

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Capitol Child Development Center Date: 12/20/22 Time: 12:50 pm

Location Address: 450 Broad St. Hartford, CT 06106 Telephone #: (860) 240-0330

e-mail address: lplamondon@capitolchild.org License #: 13081 Expiration Date: 3/31/25

Capacity: 74 # of Children Present: 17 # of Staff Present: 4+

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.</i> Provider/Applicant/Substitute's Signature: <u>N/A</u>
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Purpose of visit: Self-reported incident case # 2021-902

Observations/Corrections needed:

(S) Pla. 79-3a(d)(7) Administration - General operating policies - Diaper changing procedure. - Staff failed to effectively implement the program's diaper changing procedure when they changed a child's ^{diaper} and did not clean the child, as discovered by the next staff to change the diaper 2 hrs later.

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: 1/3/2021

Signature: Stephane Pa
(OEC Representative)

Print Name: Stephane Pa

Signature: Lisa Plamondon
(Person in Charge)

Print Name: Lisa Plamondon