

2021-383

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Pieces of the Puzzle Early Learning ^{Center} Date: 8/5/21 Time: 11am

Location Address: 917 Bridgeport Avenue, Shelton, CT 06484 Telephone #: (475) 269-2405

e-mail address: PiecesofthePuzzles.ecc@gmail.com License #: 70521 Expiration Date: 10/31/23

Capacity: 59/40 # of Children Present: 33 # of Staff Present: 7

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: Complaint/Investigation 2021-383 - follow-up.

Observations/Corrections needed:

PIC: Danaisha Lawrence - Director

(NS) 19a-79-4a(c)(3)(A) ^(W) 4(D) Staffing - Supervision - Per director, staff have been assuring the supervision of the children at all times. Director has also revised program's supervision policy to ensure continued compliance w/ supervision policy at program.

S = Substantiated (NS) = Not Substantiated P = Pending (if applicable)

(860) 381-7075

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

Signature: Valeyn Williams
(OEC Representative)

Print Name: Valeyn Williams

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: n/a.

Signature: Danaisha Lawrence
(Person in Charge)

Print Name: Danaisha Lawrence