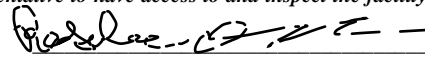


**FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION**

<b>Provider</b>	TAMARA MILLER			<b>License Number</b>	DCFH.56653	<b>Date of Inspection</b>	06/05/2024
				<b>Expiration Date</b>	7/31/2027	<b>Time of Inspection</b>	01:29 PM
<b>Address</b>	29 TILTON ST FL 1 NEW HAVEN CT 06511-3542			<b>Telephone</b>	(203) 497-9044	<b>Regular Capacity</b>	6
				<b>Days and Hours</b>	MON - FRI, 5:30 am - 10 pm 24 Hours Available	<b>School Age Capacity</b>	3
<b># Children Present</b>	2	<b># Under 18 months present</b>	2			<b>Summer Care</b>	Open
<b>Purpose of Inspection</b>	Partial to check safe sleep compliance.			<b>Name of Inspector</b>	Linda Johnson Moylan		
<b>Provider's Email</b>	littlerosepalace@gmail.com			<b>Inspector's Email</b>	linda.moylan@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**

<b>Statute and/or Regulation:</b> [19a-87b-10(e)]	<b>Description:</b> 071-Infant Care: Individual Attention/Held for Bottle Feedings
Failed to hold infants for bottle feedings when. An empty bottle was observed with sleeping infant.	
<b>Statute and/or Regulation:</b> [19a-87b-10(f)(3) and/or 19a-87b-10(f)(7)]	<b>Description:</b> 074-Crib or other Provision Free from Observable Hazards
Failed to ensure no items are placed with an infant in a crib or other piece of equipment designed for sleeping when empty bottle was observed in crb with sleeping infant.	
<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>Statute and/or Regulation:</b>	<b>Description:</b>
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<b>Other Findings-Regulations In Compliance</b>	
Statute and/or Regulation: [19a-87b-10(a)]	Description: 004-Capacity
Statute and/or Regulation: [19a-87b-5(c)]	Description: 005-Nontransferability

Statute and/or Regulation: [19a-87b-5(e)]	Description: 006-Infant/Toddler Restriction
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Statute and/or Regulation: [19a-87b-8, 19a-87b-8(d) and/or 19a-87b-8(e)]	Description: 019-Substitute/Assistant
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Statute and/or Regulation: [19a-87b-10(f)(1) and/or 19a-87b-10(f)(2)]	Description: 072-Infants Placed on Back for Sleeping
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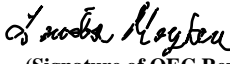
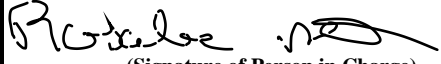
Statute and/or Regulation:	Description:
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YES/NO: Yes	WERE VIOLATIONS CITED DURING THIS VISIT?
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**DISCUSSIONS/COMMENTS**

Provider not present at the time of inspection. Rosalee Miller, substitute present. Rosalee stated Tamara was off today. Upon further questioning she stated she was there in the morning and left to run errands. Transferability of license is not allowed.

**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 Person in Charge)	DATE CORRECTIONS DUE BY: 06/19/2024
Linda Johnson Moylan (Printed Name)		TAMARA MILLER (Printed Name)