



FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	SONIA FELIZ DE CARLOS			License Number	DCFH.57871	Date of Inspection	08/12/2024
				Expiration Date	8/31/2027	Time of Inspection	01:10 PM
Address	9 4TH ST DANBURY CT 06810-5707			Telephone	(732) 430-6065	Regular Capacity	6
				Days and Hours	Monday- Friday 7am-5:30pm	School Age Capacity	3
# Children Present	6	# Under 18 months present	4			Summer Care	Open
Purpose of Inspection	Follow up			Name of Inspector	Janarish Lopez		
Provider's Email	Saf0307@outlook.es			Inspector's Email	janarish.lopez@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).

Sonia Feliz

Signature of Provider/Applicant/Substitute/Emergency Caregiver

Regulatory Violations

Statute and/or Regulation:	[19a-87b-8a]	Description:	021-Background Check
Failed to maintain compliance, 1 household member doesn't have a current background check.			
Statute and/or Regulation:	[19a-87b-10(b)(2)]	Description:	054-Child Health Record
Failed to maintain current child health record for 1 child			
Statute and/or Regulation:	[19a-87b-10(b)(2)(A)(v) and/or 19a-87b-10(l)]	Description:	055-Immunizations
Failed to maintain current immunization record for 1 child			
Statute and/or Regulation:	[19a-87b-10(e)]	Description:	071-Infant Care: Individual Attention/Held for Bottle Feedings
Failed to hold infants for bottle feedings observed an infant being placed in a rocker and being given the bottle to hold.			
Statute and/or Regulation:	[19a-87b-10(i)]	Description:	081-Supervision-At All Times, Indoors/Outdoors
Failed to provide supervision at all times, observed provider was outside when the inspector to walking to the door while substitute was indoor with 4 children under 18months			

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Other Findings-Regulations In Compliance	
Statute and/or Regulation: [19a-87b-10(a)]	Description: 004-Capacity
Statute and/or Regulation: [19a-87b-7(a)]	Description: 017-Medical Statement

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-9(d)(5)]	Description: 033-Emergency Evacuation Drills-Quarterly
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Statute and/or Regulation: [19a-87b-10(b)(1)]	Description: 053-Enrollment Form
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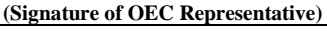
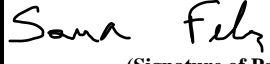
Statute and/or Regulation: [19a-87b-10(b)(3)(B)]	Description: 056-Emergency Permission Form
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YES/NO: Yes	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

Discussed proper capacity and supervision with children while indoors and outside infant bottle feeding.

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: 08/26/2024	 (Signature of Person in Charge)
Janarish Lopez (Printed Name)	 (Printed Name)		SONIA FELIZ DE CARLOS (Printed Name)