

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Julian Gordon Date: 6/1/23 Time: 12:25 pm
Location Address: 1146b Fairfield Ave. Bridgeport Telephone #: 203-726-7304
e-mail address: shg2011crystal@yahoo.com License #: 54995 Expiration Date: 8/31/26
Capacity: 6+3 # of Children Present: 3/0/18 # of Staff Present: 0

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 5/25/23 - Supervision.

Observations/Corrections needed:

19a-87b-6(e) Judgement - Provider left ③ children in attendance with an ~~up~~ ^{to} unapproved staff when she left the daycare to use the bathroom in the downstairs daycare

19a-87b-8(a) Qualification of Staff - Provider left ③ children in the supervision of an unapproved staff; Adult present stated she was there to clean and stated Julian went downstairs to her mother's.

19-87b-10(i) Supervision - Provider left ③ children in attendance with an unapproved staff while she left the daycare to go to the downstairs apartment

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: 6/15/23

Signature: Rebecca Guille / Alexander
(OEC Representative)
Print Name: Rebecca Guille / Alexander
Signature: Julian Gordon
(Person in Charge)
Print Name: Julian Gordon

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Julian Gordon License # 54995 Date: 6/1/23

Observations/Corrections needed:

Discussed - Provider may not leave the daycare or children with unapproved staff; Provider must supervise children at all times.

Provider did not have (lost key) to ① bedroom. Daughter brought key & access to bedroom was granted. Discussed having another key made (plus backup) so access will always be granted immediately.

Follow up inspection required.

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Signature: [Signature] / Alexander (OEC Representative) Print Name: Rebecca Melles / Alexander Rodriguez

CORRECTIVE PLAN SHALL BE RETURNED TO

OEC BY: 6/15/23

Signature: [Signature] (Person in Charge) Print Name: Julian Gordon