6)		Unused/Expired meds-destroyed/returned									
☒ 169. (b)(7)(A-B)		Auto-injector/inhalant equipment									
☒ 170. (d)		Self-administration documentation									
		Petition for special medication authorization									
		Potassium Iodide (KI) emergency distribution-permission and storage (N/A)									
Signature of OEC staff		James Fortin				Signature of person in charge		Nyasica Perez			
Printed Name		James Fortin				Printed Name		Nyasica Perez			
OEC DIVISION OF LICENSING						Inspection shall be posted or available for review upon request.					
450 Columbus Blvd, Suite 302, Hartford, CT 06103						Written Corrective Action Plan					
Help Desk: (800)282-6063 or (860)500-4450						Due by: 5/27/25					
Website: www.ctoec.org/licensing Email: oec.licensing@ct.gov						CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf/					

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bright and Early License # 70682 Date: 5/13/25

Observations/Corrections needed:

No violations at visit

Discussed: ^{new} director aware of Lead management plan and program in compliance for NCAP. water temperature in compliance but on higher end at 119. Infestation of flying insects on playground - not in use at visit.
new director in process of taking class.

discussed Manufacturer's guidelines - Little Tykes playground equipment. please ensure following guidelines

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: 5/27/25

Signature: Jaime Fortin
(OEC Representative)

Print Name: Jaime Fortin

Signature: Nyasia Perez
(Person in Charge)

Print Name: Nyasia Perez