



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 SUPPLEMENTAL INSPECTION

Provider	XIOMY A AUQUI DE LA CRUZ		License Number	DCFH.57631	Date of Inspection	02/08/2024
			Expiration Date	3/31/2026	Time of Inspection	09:53 AM
Address	287 COLLINS ST HARTFORD CT 06105-1550		Telephone	(202) 760-7091	Regular Capacity	6
			Days and Hours	M-Sun 6A.M. - 10P.M.	School Age Capacity	3
# Children Present	5	# Under 18 months present			1	Summer Care
Purpose of Inspection	CO Monitoring		Name of Inspector	Carlos Albizu		
Provider's Email	xiomyaylinauqui@gmail.com		Inspector's Email	carlos.albizu@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
[-]	000 No Violations	No violations were cited during this inspection

--	--	--

Other Findings-In Compliance

Statute and/or Regulation	Description	Comments
[19a-87b-5(g)]	008-Access to OEC Phone Number	Provider is in compliance with furnishing the parents with the telephone number of the agency
[19a-87b-6(a)]	012-Awareness of/Understanding of Regulations	Provider has demonstrated an awareness and/or understanding of the regulations. Substitutes have signed the attestation that they have read the regulations.
[19a-87b-8, 19a-87b-8(d) and/or 19a-87b-8(e)]	019-Substitute/Assistant	Provider assured that all substitutes know the names or nicknames of the children enrolled.
[19a-87b-10(b)(1)]	053-Enrollment Form	Provider is in compliance maintaining child enrollment form(s)
[19a-87b-10(f)(1) and/or 19a-87b-10(f)(2)]	072-Infants Placed on Back for Sleeping	The Provider ensures that she or the substitute go upstairs and check on infants every 15 minutes. Provider ensures that she does not utilize a monitoring device within effective sight or sound of such children.

<p>[19a-87b-10(k)(3)]</p> <p>[-]</p>	<p>090-Report of Abuse/Neglect</p> <p>114-CO/NCAP Compliance Violations</p>	<p>Provider has posted the DCF phone number and understands that she must report suspected child abuse, neglect or imminent risk of serious harm of any child to DCF within 12 hours.</p> <p>Provider is in compliance with conditions of the consent order</p>
--------------------------------------	---	---

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



Discussions:

Comments:

8a of CO is in compliance.
8b of CO is in compliance.
9a of CO is in compliance.
9b of CO is in compliance.
9c of CO is in compliance.
10a of CO is in compliance.
11a of CO is in compliance.
11b of CO is in compliance.
12a of CO is in compliance.
12b of CO is in compliance.
13 of CO is in compliance.
14a of CO is in compliance.
14b of CO is in compliance.
15 of CO is in compliance.
17 of CO is in compliance.

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:	 (Signature of Person in Charge)
Carlos Albizu (Printed Name)	 (Printed Name)		XIOMY A AUQUI DE LA CRUZ (Printed Name)