



**DIVISION OF LICENSING**  
 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103  
 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552  
 Email: [oc.licensing@ct.gov](mailto:oc.licensing@ct.gov) Website: [www.ctoec.org](http://www.ctoec.org)

**CHILD CARE CENTER/GROUP CHILD CARE HOME  
 SUPPLEMENTAL INSPECTION**

<b>Program Name</b>	CATHOLIC CHARITIES CHILD DEVELOPMENT CENTER				<b>License Number</b>	DCCC.70377	<b>Date of Inspection</b>	07/22/2024
					<b>Expiration Date</b>	10/31/2025	<b>Time of Inspection</b>	02:05 PM
<b>Address</b>	53 WADSWORTH ST  HARTFORD CT 06106-1732				<b>Telephone</b>	(860) 524-6853	<b>Total Capacity</b>	20
					<b>Days and Hours</b>	M-F 7:30-5:30	<b>Under Three Capacity</b>	0
<b>#Children Present</b>	10	<b># Under 3 Present</b>	0	<b># Staff Present</b>	2	<b>Summer Care</b>	Open	
<b>Purpose of Inspection</b>	Follow up inspection for all documentation (staff, children consultants... ) to be on license premise.				<b>Name of Inspector</b>	Johanne Dalo		
<b>Program's Email</b>	otoledo@ccaoh.org				<b>Inspector's Email</b>	johanne.dalo@ct.gov		

**Regulatory Violations**

<b>Statute and/or Regulation:</b> [-]	<b>Description:</b> 000 No Violations
No violations were cited during this inspection	
<b>Statute and/or Regulation:</b>	<b>Description:</b>
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<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>Other Findings – Regulations In Compliance</b>	
<b>Statute and/or Regulation:</b> [19a-79-4a]	<b>Description:</b> 015c-Staffing
<b>Statute and/or Regulation:</b> [19a-79-4a(h)(1) and/or 19a-79-4a(h)(2)]	<b>Description:</b> 026-Consultant Agreements/Contracts

<b>Statute and/or Regulation:</b> [19a-79-5a(a)(2)(A) through (E)and/or19a-79-6a(e)]	<b>Description:</b> 037-Child Health Records/Immunizations/TB




<b>Statute and/or Regulation:</b>	<b>Description:</b>

<b>Statute and/or Regulation:</b>	<b>Description:</b>

<b>YES/NO: No</b>	<b>WERE VIOLATIONS CITED DURING THIS VISIT?</b>
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**DISCUSSIONS/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)	<b>DATE CORRECTIONS DUE BY:</b>	 (Signature of Person in Charge)
<b>Johanne Dalo</b> (Printed Name)	 (Printed Name)		<b>Olga Toledo</b> (Printed Name)