

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Rosa Almazan Date: 7/12/23 Time: 9:00AM
Location Address: 82 Tait Rd, Trumbull Telephone #: 203-400-1232
e-mail address: rosalove@gmail.com License #: 57674 Expiration Date: 7/31/26
Capacity: 6⁺³ # of Children Present: 7 # of Staff Present: 2

Consent to Inspect I agree to allow the Office of Early Childhood to have access to and inspect this facility and all
Family Child Care Home child care records as required by Family Child Care Home Regulations.
Provider/Applicant/Substitute's Signature: Rosa Almazan

Purpose of visit: 2023-582

Observations/Corrections needed:

(NS) 19a-87b-9 - Requirements for the Physical Environment. There is insufficient evidence to support that the facility and equipment pose a health hazard to children.

(NS) 19a-87b-6 - Qualifications of Provider. There is insufficient evidence to support that Provider does not have the personal qualities appropriate for child care.

(S) 19a-87b-10 - Responsibilities of the provider. When observed 3 children enrolled missing Enrollment records

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: 7/26/23

Signature: _____

Print Name: Carl Albizu
(OEC Representative)

Signature: Rosa Almazan

Print Name: Rosa Almazan
(Person in Charge)

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Rosa Almazan License # 57674 Date: 7/12/23

Observations/Corrections needed:

(S) 19a-87b-10(b)(1) - Enrollment - observed 3 children enrolled missing enrollment forms.

(S) 19a-87b-10(b)(2) - Child Health record - Observed 3 children enrolled missing health records

(S) 19a-87b-10(b)(2)(A)(v) Immunizations - Observed 3 children enrolled missing immunizations records.

(S) 19a-87b-10(b)(3)(B) - Emergency Permissios - observed 3 children enrolled missing Emergency permission forms.

(S) 19a-87b-10(b)(3)(A) - Authorize Release - observed 3 children enrolled missing authorize release forms.

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Operators/providers are required by regulations and statutes to be in compliance at all times.

Signature: 

Print Name: Carlos Albizu
(DEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Rosa Almazan
(Person in Charge)

OEC BY: 7/26/23

Print Name: Rosa Almazan