

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

**SUPPLEMENTAL REPORT OF INSPECTION**

Name of Program/Provider: Bright Path- Wallingford Date: 5/2/25 Time: 9:10 AM

Location Address: 15 W Plains Industrial Rd Telephone #: 203-265-0055

e-mail address: Karmeno@brightpathkids.com License #: 70090 Expiration Date: 9/30/28

Capacity: 194/92 # of Children Present: 80 # of Staff Present: 18

**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: CASE 2025-410

Observations/Corrections needed:

19a-79-3a(d)(5) Administration- General Operating policies - Supervision

(S) Regulation not in compliance when program does not have a supervision policy in place for when staff have items that measure less than 1/4" diameter and staff had an activity in sensory table with items (beans) that measure less than 1/4" diameter. Program policy document "Maintaining the Classroom Environment" listed under Waiver column states "no toys/objects less than 1/4" diameter" therefore program staff did not follow policy of not having items less than 1/4" diameter.

19a-79-3a(d)(4)(A) Administration- Medical emergency policy

(NS) Regulation in compliance when staff followed program policy when child had concerning nose discharge fluid.

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: Evelyn Vicente-Quinones  
OEC Representative

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 5/14/25

Signature: \_\_\_\_\_  
(Person in Charge)