





LICENSING CORRECTIVE ACTION PLAN (CAP)

NAME OF PROVIDER/OPERATOR: KinderCare Learning Center #070294 LICENSE #: 14169
 LOCATION ADDRESS: 555 Long Wharf Dr TOWN: New Haven INSPECTION REPORT DATE: 1/16/2026

CAPs submitted that do not conform to the instructions provided on the back will not be accepted. Read the instructions carefully before completing this form. In accordance with this agency's policy, **your CAP will be posted online** and made accessible to parents and others seeking information pertaining to your child care program.

Inspection Report Item # or Regulation	Corrective Action Taken NOTE: Your response should include a clear concise explanation of the changes the program has made to correct the violation to ensure compliance.	Exact Date Corrected	Check if Accepted (OEC Use Only)
4.3a (b)(6)	had staff sign new orientation and will have all new hire sign as well.	1/26/2026	
11.3a(d)-(1)	Posted admin oversight in front door entrance hallway.	1/26/2026	
18.3a(e)-(6)	Posted OEC complaint procedure, and OEC oversight policy	1/26/2026	
35. 4a(i)/(F)	Dietitian has completed the policy review and documentation has been logged in consultant binder.	1/26/2026	

Based on the inspection report, the licensee was cited for failure to comply with the regulations listed above. I hereby declare that the licensee has complied with the regulation(s) in the above manner. I understand the Agency reserves the right to re-inspect the above program to verify compliance with the regulations and to request a meeting with the licensee when necessary to review patterns of non-compliance. Understanding the penalties for false statements, I attest that the information I submit on this form is true.

If the violations of child care regulations referenced in the Report(s) related to this Corrective Action Plan reoccur in the future, the violations may no longer be considered resolved by this Corrective Action Plan and the Agency may bring disciplinary action based upon the violations identified in the Report(s) related to this Corrective Action Plan.








Providers/Operators are required by regulations and statutes to be in compliance at all times.

By checking this box, and typing my name below, I am electronically signing my CAP.

Signed: Megan Dunlop 2/26/2026
 (Provider/Operator) (Date)

RETURN TO: _____
 Connecticut Office of Early Childhood
 450 Columbus Blvd, Suite 302
 Hartford, CT 06103 Fax: 860-326-0552

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48.5a(a) (2)	Ordered thermometer off marketplace and placed in fridge	2/2/2026	
49. 5(a)(4)	Posted current and next week menu	1/23/2026	
66.7a(c) (2)	Sink counter has been protected with contact paper until the counter can be completely replaced.	2/2/2026	
69.7a(c) (5)(a-c)	the water was tested and passed. results will be attached.	2/16/2026	
82. 7a(d) (10)(a-h)	Opener checks each class has the right supplies, teachers restock during nap if needed. staff fills all dispensers back up if needed before we close.	2/5/2026	
88.7a(e) (5)	bought and applied rug tape to lose rugs	2/3/2026	
94.7a(e) (8-9)	Put in work order through building mangement for 555 long wharf drive. children eat in different area until lighting is fixed. Children eat under larger lighting now closer to cabinets.	2/5/2026	

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(Provider/Operator) (Date)

Printed Name: Megan Dunlop

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107. 7a(g) (4)	bought new toys for all classroom. handed new toys to each classroom.	2/5/2026	
108. 7a (g) (5)	Threw out crock pots and replaced with baby breeza bottle warmers	2/3/2026	
121.10 (d) (1)(a-c)	all staff was retrained on 2/2/2026. hand washing signs posted at all hand washing sinks. training covered how to wash hands and which sink in each class is the designated hand washing sink. went into each class and showed teachers which sink was hand washing sink to make sure they know.	2/2/2026	
128.10(e) (1-10)	all staff under 3 were retrained on proper diaper changing procedures and hand washing procedures, and a verbal coaching was done on toddler D teacher.	2/5/2026	
130. 10 (g) (1-8)	Had families sign safe sleep policies.	2/3/2026	

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