



DIVISION OF LICENSING

450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103

Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552

Email: oeclicensing@ct.gov Website: www.ctoec.org

FAMILY CHILD CARE HOME – FOLLOW UP/PARTIAL

Provider	NORMA QUINTANA			License Number	DCFH.55507	Date of Inspection	01/09/2024
				Expiration Date	1/31/2027	Time of Inspection	09:10 AM
Address	1965 CHOPSEY HILL RD BRIDGEPORT CT 06606-1962			Telephone	(203) 345-1349	Regular Capacity	6
				Days and Hours	MON-FRI 7.00AM-5:30PM	School Age Capacity	3
# Children Present	1	# Under 18 months present	0			Summer Care	Open
Purpose of Inspection	Follow Up to Inspection dated 8/15/23			Name of Inspector	Rebecca LaRosa		
Provider's Email	norma.quintana79@gmail.com			Inspector's Email	rebecca.larosa@ct.gov		

CONSENT TO INSPECT: I agree to allow the Commissioner or an authorized representative to have access to and inspect the facility and child care records during home inspections as required by Regulations Section 19a-87b-5(h).

Signature of Provider/Applicant/Substitute/Emergency Caregiver

Violations

Statute and/or Regulation	Description	Comments
[19a-87b-10(b)(2)]	054-Child Health Record	Failed to maintain complete child health record(s) when 1 child's health record was missing tb risk assessment and chronic disease assessment.
[19a-87b-10(b)(2)(A)(v) and/or 19a-87b-10(1)]	055-Immunizations	Failed to maintain complete immunization record(s) when 2 children did not have documentation of a flu vaccine.

--	--	--

Other Findings-In Compliance

Statute and/or Regulation	Description	Comments
[19a-87b-10(a)]	004-Capacity	
[19a-87b-5(c)]	005-Nontransferability	
[19a-87b-5(e)]	006-Infant/Toddler Restriction	
[19a-87b-5(f)(2)]	007-License Posted	
[19a-87b-5(g)]	008-Access to OEC Phone Number	

[19a-87b-5(h)]	009-Photo ID	
[19a-87b-5(i)]	010-Requests for Information	
[19a-87b-5(j)]	011-Notification of Change	




YES/NO: Yes **WERE VIOLATIONS CITED DURING THIS VISIT?**

Discussions:

Comments:

NOTE: Items left blank on this form were not monitored during this visit.
 Only the regulations marked as compliant or non-compliant were monitored or discussed.

APPLICANTS: You MAY NOT OPERATE until all requirements have been met and a license has been issued by the Agency.

 (Signature of OEC Representative)	 (Signature of OEC Representative)	DATE CORRECTIONS DUE BY: 01/23/2024	 (Signature of Person in Charge)
Rebecca LaRosa (Printed Name)	 (Printed Name)		NORMA QUINTANA (Printed Name)