

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

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Future Foundations Date: 1/11/23 Time: 9:05 AM  
Location Address: 21 Fern Dr Torrington Telephone #: 800 489 7222  
e-mail address: ffcc.director@gmail.com License #: 16203 Expiration Date: 3/31/26  
Capacity: 68/31 # of Children Present: 28 # of Staff Present: 9

**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: N/A

Purpose of visit: Self-report case 2023-3

Observations/Corrections needed:

⑤ 19a-79-3a(b)(8)(A) - Administration - Managing Child behavior - Staff failed to appropriately manage a child's behavior when she placed him in a locker for 2 minutes as a form of punishment.

⑤ 19a-79-4a(c)(4)(D) - Staffing - Supervision - Staff failed to supervise a child when he was placed in a locker for about 2 minutes

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: [Signature]  
(OEC Representative)  
Lauren Hull

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 1/25/23

Signature: [Signature]  
(Person in Charge)  
Melissa Yorker