

Connecticut Office of Early Childhood
Division of Licensing
 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103
 Phone (800)282-6063 www.ctoec.org Fax (860)326-0552

Initial Unannounced Full/Partial Follow-up Location Change Investigation Other _____

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Trumbull Loves Children - Daniels Farms Date: 11/1/24 Time: 3:00

Location Address: 710 Daniels Farm Rd. Trumbull Telephone #: 203 452-9626

e-mail address: cgordon@hctrumbull.com License #: 14059 Expiration Date: 6/30/26

Capacity: 50 # of Children Present: 31 # of Staff Present: 5

Consent to Inspect Family Child Care Home	<i>I agree to allow the Office of Early Childhood to have access to and inspect this facility and all child care records as required by Family Child Care Home Regulations.</i> Provider/Applicant/Substitute's Signature _____
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Purpose of visit: Investigation 2024 - 1143

Observations/Corrections needed:

(S) 19a-79-7a(h)(2) Shock absorbing material - Regulation not met when mulch under monkey bars where accident occurred did not meet the 8 inch depth required.

(NS) 19a-79-5a(a)(1)(D)(i) Emergency permission - was in compliance at time of visit.

(NS) 19a-79-5a(a)(3)
 (A) Injury report - a signed injury report was on file documenting the serious injury.

(B) Immediate notification of parents - in compliance.

(S)(ii) Report to OEC of fracture - in compliance.

S = Substantiated NS = Not Substantiated P = Pending (if applicable)

Operators/providers are required by regulations and statutes to be in compliance at all times.

Signature: Karen Hicks
 (OEC Representative)

Signature: Charina Gordon
 (Person in Charge)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 1/15/2024

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Trumbull Loves Children Farms Daniels License # 14059 Date: 11/1/24

Observations/Corrections needed:

(NS) 19a-79-4a(f)(2) First aid trained staff - in compliance upon inspection.

(P) 19a-79-4a(d)(4)(D) Supervision - pending completion of staff interviews

S = Substantiated (NS) = Not Substantiated (P) = Pending (if applicable)

Operators/providers are required by regulations and statutes to be in compliance at all times.

CORRECTIVE PLAN SHALL BE RETURNED TO

OEC BY: 11/15/2024

Signature: Karen Hicks
(OEC Representative)

Print Name: Karen Hicks

Signature: Chauna Gordon
(Person in Charge)

Print Name: Chauna Gordon