

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: BrightPath - Trumbull Date: 5/21/25 Time: 8:30am
Location Address: 111 Merritt Blvd Trumbull, Ct. 06611 Telephone #: (203) 816-6252
e-mail address: trumbullct@brightpathkids.com License #: 70462 Expiration Date: 12-31-26
Capacity: 219 # of Children Present: 50 # of Staff Present: 11

**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: Self Reported Incident

Observations/Corrections needed:

S-19a-79-3a(d)(5)(C) Supervision policy not implemented when a child was unsupervised for 5 minutes. Policy requires supervision by sight and sound.

S-19a-79-4a(a)(4)(B) Child was left unsupervised when he ran out of the classroom, ran down the hallway, got on the elevator, exited the elevator, ran down the 1st floor hallway and out the front double doors to the outside bench located near the entrance. The child left his room at 8:06am and was found by a parent at 8:12am

S-19a-79-3a(a) program did not ensure the safety of a child when he ran out of his class and out of the building next to a parking lot and body of water unsupervised for 5 minutes.

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: 6.4.25

Signature: A R Roberts

(OEC Representative)

Print Name: Terril R Roberts

Signature: Crystal Nunez

(Person in Charge)

Print Name: Crystal Nunez