

**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:	BrightPath - Simsbury	Date of Inspection:	6.6.25	Time of Arrival:	9:00 am
Address:	1 Saint Johns Pl	License Number:	16415	Expiration Date:	11/30/25
Town:	Simsbury 06070	Telephone Number:	860-651-9339	Summer Care:	open
Operator:	Educational Playcare, LTD	# of Staff Present:	28	# over 3 Present:	72
Email:	Imarek@brightpathkids.com	Total Capacity:	214	Total Under 3 capacity:	104
Designated Director:	Elizabeth Marek	Hours/Days of Operation:	M-F 6:30 am to 6:00 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

☒ 1. (c)(8) Local Health Inspection-Date: 1.4.23

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.		<u>POLICIES-COMLETE/IMPLEMENTED</u>
☒ 12.	☒ (d)(2)(A)	Discipline policy
☒ 13.	☒ (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
☒ 14.	(d)(1)	Daily attendance-children/staff- keep 1 yr.
☒ 15.		<u>ACCESS</u>
☒ 16.	☒ (f)	Immediate access by parents
☒ 17.	☒ (h)	Immediate access by OEC-facility/records
	(l)	2.8 yr olds in prek-authorization
	(m)	Motor vehicle laws-transportation
	(n)	Capacity
☒ 18.	(o)	Respond to OEC-no false, misleading statements or documents
		<u>POSTINGS</u>
	☒ 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.		<u>RATIOS</u>
☒ 28.	☒ (d)(4)(A)	Ratio 1:10 - Indoors/Outdoors
☒ 29.	☒ (d)(4)(B)	Mixed age group
	☒ (d)(6)	Nap time ratio
	☒ (d)(4)(D)	Supervision-Indoors/Outdoors
		<u>GROUP SIZE</u>
	☒ (d)(5)	Group Size-Indoors/Outdoors
	☒ (d)(5)(A)	Group Size-school age field trips/outdoors
	☒ (d)(5)(B)	Mixed age group-group size
	(e)(1)	Designated director-training
	(f)(1)	CPR certified program staff
	(f)(2)	First aid certified program staff
		<u>PROFESSIONAL DEVELOPMENT</u>
	☒ (a)(2)	Documentation of prof. dev/trainings
	☒ (h)(1)	Health & Safety training
	☒ (h)(2)	1% annual hours
		<u>SWIMMING ACTIVITIES - Y/N</u>
	☒ (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
		<u>CONSULTANTS</u>
	☒ (i)(1)(A)-(D)	Consultants-Education, Health, Social Service, Dietitian (Dietitian N/A)
	☒ (i) - (i)(2)(A-H)	Consultant agreements-signed annually-agreements complete w/required services
	☒ (F)	Consultant logs-documented activities, observations and required services
	☒ (i)(2)	Consultant visits- Education/Health
	(H)(i)-(I)(i)	

	Contracts	Logs	Visits
Education	☒	☒	☒
Health	☒	☒	☒
Soc. Serv.	☒	☒	☒
Dietitian	☒	☒	☒

CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM

PROGRAM NAME		BRIGHT PATH - SIMSBURY		LICENSE NUMBER	10415	DATE OF INSPECTION	6.6.25
RECORD KEEPING 19a-79-5a				PHYSICAL PLANT 19a-79-7a cont.			
36.	(a)(1)(A-C)	Children's Enrollment information		71.	(d)(1)	Emergency vehicle access	
37.	(a)(1)(D)(i)	<u>PARENT PERMISSIONS</u>		72.	(d)(2)	Walkways maintained	
	(a)(1)(D)(ii)	Emergency medical permission		73.	(d)(3)	Windows protected to prevent falls	
	(a)(1)(D)(iii)	Authorized release permission		74.	(d)(3)	Window screens	
	(a)(1)(D)(iv)	Field trip permission		75.	(d)(4)	Glass/mirrors protected- 36"	
38.	(a)(2)(A-B)	Transportation permission		76.	(d)(5)	Overhead doors-locking devices, spring protectors (N/A)	
39.	(a)(2)(C)	Child Health Records		77.	(d)(6), (f)(3)	Exits, stairs, hallways unobstructed	
40.	(a)(2)(E)	Immunization records		78.	(d)(7)	Individual storage of clothing and bedding	
41.	(a)(3)(A)	Individual care plan-signed by parents/staff		79.	(d)(8)	<u>SMOKING</u>	
42.	(a)(3)(B)	Injury, Illness, Incident, Accident reports			(d)(8)	Smoking, vaping or other electronic nicotine device prohibited on premises/grounds	
43.	(a)(3)(C)(i-ii)	Parent notification of illness or injury			(d)(8)	Matches/lighters inaccessible	
44.	(a)(3)(D)	Notify OEC of serious injuries, fatality		81.	(d)(9)	Electrical safety - outlets inaccessible - covered or protected	
45.	(a)(4)	Notify DPH, local health-reportable diseases		82.	(d)(10)(A)	<u>TOILETING</u>	
		Video recordings- keep 30 days			(d)(10)(B)	Shared toilets/sinks-supervision plan	
<u>HEALTH and SAFETY 19a-79-6a</u>					(d)(10)(C)	Toileting needs met	
46.	(a)(1)	Preparation, transportation of food-follow DPH Model Food Code (N/A)			(d)(10)(C)	Potty chairs-nonporous, emptied, disinfected	
47.	(a)(2)	Nutritious meals and snacks			(d)(10)(E)	Required toilets/sinks-1:16	
48.	(a)(3)	Proper refrigeration-41 degrees			(d)(10)(E)	Toileting Supplies-Hand drying-Garbage	
49.	(a)(4)	Menus-1 wk in advance- keep 3 mths			(d)(10)(F)	Handwashing staff/children	
50.	(a)(5)	Food Service Inspection 10/28/24 (N/A)			(d)(10)(G)	Toilets/sinks located at the facility	
51.	(a)(6)	Kitchen-clean/safe storage of food/supplies(N/A)			(d)(10)(H)	Well lighted/ventilated toilet rooms	
52.	(a)(7)	Separate hand washing facilities		83.	(d)(11)	Mechanical ventilation (after 1/1/94) (Grp Homes N/A)	
53.	(a)(8)	Multi-use eating/drinking utensils		84.	(e)(1)	Staff personal articles inaccessible	
54.	(a)(9)	Kitchen separated (N/A)			(e)(2)	<u>AIR TEMPERATURE</u>	
55.	(a)(10)	Children supervised during meal prep			(e)(3)	Air temp 65 °F at 3 ft -non-mercury thermometer affixed to wall	
56.	(a)(11)	Handwashing-staff/children			(e)(4)	Air temp > 80 °F - ↑ fluids/ventilation	
57.	(b)(1)	Illness procedures-staff knowledgeable, children observed for signs/symptoms		86.	(e)(5)	Water temperature 60°F-120°F	
58.	(b)(2)	Designated isolation area		87.	(e)(6)	Portable space heaters prohibited	
59.	(c)	<u>FIRST AID KITS</u> -portable, accessible to staff, closed container-Indoor/Outdoor/Field Trips		88.	(e)(7)	<u>WALLS/CEILINGS/FLOORS/RUGS</u>	
	(c)	<u>FIRST AID SUPPLIES</u> -Indoor/Outdoor-adhesive strips, 3-4" gauze squares, 2" rolled gauze, tape, scissors, tweezers, 2 cold packs, thermometer, gloves, CPR mouth barrier		90.	(e)(7)	Walls/ceilings/floors/rugs-clean/good repair	
	(d)	<u>FIRST AID SUPPLIES</u> -add'l for field trips water, phone, soap, emergency numbers, medications, plastic bags (N/A)		91.	(e)(7)	Rugs- not a tripping/slipping hazard	
<u>PHYSICAL PLANT 19a-79-7a</u>					94.	Hot water/Steam pipes protected	
62.	(a)(2)	Fire marshal codes/certificate 12.26.24			(e)(8)	<u>TELEPHONE/TELEPHONE NUMBERS</u>	
63.	(b)	Indoor/Outdoor space inspected/approved			(e)(9)	Working phone on each level	
64.	(b)(1)-(5)	Construction/expansion/renovation/conversion		95.	(e)(9)	Emergency numbers posted-adjacent to phones	
65.	(b)(6)	Space not inspected/approved but used for field trips-written parent permission		96.	(e)(10)	Parents provided direct on site phone number	
66.	(c)(2)	Licensed premises-clean, good repair, hazard free, maintenance program		97.	(e)(11)	<u>LIGHTING</u>	
67.	(c)(3)	Building/Equipment/Furnishings-sanitary, hazard free (N/A)		98.	(e)(12)	All areas min. 1 foot candle of lighting	
68.	(c)(4)	Testing of premises/grounds for chemicals		99.	(e)(13)	Adequate lighting-30/50 candle feet-sufficient lighting to be visible	
69.	(c)(5)(A)	<u>WATER SUPPLY</u> - Public/Well (Schools-N/A)		100.	(e)(14-15)	Enough lighting for comfort	
	(c)(5)(B)	Lead Water Test - Date: 7.1.24		101.	(e)(16)	Light fixtures shielded/shatter proof	
	(c)(5)(C)	Bact./Chem Test-Date: (N/A)		102.	(e)(17)	Potentially hazardous substances, materials labeled, inaccessible	
70.	(c)(6)(A)	Drinking water available/accessibile		103.	(e)(18)	Garbage/rubbish-disposed of daily, containers in good repair	
	(c)(6)(B-D)	<u>LEAD PAINT</u> - Building Pre-78: Y/N Lead Test: Y/N Results		104.	(f)(1)(A)	Stairs-protected/good repair-handrails	
		Lead Management Plan n/a		105.	(g)(1)	Toxic plants/materials inaccessible	
		Peeling Paint - Y/N Inside/Outside		106.	(g)(2)	Pets or other animals-in good health, written care plan including access to children	
				107.	(g)(3)	Measures to prevent vermin	
					(g)(4)	Radon test- Results: .2 (Schls-N/A)	
						Carbon monoxide detector-each level N/A	
						Program space-adequate-35 sq. ft. per child	
						Equipment-clean and safe, good repair, non-toxic-sturdy, free from protruding nails, free from rust	
						Adequate equipment for rest-cleaned-cots (Grp Homes only-mats/sleeping bags)	
						Air conditioners/water heaters/fuse boxes inaccessible	
						Developmentally app equipment, materials	

CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM

PROGRAM NAME	BrightPath - Simsbury	LICENSE NUMBER	10415	DATE OF INSPECTION	6.6.25
PHYSICAL PLANT 19a-79-7a cont.			UNDER THREE ENDORSEMENT 19a-79-10 cont.		
108.	(g)(5)	Manufacture guidelines followed-furniture, equipment and toys-CPSC unsafe/recalls	128.	(e)(2)	<u>DIAPERING cont.</u> Diaper area: used only for this purpose, located in the program area
109.	(g)(6)	Indoor climbing play equipment-shock absorbing materials under and around		(e)(3)	Diaper area: non-porous surface/good repair
110.	(j)	No weapons/no facsimile of a firearm		(e)(4)	Diaper area: washed/disinfected after use
111.		<u>OUTDOOR SPACE</u>		(e)(5)	Diaper area: disposable paper sheets
	(h)(1)	Adequate space- 75 sq. ft. per child		(e)(6-9)	Covered waste receptacle-removed daily
	(h)(2)	Shock absorbing surfaces-minimum 8"		(e)(7)	Handwashing-staff/children
	(h)(3)	Playground free from hazards		(e)(8)	Diapering-Handwashing policies-posted/followed
	(h)(4)	Nuts, bolts, screws-tight, covered/protected		(e)(10)(A-C)	Cloth diapers-written plan developed
	(h)(5)	Outside equipment anchored-anchors buried	129.	(f)(1)	<u>LINENS/CLOTHING</u>
	(h)(6)	New equip- cert playg. Inspection upon request		(f)(2)	Linens/emergency clothing available
	(h)(8)	Drinking water available/accessible		(f)(3)	Linens washed weekly or as needed
	(h)(9)	Equipment arranged for safety-equip/fences/structures not hazardous		(f)(4)	Linens/clothing stored individually
112.		<u>OUTDOOR PROTECTED/FENCED</u>	130.	(g)(1)	Cribs/cots cleaned-linens changed when shared
	(h)(7)	Playground protected from traffic, water, gullies or other hazards		(g)(1)	<u>SAFE SLEEP</u>
	(h)(7)(A)	Fences installed to protect from hazards-4 ft		(g)(1)	Under 12 mths placed on back for sleeping
	(h)(7)(B)	Fences installed to protect from water-4 ft, self closing and self latching devices or locks		(g)(2)	Crib-snug fitting mattress/tightly fitted sheet
	(h)(7)(C)	Rooftop play areas-6 ft. wall/barrier (N/A)		(g)(3)	Alternate sleep position/equipment-medical documentation for medical reason on file
114.		<u>WATER HAZARDS</u>		(g)(4)	Infants allowed to adopt other sleep positions
	(i)	Pools, swimming areas- conforms to 19-13-B33b and 19a-36-B61 (N/A)		(g)(5)	No items in/on cribs-blankets, toys, bumpers, pillows, weighted blankets/sleepers/swaddles
	(i)	Wading pools prohibited		(g)(6)	No unapproved sleeping-car seats/swings/beds, etc.
	(i)	Hot tubs/spas/saunas-locked/inaccessible (N/A)		(g)(7)	No swaddling w/o written documentation from MD/PA/APRN- instructions/timeframes
<u>EDUCATIONAL REQUIREMENTS 19a-79-8a</u>				(g)(8)	Observe/assess infants at least every 15 minutes
115.	(a)	Written daily/weekly educational plan - developmentally appropriate- available to staff/parents	131.	(h)(1)	Teething necklaces/bracelets, jewelry inaccessible
116.	(a)	<u>EDUCATIONAL REQUIREMENTS</u>		(h)(1)	Safe sleep policies - parents informed
	(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		(h)(2)	<u>TOYS AND OTHER OBJECTS</u>
	(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	135.	(i)(1)(2A-C)	Infant toys-separate/washed/sanitized daily
			136.	(j)	Toddler toys-washed/sanitized weekly
				(k)(1)	No toys/objects less than 1 1/4 " diameter
				(k)(2)	Plastic bags/balloons/styrofoam inaccessible unless under direct supervision
				(k)(3)	Health consultant visits/documentation
				(k)(4)	<u>FEEDING</u>
				(k)(5)	Infants held for bottles - chairs for feeding - individual attn, tummy time, crawl/toddle
<u>UNDER THREE ENDORSEMENT 19a-79-10</u> (Y/N)			137.	(l)(1)	Written feeding schedule from parent-updated
117.	(b)	Approved Under 3 Endorsement		(l)(2)	Unused formula/milk discarded after feedings
118.	(c)(2)	Ratios- 1:4 (6wks-24mths), 1:5 (24-36mths)	138.	(l)(3)	Clean bottles/disposable bottles/appvd washing
119.	(c)(3)	Group size-maximum of 8 (6wks-24mths), Maximum of 10 (24-36mths)	139.		Baby food served from dish or whole jar
120.	(c)(4)	Physical barriers separating each group of children- indoors/outdoors			Bottles labeled with child's name
121.	(d)(1)(A-C)	Adequate sinks in program space (Grp Homes accessible) handwashing-diapering-food prep			Outdoor spaced fenced-4 ft (lic. after 1/1/25)
122.	(d)(2)(Ai-iii)	Cribs/Pack-n-Plays -in compliance w/CPSC	<u>SCHOOL AGE ENDORSEMENT 19a-79-11</u> (Y/N)		
123.	(d)(2)(B)	Washable cots	140.	(b)	Approved Schl Age Endorsement
124.	(d)(2)(C)	Chairs for feeding-stable base-safety straps-locking tray	141.	(c)	<u>SCHEDULE - ACTIVITIES</u>
125.	(d)(2)(D)	Dev. appropriate tables/chairs/equipment		(c)(1)	Written daily program plan-flexible schedule- available to staff/parents
126.	(d)(2)(E)	Refrigerator and food prep facilities		(c)(2)	Activities not a duplication of child's day
127.	(d)(3)(A-C)	Optional furniture/equip-safe/hazard free		(c)(3)	Activities include cognitive, physical, social, emotional needs of the children
128.	(e)(1)	<u>DIAPERING</u> Diaper area: elevated/sturdy/safety rail	143.	(d)	Program includes free time, snacks, creative/physical/small group/self-concept activities, homework time, special events
			144.	(e)	Ratio- 1:15
					Group size- max. 30

CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM

PROGRAM NAME		BrightPath - Simsbury		LICENSE NUMBER		10415		DATE OF INSPECTION		6.6.25	
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					
☒ 146.	(g)	Designated Head teacher approved- 60%		☐ 172.	(b)(1)(A)	STAFF TRAINING					
					(b)(1)(B)	Staff training – first aid					
					(i)-(iii)	Staff training – use/storage/maintenance of monitoring equipment, reading test results, appropriate actions					
NIGHT CARE ENDORSEMENT 19a-79-12 (10pm-5am) Y/N					(b)(2)	Training updated at least every 3 years					
☐ 147.	(b)	Approved Night Care Endorsement			(b)(3)	Written documentation of training					
☐ 148.	(b)(1)	Person in charge-head teacher			(c)(2)	Trained staff on site when child is present					
☐ 149.	(b)(2)	Written plan for program activities- meet individual needs, sleep patterns, quiet activities		☐ 173.	(c)(3)	Self-administration - written authorization and under supervision of trained staff					
☐ 150.	(b)(3)	Written plan for supervision including cot placement and evacuation		☐ 174.	(d)(1)	Equipment provided by parents					
☐ 151.	(b)(4)	Children in care no more than 12 hrs. in 24		☐ 175.	(d)(2)	Equipment labeled and inaccessible					
☐ 152.	(b)(5)	Staff awake and available		☐ 176.	(d)(3)	Signed agreement with parent regarding equipment, supplies, materials to be discarded					
☐ 153.		SLEEP PROVISIONS		☐ 177.	(e)(1)	Authorized prescriber written order					
	(b)(6)	Individual cot/crib with bedding		☐ 178.	(e)(2)	Written authorization from parent					
	(b)(6)(A)	Sleeping apparel/toiletries labeled		☐ 179.	(e)(3)	Testing results and actions taken – documented and kept on file, ensure parents are notified daily					
	(b)(6)(B)	Required bedding									
	(b)(6)(C)	Required toiletries									
	(b)(6)(D)	Bedding/sleeping apparel laundered weekly									
	(b)(7)	Sleep arrangements for infants									
☐ 154.	(b)(8)	Air temp 65 °F at 3 ft									
☐ 155.	(b)(9)	Fire marshal approval-hours specified									
☐ 156.	(b)(10)	Local health approval									
ADMINISTRATION OF MEDICATIONS 19a-79-9a Y/N				ADDITIONAL VIOLATION							
☒ 157.	(9a)	Written medication policies/procedures		☐ 180.	- n/a	Consent Order/Negotiated Corrective Action Plan conditions (N/A)					
☒ 158.	(9a)	Permit enrollment of children with asthma, allergies, diabetes		DISCUSSIONS/COMMENTS * items new regulations * updated complaint procedure provided NOTE: Only regulations marked as compliant or non-compliant were monitored or discussed during the visit.							
☒ 159.		NONPRESC. TOPICAL MEDICATION									
	(a)(2)	Admin/Parent permission/report errors									
	(a)(3)(A-B)	Labeling and Storage									
	(a)(3)(C)	Unused/expired meds destroyed/returned									
☒ 160.		MEDICATION TRAINING									
	(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									
☒ 161.	(b)(3)(A-B)	Authorized prescriber/parent permission									
☒ 162.	(b)(3)(D)	Medication errors- documentation, parent(s) and OEC notification									
☒ 163.	(b)(4)(A-B)	Medication Administration Records (MAR)									
☒ 164.	(b)(5)(A-B)	Labeling and Storage									
☒ 165.	(b)(5)(C)	Emergency medication inaccessible									
☒ 166.	(b)(5)(D)	Unused/Expired meds-destroyed/returned									
☒ 167.	(b)(5)(E)	Auto-injector/inhalant equipment									
☒ 168.	(b)(6)	Self-administration documentation									
☒ 169.	(b)(7)(A-B)	Petition for special medication authorization									
☒ 170.	(d)	Potassium Iodide (KI) emergency distribution-permission and storage (N/A)									
Signature of OEC staff		Betty mayer		Signature of person in charge		Elizabeth Marek					
Printed Name		Betty Mayer		Printed Name		Elizabeth Marek					
OEC DIVISION OF LICENSING 450 Columbus Blvd, Suite 302, Hartford, CT 06103 Help Desk: (800)282-6063 or (860)500-4450 Website: www.ctoec.org/licensing Email: 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/					
				u/20/25							

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: BrightPath - Simsbury License # 10415 Date: 6-6-25

Observations/Corrections needed:

Program not in compliance when...#47 Observed only one food group served for morning snack.#104 Observed unsecure brown cabinets in T9, T8 & T10.
Observed unsecure cubby in PS4 and Infant 1.#111(h)(2) Observed less than 8 inches of impact absorbing material under spider climber.#130 (g)(3) Observed infant to be sleeping with Bib on in infant 1. (g)(8) safe sleep policy posted not complete.#104 Observed 3 unlabeled benadryls. One epipen prescription label torn, not readable.#106 Observed expired epipen in PS2.#1 local health inspection expired.

S = Substantiated NS = Not Substantiated P = Pending (if applicable)

Operators/providers are required by regulations and statutes to be in compliance at all times.

Signature: Betty Mayer
(OEC Representative)Print Name: Betty Mayer

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Elizabeth Marek
(Person in Charge)OEC BY: 6/20/25Print Name: Elizabeth Marek