



**DIVISION OF LICENSING**  
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 Email: [oeclicensing@ct.gov](mailto:oeclicensing@ct.gov) Website: [www.ctoec.org](http://www.ctoec.org)

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

<b>Program Name</b>	KID'S CONNECTION II				<b>License Number</b>	DCCC.15949	<b>Date of Inspection</b>	07/30/2024
					<b>Expiration Date</b>	9/30/2025	<b>Time of Inspection</b>	08:24 AM
<b>Address</b>	140 PLEASANT AVE  EAST HAVEN CT 06512-1063				<b>Telephone</b>	(203) 467-9400	<b>Total Capacity</b>	42
					<b>Days and Hours</b>	FROM: 8:00am TO: 5:00PM; PM HOURS FROM: TO:	<b>Under Three Capacity</b>	21
<b>#Children Present</b>	11	<b># Under 3 Present</b>	7	<b># Staff Present</b>	4	<b>Summer Care</b>	Open	
<b>Purpose of Inspection</b>	Follow up to complete full inspection: child files, med admin outline and local health				<b>Name of Inspector</b>	Fil Montanye		
<b>Program's Email</b>	ricci.donna@gmail.com				<b>Inspector's Email</b>	filomena.montanye@ct.gov		

**Regulatory Violations**

<b>Statute and/or Regulation:</b>	[19a-79-10(c)(2) and/or 19a-79-4a(c)(6)]	<b>Description:</b>	110-Under Three Endorsement: Ratio: 1 Staff to 4 Children
Failed to maintain proper staff/child ratios of 1staff to 4 children while doing head counts 5 toddlers were observed with 1 staff			
<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-79-2a(c)(7)]	<b>Description:</b> 001-Local Health Inspection
<b>Statute and/or Regulation:</b> [19a-79-5a(a)(1)(A) through (C)]	<b>Description:</b> 032-Enrollment Information

<b>Statute and/or Regulation:</b> [19a-79-5a(a)(1)(D)(i)]	<b>Description:</b> 033-Emergency Medical Permission

<b>Statute and/or Regulation:</b> [19a-79-5a(a)(1)(D)(ii)]	<b>Description:</b> 034-Authorized Released Permission




<b>Statute and/or Regulation:</b> [19a-79-5a(a)(1)(D)(iii)]	<b>Description:</b> 035-Field Trip Permission

<b>YES/NO:</b> Yes	<b>WERE VIOLATIONS CITED DURING THIS VISIT?</b>
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<b>DISCUSSIONS/COMMENTS</b>
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!) 1 child file missing documentation of flu shot  
 2) 1 child file missing enrollment date

**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>  <b>08/13/2024</b>	 (Signature of Person in Charge)
<b>Fil Montanye</b> (Printed Name)	 (Printed Name)		<b>Deborah balisciano</b> (Printed Name)