

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Rafaela Gomez Date: 9/13/24 Time: 10:34am

Location Address: 44 Berkeley Avenue Apt 1 New London Telephone #: 860-728-8901

e-mail address: amaliafilomeno123@gmail.com License #: 54127 Expiration Date: 7/31/26

Capacity: 643 # of Children Present: 0 # of Staff Present: 2

**Consent to Inspect
Family Child Care Home**

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.

Provider/Applicant/Substitute's Signature X Rafaela Gomez

Purpose of visit: Follow up visit

Observations/Corrections needed:

19a-87b-6
#16 Provider failed to use good judgment when local health identified high levels of lead and provider did not follow local health instructions to remedy lead levels.

19a-87b-9(c)
#23 Provider failed to have freedom of hazards when OEC representative observed pieces of wood with nails protruding accessible in an area where children walk past to go to outdoor play area - Provider removed immediately - no longer accessible to children

#24 Provider failed to ensure harmful substances/material inaccessible when lead dust wipe results are at high levels as of 8/19/24 report received by OEC and provider cared for children since last report until 9/12/24

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: ASAP

Signature: Evelyn Vicente - Quinones
(OEC Representative)
Print Name: Evelyn Vicente - Quinones

Signature: X Rafaela Gomez
(Person in Charge)
Print Name: X Rafaela Gomez

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Rafaela Gomez License # 54127 Date: 9/13/24

Observations/Corrections needed:

Discussions

OEC representative conducted walk-through of entire home indoors/outdoors
no children present

OEC did not observe kitchen being remodeled nor in construction
(picture and video taken with provider permission)

Provider has been informed and stated he understands and will
comply in NOT providing child care until lead levels decrease to
an acceptable level and local health and OEC approval to begin
starting child care again.

Inspection conducted in Spanish and documentation translated
verbally by OEC representative and ~~step~~^{step} daughter present at time
of visit and is bilingual.

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: Evelyn Vicente Quiñones
(OEC Representative)
Print Name: Evelyn Vicente Quiñones

CORRECTIVE PLAN SHALL BE RETURNED TO

OEC BY: ASaf

Signature: X Rafaela Gomez
(Person in Charge)
Print Name: X RAFAELA GOMEZ