

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Duck Pond Day Care Hamden Date: 8/18/22 Time: 1:37

Location Address: 84 Washington Avenue, Hamden Telephone #: 203-281-3825

e-mail address: Katie@duckponddaycare.org License #: 1603/ Expiration Date: 4.30.26

Capacity: 89/40 # of Children Present: 43 # of Staff Present: 11

**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: Follow up to inspection dated 8/11/22

Observations/Corrections needed:

18b upon arrival provider had 11 staff present, with 8/46 current background check status. Eight staff shown having P as needing a background check.

During inspection, specialist contacted OEC legal department. Legal division indicated 6 additional staff background checks should be current by 8/19/22 in the a.m. Director provider written statement indicating staff without a current background check status will not work with children, will not provide direct care.

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

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

Signature: Jenifer Sena Sen Sena
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 8/29/22

Signature: Karen Cananb
(Person in Charge)