

LICENSING CORRECTIVE ACTION PLAN (CAP)NAME OF PROVIDER/OPERATOR: **Michelle Mottola**LICENSE #: **70281**LOCATION ADDRESS: **115 Barlow Mt Road**TOWN: **Ridgefield**INSPECTION REPORT DATE: **5/22/2026**

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	Exact Date Corrected	Check if Accepted (OEC Use Only)
21.4a(b)	All staff in compliance. Director will monitor BCIS background checks on a monthly basis. New Hires and staff whose background checks are not complete or have expired will not work in classrooms.	6/3/2026	
21a.4a(b)(4)	Employee new hire checklist adapted to go back 5 year employment history check. Currently, we had verified the last position. Director responsible for this task.	6/5/2026	
36.5a(a)(1)(A-C)	New enrollment forms are being handed out to parents and Director and Assistant Director responsible to maintain complete enrollment information.	7/2/2026	
40.5a(2)(E)	Received care plan from parent, going forward Asistant Director responsible to maintain individual care plans.	6/5/2026	

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: **Michelle Mottola****6/5/2026***(Provider/Operator)**(Date)*RETURN TO: **Jaime Fortin**

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

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Inspection Report Item # or Regulation	Corrective Action Taken	Exact Date Corrected	Check if Accepted (OEC Use Only)
78.7a(d) (7)	Children's bedding now being stored in cloth bags on hooks in classroom or individually in cubbies. Assistant Director is responsible to monitor.	6/5/2026	
108.7a(g) (5)	Little Tykes playscape removed and future purchases will follow manufacturer guidelines. Director will oversee purchases.	5/22/2026	

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

Signed: Michelle Mottola 6/5/2026

(Provider/Operator)

(Date)

Printed Name: Michelle Mottola