



## FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

<b>Provider</b>	SHELLY FISHER-PARSLEY		<b>License Number</b>	DCFH.53859	<b>Date of Inspection</b>	07/29/2024
			<b>Expiration Date</b>	8/31/2025	<b>Time of Inspection</b>	10:32 AM
<b>Address</b>	319 TALMADGE RD CHESHIRE CT 06410-2909		<b>Telephone</b>	(508) 369-0701	<b>Regular Capacity</b>	6
			<b>Days and Hours</b>	M - F 7 A.M. - 5 P.M.	<b>School Age Capacity</b>	3
<b># Children Present</b>	6	<b># Under 18 months present</b>	1		<b>Summer Care</b>	Open
<b>Purpose of Inspection</b>	Follow up for violations cited at full inspection conducted on 6-14-24		<b>Name of Inspector</b>	Patty Tyburski		
<b>Provider's Email</b>	farvy4ever@juno.com		<b>Inspector's Email</b>	patricia.tyburski@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> [-]	<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-87b-10(a)]	<b>Description:</b> 004-Capacity
<b>Statute and/or Regulation:</b> [19a-87b-5(e)]	<b>Description:</b> 006-Infant/Toddler Restriction

<b>Statute and/or Regulation:</b> [19a-87b-10(c)(5)]	<b>Description:</b> 068-Proper Rest Provisions/Safe Cribs
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Compliance was found with safe sleep/cribs when insert is no longer in pack and play. Pack and play for infant has tight fitting sheet and mattress.

<b>Statute and/or Regulation:</b> [19a-87b-10(i)]	<b>Description:</b> 081-Supervision-At All Times, Indoors/Outdoors
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Children had activities available upstairs while infant slept in the walk out basement. Provider stated she can hear baby in the basement with door closed.

<b>Statute and/or Regulation:</b>	<b>Description:</b>
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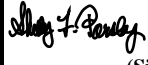
<b>Statute and/or Regulation:</b>	<b>Description:</b>
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<b>YES/NO:</b> No	<b>WERE VIOLATIONS CITED DURING THIS VISIT?</b>
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**DISCUSSIONS/COMMENTS**

Discussed with provider that infant is too big for bouncy seat she was in dying follow up. Child wa able to Len over and place her hands on the ground. High chair or bigger seat should be used to adjust to her size as she gets bigger.

**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)	DATE CORRECTIONS DUE BY:	 (Signature of Person in Charge)
<b>Patty Tyburski</b> (Printed Name)	 (Printed Name)		<b>SHELLY FISHER-PARSLEY</b> (Printed Name)