

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Cadence Academy Preschool Date: 6/25/25 Time: 11am
Location Address: 170 Connecticut Ave Norwalk Ct 06854 Telephone #: (860) 960-7568
e-mail address: director.fivemileriver@cadence-academy.com License #: 70776 Expiration Date: 8-31-28
Capacity: 151 # of Children Present: 94 # of Staff Present: 23

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 Page 1 of 2

Observations/Corrections needed:

(TK) (d) (2)
S= 19a-79-3a (b)(7)(A) Behavior management policy not implemented when staff pushed an infant who from standing, while being in a bouncy seat, to a sitting position.

S= 19a-79-3a (b)(7)(A) Staff did not use appropriate behavior management techniques when she pushed a child from standing in a bouncy seat to sitting.

S= 19a-79-4a (d)(3)(A) Staff did not demonstrate the personal qualities to care for and work with children when she pushed an infant from a standing position in the bouncer seat to sitting.

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: 7.9.25

Signature: [Signature]
(OEC Representative)
Print Name: Tern R Roberts
Signature: [Signature]
(Person in Charge)
Print Name: Kassandra Velez-Morales

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Cadence Academy Preschool License # 70776 Date: 6-25-25

Observations/Corrections needed:

(d)
S > 19a.79-3a(7) Personnel policy not implemented when one staff video taped a child on their personal cell phone and sent it to a boyfriend who is on probation. ~~A second staff who was in the room and witnessed this did not report to management.~~ (TR)

Program did not have classroom video available for review at time of visit but will send to email provided by next business day. Requirements discussed

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(OEC Representative)
Signature: [Signature]
(Person in Charge)

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