

Initial Unannounced Full/Partial Follow-up Location Change Investigation Other 2nd consent order visit

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: YWCA of New Britain Child care CTR Date: 11-16-23 Time: 12

Location Address: 19 Franklin Sq., New Britain Telephone #: 860-225-4681

e-mail address: a.sousa@ywcaneubritain.org License #: 13507 Expiration Date: 7-30-26

Capacity: 428 # of Children Present: 154 # of Staff Present: 35

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: 2nd consent order visit

Observations/Corrections needed:

NS #8 - observed four quarterly visits completed with written evaluations with recommendations and operator implementation

NS #9 - observed education consultant bi-monthly visits with written verification of visits and written evaluations with recommendations and implementation. Discussed bi-monthly visits continue until Dec 2024.

NS #10 - was completed at 3-20-23 visit

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: _____

Signature: [Signature]
(OEC Representative)

Print Name: Kevin Eddy

Signature: [Signature]
(Person in Charge)

Print Name: Anne Sousa