CONNECTICUT

CONNECTICUT OFFICE OF EARLY CHILDHOOD
DIVISION OF LICENSING

CONNECTICUT Early Childhood

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:	Little Phoenix Preschool and	**Date of Inspection:**	6-16-25	**Time of Arrival:**	10am
Address:	660 Morehouse Rd Daycare	**License Number:**	Pending	**Expiration Date:**	Pending
Town:	Easton	**Telephone Number:**	203 268-5073	**Summer Care:**	Open
Operator:	Easton Country Day School	**# of Staff Present:**	1	**# over 3 Present:** 0	**# under 3 Present:** 0
Email:	Wendy_Shambra@easton	**Total Capacity:**	48	**Total Under 3 capacity:** 48	**Ages Served:** 6wks - 3yrs
Designated Director:	Wendy Shambra Countryday.org	**Hours/Days of Operation:**	M-F 730am - 600pm		

Instruction Codes: √ = Regulation in Compliance O = 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: 4-22-25

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.	(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

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
	☑ (e)(6)	Lifeguard–certified–supervising
☑ 35.		CONSULTANTS
	☑ (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) (H)(i)-(I)(i)	Consultant visits- Education/Health

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

CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM

PROGRAM NAME	Little Phoenix PS and	LICENSE NUMBER	Pending	DATE OF INSPECTION	6-16-25

PHYSICAL PLANT 19a-79-7a cont.

☑ 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.		OUTDOOR SPACE
	☑ (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.		OUTDOOR PROTECTED/FENCED
	☑ (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.		WATER HAZARDS
	☑ (i)	Pools, swimming areas-conforms to 19-13-B33b and 19a-36-B61 (N/A)
	☑ (i)	Wading pools prohibited
	☑ (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)	EDUCATIONAL REQUIREMENTS
	☑ (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.		DIAPERING
	☑ (e)(1)	Diaper area: elevated/sturdy/safety rail

UNDER THREE ENDORSEMENT 19a-79-10 cont.

128.		DIAPERING cont.
	☑ (e)(2)	Diaper area: used only for this purpose, located in the program area
	☐ (e)(3)	Diaper area: non-porous surface/good repair
	☑ (e)(4)	Diaper area: washed/disinfected after use
	☑ (e)(5)	Diaper area: disposable paper sheets
	☑ (e)(6-9)	Covered waste receptacle-removed daily
	☑ (e)(7)	Handwashing-staff/children
	☑ (e)(8)	Diapering-Handwashing policies-posted/followed
	☐ (e)(10)(A-C)	Cloth diapers–written plan developed
☐ 129.		LINENS/CLOTHING
	☑ (f)(1)	Linens/emergency clothing available
	☑ (f)(2)	Linens washed weekly or as needed
	☑ (f)(3)	Linens/clothing stored individually
	☑ (f)(4)	Cribs/cots cleaned-linens changed when shared
☑ 130.		SAFE SLEEP
	☑ (g)(1)	Under 12 mths placed on back for sleeping
	☑ (g)(1)	Crib-snug fitting mattress/tightly fitted sheet
	☑ (g)(1)	Alternate sleep position/equipment-medical documentation for medical reason on file
	☑ (g)(2)	Infants allowed to adopt other sleep positions
	☑ (g)(3)	No items in/on cribs-blankets, toys, bumpers, pillows, weighted blankets/sleepers/swaddles
	☑ (g)(4)	No unapproved sleeping-car seats/swings/beds, etc.
	☑ (g)(5)	No swaddling w/o written documentation from MD/PA/APRN- instructions/timeframes
	☑ (g)(6)	Observe/assess infants at least every 15 minutes
	☑ (g)(7)	Teething necklaces/bracelets, jewelry inaccessible
	☑ (g)(8)	Safe sleep policies - parents informed
☑ 131.		TOYS AND OTHER OBJECTS
	☑ (h)(1)	Infant toys-separate/washed/sanitized daily
	☑ (h)(1)	Toddler toys-washed/sanitized weekly
	☑ (h)(2)	No toys/objects less than 1 ¼ " diameter
	☑ (h)(2)	Plastic bags/balloons/styrofoam inaccessible unless under direct supervision
☑ 135.	(i)(1)(2A-C)	Health consultant visits/documentation
☑ 136.		FEEDING
	☑ (j)	Infants held for bottles - chairs for feeding - individual attn, tummy time, crawl/toddle
	☑ (k)(1)	Written feeding schedule from parent-updated
	☑ (k)(2)	Unused formula/milk discarded after feedings
	☑ (k)(3)	Clean bottles/disposable bottles/appvd washing
	☑ (k)(4)	Baby food served from dish or whole jar
	☑ (k)(5)	Bottles labeled with child's name
☑ 137.	(l)(1)	Outdoor spaced fenced–4 ft (lic. after 1/1/25)
☐ 138.	(l)(2)	Outdoor equipment-developmentally appropriate for ages of the children
☐ 139.	(l)(3)	Shock ab materials less than 1 ¼ "-or measures in place to ensure their health & safety

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

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

CHILD CARE CENTER and GROUP CHILD CARE HOME INSPECTION FORM

PROGRAM NAME	Little Phoenix PS and DC	LICENSE NUMBER	Pending	DATE OF INSPECTION	6-16-25

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

☐ 145.	(f)	4 yr. olds enrolled in schl age-written authorization/permission from director/parent
☐ 146.	(g)	Designated Head teacher approved- 60%

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

☐ 147.	(b)	Approved Night Care Endorsement
☐ 148.	(b)(1)	Person in charge-head teacher
☐ 149.	(b)(2)	Written plan for program activities- meet individual needs, sleep patterns, quiet activities
☐ 150.	(b)(3)	Written plan for supervision including cot placement and evacuation
☐ 151.	(b)(4)	Children in care no more than 12 hrs. in 24
☐ 152.	(b)(5)	Staff awake and available
☐ 153.		SLEEP PROVISIONS
	☐ (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
☐ 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

☑ 157.	(9a)	Written medication policies/procedures
☑ 158.	(9a)	Permit enrollment of children with asthma, allergies, diabetes
☑ 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)

MONITORING OF DIABETES 19a-79-13 Y/N

☑ 171.	(a)(1)	Written policies and procedures
☑ 172.		STAFF TRAINING
	☑ (b)(1)(A)	Staff training – first aid
	☑ (b)(1)(B) (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
☑ 173.	(c)(3)	Self-administration - written authorization and under supervision of trained staff
☑ 174.	(d)(1)	Equipment provided by parents
☑ 175.	(d)(2)	Equipment labeled and inaccessible
☑ 176.	(d)(3)	Signed agreement with parent regarding equipment, supplies, materials to be discarded
☑ 177.	(e)(1)	Authorized prescriber written order
☑ 178.	(e)(2)	Written authorization from parent
☑ 179.	(e)(3)	Testing results and actions taken – documented and kept on file, ensure parents are notified daily

ADDITIONAL VIOLATION

☑ 180.	-	Consent Order/Negotiated Corrective Action Plan conditions (N/A)

DISCUSSIONS/COMMENTS

All items on this inspection form were discussed during this inspection

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

Signature of OEC staff	Cathy Anderson	Wendy Shaintbra	Signature of person in charge
Printed Name	Cathy Anderson	Wendy Shaintbra	Printed Name

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**: oec.licensing@ct.gov

Inspection shall be posted or available for review upon request.

Written Corrective Action Plan Due by: Prior to approval

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Little Phoenix Preschool and DayCare License # Pending Date: 6-16-25

Observations/Corrections needed: Program not in compliance when:

#66 - 2 microwaves have rust

#75 - Windows in all 3 rooms (exit side) do not have documentation that they are protected to 36". (Measured from floor to windows = 32")

#82(d)(10)(A) - Program will share the bathroom with the Preschool exempt classrooms (Submit a supervision plan on how children will not be mixed in the bathroom)

#88(e)(5) - room 3 - wall column on bottom has rough wood and splitting and undersink has a large hole in wall, Child's bathroom - hole on wall

#102 Carbon monoxide detector is not on site

#111(h)(3) - see saw and ~~tractor~~ CA tractor has a crack and rough to the touch, (h)(4) - nails protruding on ramp to the playground and (h)(5) - Small climber not anchored

#120 - room 2 - barrier is not compete and not sturdy and room 4 - barrier is not secured (send picture)

#121 - all 3 rooms only has an handwashing sink on entrance side.

#122 - 2 Cribs have ~~wood~~ CA wood chipping accessible to children

#128(e)(3) - 2 diaper mats are torn and 3 are chipping paint

#139 - Program has mulch and small rocks accesible to children. They measure under 1 1/4"

Discussed —

Outside truck has rust and 1 light is flashing in room 3

Discussed in detail - ratio, group size (8 U3's or 10 Two's) all children need to be 2 to go to a group size in room 4 side A, Safe Sleep and supervision

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: Cathy Andrews (OEC Representative)

Print Name: Cathy Andrews

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: Prior to approval

Signature: Wendy Shambra (Person in Charge)

Print Name: Wendy Shambra

SQUARE FOOTAGE REPORT

30 OR 35 sq/ft

*30 sq/ft licensed prior 1986 (continuous basis)

Little Phoenix Preschool and Daycare (Name of Program) | Pending (License Number) | 6-16-25 (Date of Measurements)

INDOOR SPACE

Room: room 2 (Name/Number) : (11.25 x 24.50)+(____x____)+(____x____)+(____x____)= 287.88

Totals 287.88 ____ ____ ____ **Minus** /

Under 3 YES/NO Side A exit side Deduction: (____x____)+(____x____)+(____x____)+(____x____)= ____

Totals ____ ____ ____ ____

Description ____ ____ ____ ____

Total 287.88 ÷35/30= 8 **OK for** 8 **children**

Room: room 2 (Name/Number) : (16 x 24.5)+(____x____)+(____x____)+(____x____)= 392

Totals 392 ____ ____ ____ **Minus**

Under 3 YES/NO Side B entrance side Deduction: (6.5 x 2.83)+(____x____)+(____x____)+(____x____)= 18.40

Totals 18.40 ____ ____ ____ 8 due to group size

Description door frame ____ ____ ____

Total 373.6 ÷35/30= 10 **OK for** ~~10~~ **children**

Room: room 3 (Name/Number) : (12.42 x 24.5)+(____x____)+(____x____)+(____x____)= 304.29

Totals 304.29 ____ ____ ____ **Minus** /

Under 3 YES/NO Side A exit side Deduction: (____x____)+(____x____)+(____x____)+(____x____)= ____

Totals ____ ____ ____ ____

Description ____ ____ ____ ____

Total 304.29 ÷35/30= 8 **OK for** 8 **children**

Room: room 3 (Name/Number) : (15.42 x 24.5)+(____x____)+(____x____)+(____x____)= 377.79

Totals 377.79 ____ ____ ____ **Minus**

Under 3 YES/NO Side B entrance side Deduction: (6.5 x 2.83)+(____x____)+(____x____)+(____x____)= 18.40

Totals 18.40 ____ ____ ____ 8 due to group size

Description door frame ____ ____ ____

Total 35939 ÷ 35/30= 10 **OK for** ~~10~~ **children**

Express the figure as whole number by rounding decimals down.

SQUARE FOOTAGE REPORT

30 OR 35 sq/ft

*30 sq/ft licensed prior 1986 (continuous basis)

Little Phoenix Preschool and Daycare (Name of Program) | Pending (License Number) | 6-16-25 (Date of Measurements)

INDOOR SPACE

Room: 4 (Name/Number) : (15.72 x 24.5)+(____x____)+(____x____)+(____x____)= 377.79

Totals _____ Minus /

Under 3 YES/NO (NO) Deduction: (Side exit Side x ____)+(____x____)+(____x____)+(____x____)= _____

Totals _____

Description _____

06 (8) 35

Total 377.79 ÷ 35/30= 10

OK for (10) Twos children

Room: 4 (Name/Number) : (12.67 ~~12.67~~ x 24.5)+(____x____)+(____x____)+(____x____)= 310.42

Totals _____ Minus

Under 3 YES/NO (NO) Deduction: (Side B entrance Side x 2.83)+(____x____)+(____x____)+(____x____)= 18.40

Totals 18.40

Description door frame

Total 292.03 ÷ 35/30= 8

OK for (8) children

Room: _____ (Name/Number) : (____x____)+(____x____)+(____x____)+(____x____)= _____

Totals _____ Minus

Under 3 YES/NO Deduction: (____x____)+(____x____)+(____x____)+(____x____)= _____

Totals _____

Description _____

Total _____ ÷ 35/30= _____

OK for _____ children

Room: _____ (Name/Number) : (____x____)+(____x____)+(____x____)+(____x____)= _____

Totals _____ Minus

Under 3 YES/NO Deduction: (____x____)+(____x____)+(____x____)+(____x____)= _____

Totals _____

Description _____

Total _____ ÷ 35/30= _____

OK for _____ children

Express the figure as whole number by rounding decimals down.

SQUARE FOOTAGE REPORT

(Not counted in capacity)

Little Phoenix Preschool and Daycare (Name of Program) | Pending (License Number) | 6-16-24 (Date of Measurements)

ACTIVITY ROOM (Not counted in capacity)

Room: _____: (____x____)+(____x____)+(____x____)+(____x____)= _____
(Name/Number)

Totals _____ _____ _____ _____ **Minus**

Under 3 YES/NO/BOTH Deduction: (____x____)+(____x____)+(____x____)+(____x____)= _____

Totals _____ _____ _____ _____

Description _____ _____ _____ _____

Total_____ ÷ 35/30= _____ **OK for _____ children**

Room: _____: (____x____)+(____x____)+(____x____)+(____x____)= _____
(Name/Number)

Totals _____ _____ _____ _____ **Minus**

Under 3 YES/NO/BOTH Deduction :(____x____)+(____x____)+(____x____)+(____x____)= _____

Totals _____ _____ _____ _____

Description _____ _____ _____ _____

Total_____ ÷ 35/30= _____ **OK for _____ children**

OUTDOOR SPACE (Not counted in capacity)

Playground 1: (32.12 x 34.50)+(____x____)+(____x____)= 1,109.87 ÷ 75= 14

Under 3 YES/NO/BOTH Totals: 1,109.87 _____ _____ Wood Chips **OK for ~~14~~ 11 children** 803's or 10 Twos

Playground 2: (44 x 29.42)+(____x____)+(____x____)= ~~1,294.48~~ 1,294.48 ÷ 75= ~~17~~ 17

Under 3 YES/NO/BOTH Totals: 1,294.48 _____ _____ Grass **OK for ~~17~~ 17 children** 803's or 10 Twos

Playground 3: (44 x 27.58)+(____x____)+(____x____)= 1,213.52 ÷ 75= 16

Under 3 YES/NO/BOTH Totals: 1,213.52 _____ _____ **OK for ~~16~~ 16 children** 803's or 10 Twos

Express the figure as whole number by rounding decimals down.

***Total of toilets for children:** 3 **Exclusive use for staff** 1

***Total of sinks for children:** 6

TOTAL CAPACITY ~~50~~ 48 **INCLUDING** ~~48~~ 46 **UNDER THE AGE OF 3** 5

48 due to toilets

*** 1 toilet and 1 sink for every 16 children (For programs serving children under 6 years of age)**

*** 1 toilet and 1 sink for every 25 children (For programs serving school age ONLY)**