



FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	VIRGINIA MEDINA				License Number	DCFH.54785	Date of Inspection	04/02/2025
		Expiration Date	5/31/2026	Time of Inspection	11:50 AM			
Address	134 BONNER ST HARTFORD CT 06106-3515				Telephone	(959) 221-9401	Regular Capacity	6
		Hours of Operation	6:00 AM 7:00 PM	School Age Capacity	3			
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Sat	Summer Hours	Open
New Address					# Under 18 mths present	2	Weekend Hours	Yes
		Total children present	5	Night Hours	No			
Type of Inspection	FOLLOW UP FOR CAPACITY, SAFE SLEEP AND BCIS ON 3/20/25				Inspector's Name	Silvana Carreon Zegarra		
Provider's Email	navarrete_vm@hotmail.com				Inspector's Email	silvana.carreon-zegarra@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

Statute and/or Regulation:	[19a-87b-8a]	Description:	021-Background Check
Failed to ensure comprehensive background checks have been conducted for two household members. The provider did not invite the household members to create BCIS accounts's yet.			
Statute and/or Regulation:	[19a-87b-10(f)(1) and/or 19a-87b-10(f)(4)]	Description:	073-Infants Placed in Safe Crib/Snug Mattress/Tight Sheet
Observed two infants sleeping in the their playpens. One playpen did not have sheet and both playpen had mobiles that were removed during the visit.			
Statute and/or Regulation:		Description:	
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OTHER FINDINGS-REGULATIONS IN COMPLIANCE	
Statute and/or Regulation: [19a-87b-10(a)]	Description: 004-Capacity
<p>At the moment of the visit, three staff were present, the provider and two substitutes. Five children present including two infants</p>	
Statute and/or Regulation:	Description:

Statute and/or Regulation:	Description:

Statute and/or Regulation:	Description:

Statute and/or Regulation:	Description:

Statute and/or Regulation:	Description:


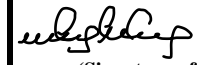
YES/NO:	Yes	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

The OEC representative reminded the provider that the substitute/household member needs background checks using her full legal name. The other household member must be invited to create his BCIS account and complete fingerprints.

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.

		DATE CORRECTIONS DUE BY: 04/16/2025	
(Signature of OEC Representative)	(Signature of OEC Representative)		(Signature of Provider/Substitute/Applicant)
Silvana Carreon Zegarra			VIRGINIA MEDINA
(Printed Name)	(Printed Name)		(Printed Name)