



FAMILY CHILD CARE HOME – INVESTIGATION

Provider	AISHA ROACHER		License Number	DCFH.56783	Date of Inspection	05/23/2024
			Expiration Date	5/31/2028	Time of Inspection	10:10 AM
Address	22 RANSON ST APT 1 STAMFORD CT 06902-6132		Telephone	(203) 898-0165	Regular Capacity	6
			Days and Hours	MONDAY - FRIDAY 7:30AM TO 5:30 PM	School Age Capacity	3
# Children Present	4	# Under 18 months present	3	Summer Care	Open	
Purpose of Investigation	Self report case 2024-422		Name of Inspector	Lauren Hull		
Provider's Email	SHERRYSMUNCHKINS@YAHOO.COM		Inspector's Email	lauren.hull@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

SUBSTANTIATED VIOLATIONS OF REGULATIONS

VIOLATION	Statute - Regulation [19a-87b-5(e)]	Description: 006-Infant/Toddler Restriction
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Failed to maintain infant/toddler restriction when 3 children under the age of 18 months were present with the provider.

VIOLATION	Statute - Regulation	Description:
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VIOLATION	Statute - Regulation	Description:
NOT SUBSTANTIATED AND/OR PENDING VIOLATIONS OF REGULATIONS		
STATUS:	Statute - Regulation	Description:
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STATUS:	Statute - Regulation	Description:

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

(This area is currently blank for discussions and comments.)

NOTE: Only the regulations marked as pending, substantiated or non-substantiated were monitored or discussed.

 (Signature of OEC Representative)	 (Signature of OEC Representative)	DATE CORRECTIONS DUE BY: 06/06/2024	 (Signature of Person in Charge)
Lauren Hull (Printed Name)	 (Printed Name)		AISHA ROACHER (Printed Name)