

**Connecticut Office of Early Childhood**  
**Division of Licensing**  
 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103  
 Phone (800)282-6063 [www.ctoec.org](http://www.ctoec.org) Fax (860)326-0552

**FAMILY CHILD CARE HOME INSPECTION FORM**

INITIAL  UNANNOUNCED FULL/PARTIAL  FOLLOW UP  LOCATION CHANGE  OTHER

Provider: <i>Beverly Samuels</i>	License Number: <i>56350</i>	Date of Inspection: <i>10/25/22</i>
	Expiration Date: <i>9/30/25</i>	Time of Inspection: <i>902am</i>
Address: <i>18 Irving St FL 1</i>	Capacity: <i>6+3</i>	Days/Hours: <i>M-F 24 hrs</i>
	Town: <i>Hartford</i>	Telephone: <i>860-796-5106</i>
State/Zip Code: <i>CT 06112-2343</i>	Email: <i>evestorsamuels101@gmail.com</i>	Summer: <input checked="" type="checkbox"/> Open/Closed

Instructions: ✓ = Compliance/No violation found      O = Non-compliance/Violation found      N/A = Not applicable at this time

*Consent to Inspect:* I agree to allow the Commissioner or an authorized representative to have access to and inspect the facility and child care records during home inspections as required by Regulations Section 19a-87b-5(h).  
*Beverly Samuels*  
 Signature of Provider/Applicant/Substitute/Emergency Caregiver

- Terms of License 19a-87b-5**
- 4. Capacity: Total # Children Present: 3
  - 5. Nontransferability of License
  - 6. Infant/Toddler Restriction- # Present: 0
  - 7. License Posted
  - 8. Parent Access to OEC Phone Number
  - 9. Photo ID
  - 10. Requests for Information
  - 11. Notification of Change

- Qualifications of Applicant and Provider 19a-87b-6**
- 12. Awareness of/Understanding of Regulations
  - 13. Medical Statement-Exp. Date 8/30/2025
  - 14. First Aid Certificate-Exp. Date 6/1/2024
  - 15. CPR Certificate- Exp. Date 6/1/2024
  - 16. Judgment

- Members of the Household 19a-87b-7**
- 17. Medical Statement
  - 18. Household Environment

- Qualifications of Staff 19a-87b-8**
- 19. Substitute/Assistant (Y/N)  Y
  - 20. Emergency Caregiver

- Comprehensive Background Check 19a-87b-8a**
- 21. Background Check(s)

- Physical Environment 19a-87b-9**
- 22. Clean/Sanitary Environment
  - 23. Freedom of Hazards
  - 24. Harmful Substances/Materials Inaccessible
  - 25. Bio-contaminants Disposed Safely
  - 26. Safe Storage of Flammables
  - 27. Safe Door Fasteners
  - 28. Electrical Safety

- 29. Safe Exits
- 30. Basement Supervision (Y/N)  N
- 31. Stairways: Protected/Handrails
- 32. Emergency Plan
- 33. Emergency Evacuation Drills-Quarterly/Log
- 34. Smoke Detectors
- 35. Carbon Monoxide Detector
- 36. Fire Extinguisher- at least 5 lb. ABC/Installed
- 37. Auxiliary Heating System (Y/N) Type: Public Approved (Y/N)
- 38. Safe Storage of Weapons and Ammunition
- 39. Safe Space - Sufficient  
 Indoor  Outdoor
- 40. Body of Water (Y/N) Type: Public Barrier/Fence (4ft)
- 41. Hot Tubs- Locked/Inaccessible
- 42. Ventilation/Light - Temperature- 65°F
- 43. Window Safety
- 44. Washing/Toileting/Sewage/Garbage Facilities
- 45. Adequate and Safe Water: Public Approved
- 46. Water Temperature 60°-120°F
- 47. Pasteurization of Milk Supply
- 48. Working Telephone/Emergency Numbers Posted
- 49. Safe Transportation-Registered/Insured/Restraints
- 50. First Aid Supplies
- 51. Pets: (Y/N) Type: Public Rabies Certificate(s)
- 52. Smoking Prohibited

- Responsibilities of Provider 19a-87b-10**
- 53. Enrollment Form
  - 54. Child Health Record
  - 55. Immunizations
  - 56. Emergency Permission
  - 57. Authorized Release
  - 58. Field Trips/Transportation Permission- To/From School
  - 59. Swimming Permission
  - 60. Incident Log
  - 61. Confidentiality
  - 62. Meeting the Child's Needs
  - 63. Sufficient Play Equipment
  - 64. Good Nutrition: Meals/Snacks/Water Available
  - 65. Handwashing
  - 66. Flexible and Balanced Written Schedule

**APPLICANTS- PLEASE NOTE:** You MAY NOT OPERATE until all requirements have been met and a license has been issued by the Agency.

(Signature of OEC Representative) <i>Robert G. Muller</i>	Date Corrections Due By: <i>11/8/22</i>	(Signature of Provider/Applicant/Substitute/Emergency Caregiver) <i>Beverly Samuels</i>
(Printed Name) <i>Robert G. Muller</i>		(Printed Name) <i>Beverly Samuels</i>

**FAMILY CHILD CARE HOME INSPECTION FORM - Page 2**

<b>Provider:</b> <u>Beverly Samuels</u>	<b>License Number:</b> <u>56350</u>	<b>Date of Inspection:</b> <u>10/25/22</u>
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- Responsibilities of Provider 19a-87b-10 (continued)**
- 67. Personal Articles: Blanket/Towel/Toilet Articles
  - 68. Proper Rest Provisions/Safe Cribs
  - 69. Individual Plan for Care (Written if Applicable)
  - 70. Cultural Differences/Special Needs/Dev. Appr. Activities
  - 71. Infant Care- Individual Attention/Held for Bottle Feedings
  - 72. Infants Placed on Back for Sleeping
  - 73. Infants Placed in Well-Const. Crib/Snug Mattress/Tight Sheet
  - 74. Crib or other Provision Free from Observable Hazards
  - 75. Infants not Swaddled
  - 76. Infants Supervised- observed minimum every 15 minutes
  - 77. Req. for Sleep Arrangements Posted/Discussed
  - 78. Diaper Changing: Frequent/Sanitary/Hand Washing/Waste Disp.
  - 79. Parent Information and Access
  - 80. Developmental Milestones-Posted
  - 81. Supervision-At all Times- Indoors/Outdoors
  - 82. Personal Schedule-Alert/Competent Attention
  - 83. Full Attention-Distractions/Employment/Socialization
  - 84. Immediate Attention
  - 85. Substitute/Emergency Caregiver Present
  - 86. Appropriate Discipline/Behavior Management
  - 87. Discuss Behavior Management Methods w/Staff/Parents
  - 88. Child Protection: Abuse/Neglect
  - 89. Notify OEC within 24 hrs.: Death/Serious Injury
  - 90. Mandated Reporting of Abuse/Neglect to DCF
- Sick Child Care 19a-87b-11**
- 91. Sick Child Care
- Night Care 19a-87b-12 (Y/N) (10pm to 5am)**
- 92. Separate Bed/Location of Bed/Appropriate Sleepwear

- Office Access, Inspections and Investigations 19a-87b-13**
- 93. Access- Immediate/Entire or Part of Facility/Records
- Administration of Medications 19a-87b-17**
- 94. Policies and Procedures for Admin of Meds
  - 95. Parent Permission for Nonprescription Topical Meds
  - 96. Notification and Documentation of Medication Error(s)
  - 97. Nonprescription Topical Meds - Stored/Labeled
  - 98. Unused/Expired Nonprescription Meds
  - 99. Documented Medication Trained Staff
  - 100. Written Authorized Prescriber/Parent Permission
  - 101. MAR Maintained
  - 102. Prescription Meds - Stored/Labeled
  - 103. Unused/Expired Prescription Meds
  - 104. Emergency Meds - Equip Labeled/Current
  - 105. Self-Administration of Meds
  - 106. Petition for Special Medication Authorization
  - 108. Policies for Finger Stick Blood Glucose Testing
  - 109. Finger Stick Blood Glucose Testing - Staff Trained
  - 110. Self Admin of Finger Stick Blood Glucose Testing
  - 111. Testing Equip & Supplies-Maintain/Labeled/Locked/Disposed
  - 112. Finger Stick Blood Glucose Testing Records
  - 113. Parent Notification of Test Results
- Additional Violations**
- 114. Consent Order/Negotiated Corrective Action Plan N/A

**Discussions/Comments:**

#48 Observed emergency numbers posted to not include all children enrolled in the program.

#54 Observed (2) children with diagnosed asthma to have "rescue meds required at childcare setting" left blank; Observed (1) child with diagnosed allergy have "rescue meds required at childcare setting" left blank.

**APPLICANTS- PLEASE NOTE:** You MAY NOT OPERATE until all requirements have been met and a license has been issued by the Agency.

(Signature of OEC Representative) <u>Rebecca Gruelle</u>	Date Corrections Due By: <u>11/8/22</u>	(Signature of Provider/Applicant/Substitute/Emergency Caregiver) <u>Beverly Samuels</u>
(Printed Name) <u>Rebecca Gruelle</u>		(Printed Name) <u>BEVERLY SAMUELS</u>

**SUPPLEMENTAL REPORT OF INSPECTION**

Name of Program/Provider: Beverly Samuels License # 50350 Date: 10/25/22

Observations/Corrections needed:

#66 Observed no documentation of a flexible + balanced written daily schedule.

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: Rebecca Cruelles  
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Beverly Samuels  
(Person in Charge)

OEC BY: 11/8/22