

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Kids Club Date: 6/10/25 Time: 9:40 AM

Location Address: 91 Church St. SEYMOUR Telephone #: 203 888 1547

e-mail address: Kidsclubseymour@gmail.com License #: 70326 Expiration Date: 9/30/28

Capacity: 32 # of Children Present: 14 # of Staff Present: 3

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 <u>N/A</u>
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Purpose of visit: Complaint Investigation Case 2025-530

Observations/Corrections needed:

(S) 19a-79-3a(d) - Administration - Program policies - The program failed to follow the policy for child behavior management when they called the parent several times to pick the child up when he was having unfavorable behaviors.

(NS) 19a-79-4a(c)(3) - Staffing - Personal qualities - No evidence that staff threatened to kick a child out due to his behavior -

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: 6/24/25

Signature: [Signature]
(OEC Representative)

Print Name: Lauren Hill

Signature: [Signature]
(Person in Charge)

Print Name: Gilbey Deloreco