

Inspection Type: case/investigation 2022-749

## REVISED SUPPLEMENTAL REPORT OF INSPECTION

Date: September 14, 2022

Name of Program/Provider: CHILDREN OF AMERICA WETHERSFIELD

Location Address: 1199 SILAS DEANE HWY

WETHERSFIELD, CT 06109-4301

Telephone #: 959-223-2100

e-mail address: coawethersfieldct@childrenofamerica.com

License #: DCCC.70648

Expiration Date: \_05/31/2026

Capacity: 160

**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: case/investigation 2022-749 \*\* Revised \*\*

Observations/Corrections needed:

**S- 19a-79-3a(d)(8)(E)-Administration-Personnel Policies-** Communication with parents- Staff failed to communicate to the parents of a child, marks and/or bruises that were reportedly observed on the child while at the program. Staff did not document the information or notify the program.

**NS-19a-79-3a(b)(8)(A)- Administration- Managing Child's Behaviors**

**NS- 19a-79-4a(c)(3)- Staffing- Personal Qualities**

**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: 10/5/22**

Signature: *Valecia Williams*  
(OEC Representative)

Print Name: Valecia Williams

Signature: *Ashlie DeMarco*  
\_\_\_\_\_  
(Person in Charge)

Print Name: Ashlie DeMarco

Sent via email: Director Wethersfield CT <coawethersfieldct@childrenofamerica.com>