



**DIVISION OF LICENSING**

450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103  
 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552  
 Email: [oc.licensing@ct.gov](mailto:oc.licensing@ct.gov) Website: [www.ctoec.org](http://www.ctoec.org)

**CHILD CARE CENTER/GROUP CHILD CARE HOME  
 INVESTIGATION**

Program Name	BRIGHTPATH - MANCHESTER				License Number	DCCC.70463		Date of Inspection	10/24/2025	
					Expiration Date	12/31/2026		Time of Inspection	09:45 AM	
Address	452 TOLLAND TPKE MANCHESTER CT 06042-1765				Telephone	(860) 288-4207		Licensed Capacity	215	
					Hours of Operation	7:00 AM - 6:00 PM		Under Three Capacity	100	
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	6 - 12 weeks - years	
New Address					Night Hours	No	Summer Hours	Open	Weekend Hours	No
					Program's Email	kmeli@brightpathkids.com				
Operator	EDUCATIONAL PLAY CARE, LTD				Director	KATRINA MELI				
Endorsements	Pre-School, School Age, Under Three				Name of Inspector	Evelyn Vicente-Quinones				
Numbers of Staff/Children Present	# Children Present under age 3	25	# Total Children Present	66	# of Staff Present	17	Purpose of Visit	Investigation case 1104		

**SUBSTANTIATED VIOLATIONS**

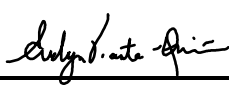

Statute and/or Regulation and Description:	[19a-79-3a(a)]	002-Ensuring the safety & health of children
<p>Program not in compliance with ensuring the safety, health and development of the children when program enrolled a child, attended program for three days without emergency medication nor individual care plan on file.</p>		
Statute and/or Regulation and Description:	[19a-79-5a(a)(2)(E)]	040- Individual Care Plan- signed by parents/staff
<p>Program not in compliance with maintaining current/complete individual care plans when program enrolled child and attended program for three days without an individual care plan on file.</p>		
Statute and/or Regulation and Description:		


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<b>NOT SUBSTANTIATED or PENDING</b>	
<b>Statute and/or Regulation and Description:</b>	[19a-79-9a(b)(7)(A-B)] Pending
169- Petition for special medication authorization  Special medication petition compliance is pending further investigation	
<b>Statute and/or Regulation and Description:</b>	

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**DISCUSSIONS/COMMENTS**

Were Violations cited during this visit? Y or N?	<b>Yes</b>	<b>NOTE:</b> * It is the operator's responsibility to ensure compliance with all local codes and ordinances.
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Signature of OEC Representative			Signature of Person in Charge
Printed Name	<b>Evelyn Vicente-Quinones</b>	<b>Elizabeth Fusco</b>	Printed Name
2 <sup>nd</sup> OEC Representative	<b>APPLICANTS:</b> You <i>MAY NOT OPERATE</i> until all requirements have been met and a license has been issued by the Agency.		
Printed Name	<b>THIS INSPECTION SHALL BE POSTED OR SHALL BE AVAILABLE FOR REVIEW UPON REQUEST.</b>		

	Written Corrective Action Plan due by: <b>11/07/2025</b>	<b>DIVISION OF LICENSING</b> 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552 Email: <a href="mailto:oc.licensing@ct.gov">oc.licensing@ct.gov</a> Website: <a href="http://www.ctoec.org">www.ctoec.org</a>
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OEC Representative's Email: <b>evelyn.vicente-quinones@ct.gov</b>	CAP: <a href="https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf">https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf</a>
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