

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Team - Slocum Center Date: 10-1-21 Time: 12

Location Address: 25 Rumford St., Waterbury Telephone #: 203-757-8888

e-mail address: rchantre@teaminc.org License #: 70257 Expiration Date: 8-31-23

Capacity: 224 # of Children Present: 95 # of Staff Present: 33

Consent to Inspect Family Child Care Home	<i>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 _____</i>
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Purpose of visit: case # 2021-675

Observations/Corrections needed:

S 19a.79-3a(b)(8)(A) - staff member did not manage
child behavior using techniques based on
developmentally appropriate practice when
she used inappropriate practice to remove
a child from one area to another.

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: 10-15-21

Signature: [Signature]
(OEC Representative)
Print Name: Kevin Eddy
Signature: [Signature]
(Person in Charge)
Print Name: Ruth Chantrel