

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

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Grace Daycare + Learning Center Date: 7/19/23 Time: 12:30

Location Address: 369 Washington Blvd. Stamford Telephone #: 203 504-8523

e-mail address: fritz@gracedaycares.com License #: 70396 Expiration Date: 3/31/26

Capacity: 104/64 # of Children Present: 58 # of Staff Present: 14

**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: Investigation 2023-618

Observations/Corrections needed:

(P) 19a-79-3a(d)(5) - Implement policies, pending completion of interviews

(P) 19a-79-4a(c)(4)(D) - Supervision - pending completion of interviews

Other:

(S) 19a-79-4a(b) Background checks - operator failed to have current background checks completed for seven new staff members

(S) 19a-79-3a(a) Ensure health + safety - operator failed to <sup>ensure</sup> have the safety of children when 7 new staff were allowed to work with children without having a completed background check.

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: Karen Hicks  
(OEC Representative)

Print Name: Karen Hicks

Signature: Fritz Chery  
(Person in Charge)

Print Name: Fritz Chery

CORRECTIVE PLAN SHALL BE RETURNED TO

OEC BY: 7/20/23 + 8/2/2023

immediate correction for 19a-79-3a(a)