

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

**SUPPLEMENTAL REPORT OF INSPECTION**

Name of Program/Provider: Little Red Schoolhouse Date: 7/22/22 Time: 8:30am  
Location Address: 5958 Main Street Trumbull, Ct. 06611 Telephone #: (203) 261-1558  
e-mail address: missdianad@hotmail.com License #: 15052 Expiration Date: 9.30.22  
Capacity: 68 # of Children Present: 21 # of Staff Present: 5

<b>Consent to Inspect Family Child Care Home</b>	<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: Unannounced follow up

Observations/Corrections needed:

53- 2 windows not protected on 2nd floor <sup>children's</sup> bathrooms

All other items cited at 5.16.22 inspection were in compliance at this visit

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: 8/5/22

Signature: [Signature]  
Print Name: Diana Dentonich (OEC Representative)  
Signature: [Signature]  
Print Name: \_\_\_\_\_ (Person in Charge)