



FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

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| Provider | JENNIFER CONSUEGRA | | License Number | DCFH.56580 | Date of Inspection | 05/28/2024 |
| | | | Expiration Date | 1/31/2027 | Time of Inspection | 09:30 AM |
| Address | 118 ROCKWELL AVE BRISTOL CT 06010-5942 | | Telephone | (203) 709-0944 | Regular Capacity | 6 |
| | | | Days and Hours | Monday-Friday 6AM-6PM | School Age Capacity | 0 |
| # Children Present | 1 | # Under 18 months present | 0 | Summer Care | Open | |
| Purpose of Inspection | Follow-Up For Safe Sleep Violation Cited During Full Inspection | | Name of Inspector | Melina Perez | | |
| Provider's Email | happystarsdaycare@aol.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

Regulatory Violations

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| Statute and/or Regulation: [-] | Description: 000 No Violations |
| No violations were cited during this inspection | |
| Statute and/or Regulation: | Description: |
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| Other Findings-Regulations In Compliance | |
| Statute and/or Regulation: [19a-87b-10(a)] | Description: 004-Capacity |
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| Statute and/or Regulation: [19a-87b-5(e)] | Description: 006-Infant/Toddler Restriction |
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| Statute and/or Regulation: [19a-87b-10(f)(1) and/or 19a-87b-10(f)(4)] | Description: 073-Infants Placed in Safe Crib/Snug Mattress/Tight Sheet |
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| Statute and/or Regulation: | Description: |
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| Statute and/or Regulation: | Description: |
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| Statute and/or Regulation: | Description: |
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| YES/NO: No | WERE VIOLATIONS CITED DURING THIS VISIT? |
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DISCUSSIONS/COMMENTS

#73 - During today's follow-up inspection a tight fitted sheet was observed to be on the pack n play mattress that is used to nap an infant. Provider was observed to be in compliance with safe sleep violation during today's visit.

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.

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|  (Signature of OEC Representative) |  (Signature of OEC Representative) | DATE CORRECTIONS DUE BY: |  (Signature of Person in Charge) |
| Melina Perez (Printed Name) | (Printed Name) | | JENNIFER CONSUEGRA (Printed Name) |