



DIVISION OF LICENSING

450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103

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FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	ELSA QUISPE		License Number	DCFH.56582	Date of Inspection	03/27/2024
			Expiration Date	1/31/2027	Time of Inspection	12:30 PM
Address	158 DUDLEY RD WETHERSFIELD CT 06109-2878		Telephone	(860) 904-3428	Regular Capacity	6
			Days and Hours	Monday-Friday 6:00AM-5:30PM	School Age Capacity	3
# Children Present	1	# Under 18 months present	1	Summer Care	Open	
Purpose of Inspection	2-3 Month Partial Inspection for Safe Sleep Violation Cited During Full Inspection		Name of Inspector	Melina Perez		
Provider's Email	quisasle62@hotmail.com		Inspector's Email	melina.perez@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

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Other Findings-In Compliance

Statute and/or Regulation	Description	Comments
[19a-87b-10(a)]	004-Capacity	
[19a-87b-5(e)]	006-Infant/Toddler Restriction	
[19a-87b-10(f)(1) and/or 19a-87b-10(f)(4)]	073-Infants Placed in Safe Crib/Snug Mattress/Tight Sheet	

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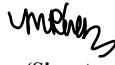


YES/NO: No	WERE VIOLATIONS CITED DURING THIS VISIT?
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Discussions:

#73 - Compliance was observed during today's partial inspection for safe sleep violation previously cited during full inspection. Provider stated she is now using a pack n play to nap the infant. The pack n play was observed to have no mattress inserts and no observable hazards of any kind.
 Sleep sacks, pamphlet, and magnet were also provided during today's visit. Today's visit was conducted completely in Spanish

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:	 (Signature of Person in Charge)
Melina Perez (Printed Name)	(Printed Name)		ELSA QUISPE (Printed Name)