

2023-426

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

**SUPPLEMENTAL REPORT OF INSPECTION**

Name of Program/Provider: Stork Club - Mendocino Date: 5/18/23 Time: 9:30 am

Location Address: 186 POMEROY Ave - Mendocino CA 950 Telephone #: 203-235-8461

e-mail address: StorkClub@a9mail.com License #: 13130 Expiration Date: 1/31/26

Capacity: 69/28 # of Children Present: 34 # of Staff Present: 8

**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: Complaint/Investigation - 2023-426 - Self Report

Observations/Corrections needed:

Pic Amber Disdiel - Director, Amanda Hammers - Corporate Personnel  
(NS) 19a-79-3a(b)(7) - Administrative - Annual training / orientation -  
(S) 19a-79-3a(d)(2) Administrative - Policies - Procedures - Staff did  
not adhere to the program's discipline policy when she was observed by  
another staff person hitting a child in the mouth after child attempted  
to bite another child.

(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: 6/4/23

Signature: Valecia Williams  
(OEC Representative)  
Print Name: Valecia Williams  
Signature: \_\_\_\_\_  
(Person in Charge)  
Print Name: Amber Disdiel