



Connecticut Office of
Early Childhood

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 INSPECTION

Provider	TINA MADER				License Number	DCFH.56243	Date of Inspection	04/15/2024
					Expiration Date	1/31/2025	Time of Inspection	09:30 AM
Address	275 KIMBERLY LN WATERTOWN CT 06795-3154				Telephone	(408) 888-8987	Regular Capacity	6
					Days and Hours	7:00- 5:30 MONDAY - FRIDAY	School Age Capacity	3
Is this a Change of Address?	Yes?		No?	X			Summer Care	Open
New Address					Type of Inspection	UNANNOUNCED INSPECTION - FULL		
	# of Infants - Toddlers Present	1	# of Total Children Present	6	Inspector's Name	Alexandra Rodriguez		
Provider's Email	maderfamily2@gmail.com				Inspector's Email	alexandra.rodriguez@ct.gov		
Key: Compliant = X Non-Compliant = O	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/Substitute/Applicant							

TERMS OF REGISTRATION 19a-87b-5

X	4. Capacity		
X	5. Non-transferability of license	Pending?	
X	6. Infant/Toddler Restriction		
X	7. License Posted		
X	8. Parent Access to OEC Phone Number		
X	9. Photo ID		
X	10. Requests for Information		
X	11. Notification of Change		

QUALIFICATION OF PROVIDER 19a-87b-6

X	12. Awareness of, Understanding of Regulations	
X	13. Medical statement	
	Expiration date:	
	03/18/2026	
X	14. First Aid Certificate	
	Expiration date:	
	03/09/2026	

X	15. CPR Certificate		
	Expiration date:		
	03/09/2026		
X	16. Judgment		
MEMBERS OF THE HOUSEHOLD 19a-87b-7			
X	17. Medical Statement		
X	18. Household Environment		
QUALIFICATIONS OF STAFF 19a-87b-8			
X	19. Substitute or Assistant	Y/N	
	Type of Staff :	N	
X	20. Emergency Caregiver		
COMPREHENSIVE BACKGROUND CHECK 19a-87b-8a			
X	21. Background Check(s)		
PHYSICAL ENVIRONMENT 19a-87b-9			
X	22. Clean/Sanitary Environment		
X	23. Freedom of Hazards		
X	24. Harmful Substances/Materials Inaccessible		
X	25. Bio-contaminants Disposed Safely		
X	26. Safe Storage of Flammables		
X	27. Safe Door Fasteners		
X	28. Electrical Safety		
X	29. Safe Exits		
X	30. Basement Supervision	Y/N	
		Y	
	Used for Care ?	Y/N	
		Y	
X	31. Stairways - Protected, Handrails		
X	32. Emergency Plan		

X	33. Emergency Evacuation Drills - Quarterly/Log			
X	34. Smoke Detectors			
X	35. Carbon Monoxide Detector			
X	36. Fire Extinguisher- 5 lb. ABC/Installed			
X	37. Auxiliary Heating System N	Appvd?		
	Type?			
X	38. Safe Storage of Weapons and Ammunition			
X	39. Safe Space- Sufficient			
	Indoors			Outdoors
X	40. Body of Water- Type: Pool	Y/N		
		Y		
	Barrier?	Y		
X	41. Hot Tubs- Locked - Inaccessible	Y/N		
		N		
X	42. Ventilation, Light and Temperature- 65°			
X	43. Window Safety			
X	44. Washing Toileting, Sewage Garbage Facilities			
X	45. Adequate and Safe Water -			
	Type of System:			
	Public Water			
X	46. Water Temperature- 60°-120°			
X	47. Pasteurization of Milk Supply			
X	48. Working Phone, Emergency Numbers Posted			
X	49. Safe Transportation Registered, Insured, Restraints			
X	50. First Aid supplies			
X	51. Pet protection	Type: One dog		
	Pets?	Y		
	Rabies Certs?	Y		
X	52. Smoking Prohibited			
RESPONSIBILITIES OF PROVIDER 19a-87b-10				
X	53. Enrollment Form			

X	54. Child Health Record	
X	55. Immunizations	
X	56. Emergency Permission	
X	57. Authorized Release	
X	58. Field Trip and Transportation Permission-To/From School	
X	59. Swimming Permission	
X	60. Incident Log	
X	61. Confidentiality	
X	62. Meeting the Child's Needs	
X	63. Sufficient Play Equipment	
X	64. Good Nutrition- Meals/Snacks, Water Available	
X	65. Handwashing	
X	66. Flexible and Balanced Written Schedule	
X	67. Personal Articles- Blanket, Towel, Toilet Articles	
O	68. Proper Rest Provisions – Safe Cribs	Failed to ensure cribs comply with current CPSC standards. Observed one crib in daycare manufactured in 2010.
X	69. Individual Plan for Care (Written if Applicable)	
X	70. Cultural Differences, Sp. Needs, Dev. Appr. Activities	
X	71. Infant Care, Indiv Attention, Held for Bottle Feedings	
X	72. Infants Placed on Back for Sleeping	
X	73. Infants Placed in Crib, Well constructed, Snug Mattress, Tight Sheet	

X	74. Crib or Other Provision Free from Observable Hazards	
X	75. Infants not Swaddled	
X	76. Infants Supervised – minimum every 15 minutes	
X	77. Req. for Sleep Arrangements Posted/Discussed	
X	78. Diaper Changing- Frequent, Sanitary, Handwashing, Waste Disposal	
X	79. Parent Information and Access	
X	80. Developmental Milestones – Posted	
X	81. Supervision- at all Times, Indoors, Outdoors	
X	82. Personal Schedule- Alert, Competent Attention	
X	83. Full Attention - Distractions, Employment, Socialization	
X	84. Immediate Attention	
X	85. Substitute – Emergency Caregiver Present	
X	86. Appr. Discipline, Behavior Management	
X	87. Discuss Beh. Management Methods w/Staff and Parents	
X	88. Child Protection- Abuse/Neglect	
X	89. Notify OEC within 24 hrs. - Death or Serious Injury	
X	90. Mandated Reporting Abuse or Neglect to DCF	
SICK CHILD CARE 19a-87b-11		
X	91. Sick Child Care	
IS NIGHT CARE PROVIDED? N NIGHT CARE 19a-87b-12 (10pm to 5am)		
X	92. Separate Bed- Location of Bed - Appropriate Sleepwear	

OFFICE ACCESS, INSPECTIONS AND INVESTIGATIONS 19a-87b-13

X	93. Access- Immediate, Entire or Part of Facility and Records	
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Are Medications Administered?

N

ADMINISTRATION OF MEDICATIONS 19a-87b-17

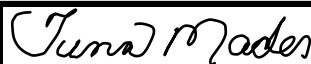
X	94. Policies and Procedures for Admin of Meds	
X	95. Parent Permission for Nonprescription Topical Meds	
X	96. Notification - Documentation of Med Error(s)	
X	97. Nonprescription Topical Meds- Stored/Labeled	
X	98. Unused - Expired Nonprescription Meds	
X	99. Documented Medication Trained Staff	
X	100. Written Auth Prescriber/Parent Permission	
X	101. MAR Maintained	
X	102. Prescription Meds – Stored/Labeled	
X	103. Unused/Expired Prescription Meds	
X	104. Emergency Meds- Equip. Labeled/Current	
X	105. Self-Admin. Of Meds	
X	106. Petition for Special Medication Authorization	

Child with diabetes enrolled?

N

MONITORING OF DIABETES 19a-87b-18

X	108. Policies for Finger Stick Blood Glucose Testing	
X	109. Finger Stick Blood Glucose Testing - Staff Trained	
X	110. Self Admin of Finger Stick Blood Glucose Testing	
X	111. Testing Equip. & Supplies- Maintain, Labeled, Locked, Disposed	
X	112. Finger Stick Blood Glucose Testing Records	

X	113. Parent Notification of Test Results		
ADDITIONAL VIOLATIONS			
	114. Consent Order - Negotiated Corrective Action Plan	N/A?	
		X	
YES or NO? Yes		WERE VIOLATIONS CITED DURING THIS VISIT?	
<u>DISCUSSIONS:</u> Discussed with provider her future plans to move out of state. Provider understands she'll need to notify agency with a written notice when she plans to withdraw license. Discussed with provider CSPC crib standards, cribs in compliance are to be manufactured after June 28, 2011. Provided provider with hard copy of cspc crib standards.			
<u>COMMENTS:</u>			
<u>NOTE:</u> Any 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.			
<u>APPLICANTS- PLEASE NOTE:</u> You <u>MAY NOT OPERATE</u> 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: 04/29/2024	 (Signature of Provider/Applicant/Substitute)
Alexandra Rodriguez (Printed Name)	(Printed Name)		TINA MADER (Printed Name)