

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Carriage House Day Care Date: 7/8/22 Time: 9:45 am

Location Address: 320 Colony St. Meriden, CT 06451 Telephone #: 203-235-4859

e-mail address: pam@carriagehousedaycare.com License #: 15403 Expiration Date: 2/28/2026

Capacity: 94^{u3 32} # of Children Present: 48 # of Staff Present: 12

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 # 2022-451

Observations/Corrections needed:

⑤ 19a-79-3a(b)(8)(A): Administration - Managing Child Behavior-
Staff failed to manage child behavior using techniques based
on developmentally appropriate practice, when a 9 year
old child observed the staff person yell at a 3 year
old child, pull the child by the arm, and forcefully
Sit
Sit the child in the bear bag chair.

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: 7/29/2022

Signature: [Signature]
(OEC Representative)

Print Name: Stephanie Pici

Signature: [Signature]
(Person in Charge)

Print Name: Hannah Alexander