



## FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

<b>Provider</b>	JHASMINA WILLIAMS		<b>License Number</b>	DCFH.57463	<b>Date of Inspection</b>	01/08/2025
			<b>Expiration Date</b>	1/31/2029	<b>Time of Inspection</b>	08:35 AM
<b>Address</b>	37 CAROLINA RD BRISTOL CT 06010-5541		<b>Telephone</b>	(860) 960-9007	<b>Regular Capacity</b>	6
			<b>Days and Hours</b>	Mon. - Fri. 6:30 a.m. - 9 p.m.	<b>School Age Capacity</b>	3
<b># Children Present</b>	4	<b># Under 18 months present</b>	0	<b>Summer Care</b>	Open	
<b>Purpose of Inspection</b>	Follow - up to follow up inspection conducted on 1/6/25, for capacity and vaccine violations.		<b>Name of Inspector</b>	Patty Tyburski		
<b>Provider's Email</b>	jhasmina_williams@outlook.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> [19a-87b-10(b)(2)]	<b>Description:</b> 054-Child Health Record
Failed to maintain current child health record(s), 1 child in care without up to date physical.	
<b>Statute and/or Regulation:</b> [19a-87b-10(b)(2)(A)(v) and/or 19a-87b-10(l)]	<b>Description:</b> 055-Immunizations
Failed to maintain immunization record(s), observed 2 child still present at the program without proof of flu vaccine, 1 child present without any proof of childhood vaccinations (child does have proof of flu). 1 child present without up to date vaccinations.	
<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
Observed 2 children in care with substitute, then 2 more children arrived and provider arrived home following child's drop off at school.	
<b>Statute and/or Regulation:</b> [19a-87b-8, 19a-87b-8(d) and/or 19a-87b-8(e)]	<b>Description:</b> 019-Substitute/Assistant
Observed Substitute was present during follow up	

Statute and/or Regulation: [19a-87b-9(d)(6)]	Description: 034-Smoke Detectors
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Statute and/or Regulation: [19a-87b-9(m) and/or 19a-87b-9(n)]	Description: 050-First Aid Supplies
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Statute and/or Regulation:	Description:
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Statute and/or Regulation:	Description:
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YES/NO: Yes	WERE VIOLATIONS CITED DURING THIS VISIT?
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**DISCUSSIONS/COMMENTS**

**Discussed:**  
Children without proof of flu vaccines, without up to date physical and up to date immunizations shall not be present at the program until provider has proof on site of documents.  
New smoke detectors that provider installed are working but are also chirping (instructions indicate that can be due to a low battery).  
Provider's 1st aid kit is now complete.

**IMPORTANT NOTES**

- It is the provider's responsibility to ensure compliance with all local codes and/or ordinances applicable to single and multi-family dwellings. This includes but is not limited to renovation, construction or expansion of the facility as well as the installation of a swimming pool or auxiliary heater.
- 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: 01/22/2025	 (Signature of Person in Charge)
<b>Patty Tyburski</b> (Printed Name)	 (Printed Name)		<b>JHASMINA WILLIAMS</b> (Printed Name)