


DIVISION OF LICENSING

450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103
 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552
 Email: oc.licensing@ct.gov Website: www.ctoec.org

FAMILY CHILD CARE HOME INSPECTION

Provider	MARIE R ST JEAN				License Number	DCFH.56129	Date of Inspection	05/15/2025
					Expiration Date	4/30/2028	Time of Inspection	09:42 AM
Address	39 HENRY ST NEW HAVEN CT 06511-3559				Telephone	(203) 645-3952	Regular Capacity	6
					Hours of Operation	24 HOURS 24 HOURS	School Age Capacity	3
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Sun	Summer Hours	Open
New Address					# Under 18 mths present	0	Weekend Hours	Yes
					Total children present	2	Night Hours	Yes
Type of Inspection	UNANNOUNCED INSPECTION - FULL				Inspector's Name	Alexandra Rodriguez		
Provider's Email	mst5258@yahoo.com				Inspector's Email	alexandra.rodriguez@ct.gov		
Key: Compliant = X Non-Compliant = O	<u>Consent to Inspect:</u> 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). <i>[Signature]</i> _____ Signature of Provider/Substitute/Applicant							

TERMS OF REGISTRATION 19a-87b-5

X	4. Capacity	
X	5. Non-transferability of license	Pending?
X	6. Infant/Toddler Restriction	
X	7. License Posted	
X	8. Parent Access to OEC Phone Number	
X	9. Photo ID	
X	10. Requests for Information	
X	11. Notification of Change	

QUALIFICATION OF PROVIDER 19a-87b-6

X	12. Awareness of, Understanding of Regulations	
X	13. Medical statement	
	Expiration date: 03/24/2026	
X	14. First Aid Certificate	
	Expiration date: 06/04/2025	

X	15. CPR Certificate	
	Expiration date:	
	06/04/2025	
X	16. Judgment	

MEMBERS OF THE HOUSEHOLD 19a-87b-7

X	17. Medical Statement	
X	18. Household Environment	

QUALIFICATIONS OF STAFF 19a-87b-8

X	19. Sub/Assistant	Y/N	Name: Joanne Taylor	Appvl # 92146
	Type of Staff :	Y		
	Substitute			
X	20. Emergency Caregiver			

COMPREHENSIVE BACKGROUND CHECK 19a-87b-8a

<input type="radio"/>	21. Background Check(s)	Regulation was not in compliance when evidence of compliance with background checks was not available.
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PHYSICAL ENVIRONMENT 19a-87b-9

X	22. Clean/Sanitary Environment	
X	23. Freedom of Hazards	
X	24. Harmful Substances/Materials Inaccessible	
X	25. Bio-contaminants Disposed Safely	
X	26. Safe Storage of Flammables	
X	27. Safe Door Fasteners	
X	28. Electrical Safety	
<input type="radio"/>	29. Safe Exits	Regulation was not in compliance when two readily accessible exits from each room were not accessible. One means of egress to upstairs (main level) locked from the outside.
X	30. Basement Supervision	Y/N
		Y
	Used for Care ?	Y/N
X	31. Stairways - Protected, Handrails	
X	32. Emergency Plan	

X	33. Emergency Evacuation Drills - Quarterly/Log	
X	34. Smoke Detectors	
X	35. Carbon Monoxide Detector	
O	36. Fire Extinguisher- 5 lb. ABC/Installed	Regulation was not in compliance when an accessible fire extinguisher in order to allow for immediate access was not mounted on wall. Observed fire extinguisher in bottom kitchen cabinet.
X	37. Auxiliary Heating System N Type?	Appvd?
X	38. Safe Storage of Weapons and Ammunition	
X	39. Safe Space- Sufficient Indoors Outdoors Y Y	
X	40. Body of Water- Type: Barrier?	Y/N N
X	41. Hot Tubs- Locked - Inaccessible	Y/N N
X	42. Ventilation, Light and Temperature- 65°	
X	43. Window Safety	
X	44. Washing Toileting, Sewage Garbage Facilities	
X	45. Adequate and Safe Water - Type of System: Public Water	
X	46. Water Temperature- 60°-120°	
X	47. Pasteurization of Milk Supply	
X	48. Working Phone, Emergency Numbers Posted	
X	49. Safe Transportation Registered, Insured, Restraints	
X	50. First Aid supplies	
X	51. Pet protection Pets? Rabies Certs?	Type: N
X	52. Smoking Prohibited	

RESPONSIBILITIES OF PROVIDER 19a-87b-10

X	53. Enrollment Form	
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<input type="radio"/>	54. Child Health Record	Regulation was not in compliance when one child health record was not current.
<input type="radio"/>	55. Immunizations	Regulation was not in compliance when immunization records of one chil was not current.
<input checked="" type="checkbox"/>	56. Emergency Permission	
<input checked="" type="checkbox"/>	57. Authorized Release	
<input checked="" type="checkbox"/>	58. Field Trip and Transportation Permission- To/From School	
<input checked="" type="checkbox"/>	59. Swimming Permission	
<input checked="" type="checkbox"/>	60. Incident Log	
<input checked="" type="checkbox"/>	61. Confidentiality	
<input checked="" type="checkbox"/>	62. Meeting the Child's Needs	
<input checked="" type="checkbox"/>	63. Sufficient Play Equipment	
<input checked="" type="checkbox"/>	64. Good Nutrition- Meals/Snacks, Water Available	
<input checked="" type="checkbox"/>	65. Handwashing	
<input checked="" type="checkbox"/>	66. Flexible and Balanced Written Schedule	
<input checked="" type="checkbox"/>	67. Personal Articles- Blanket, Towel, Toilet Articles	
<input checked="" type="checkbox"/>	68. Proper Rest Provisions – Safe Cribs	
<input type="radio"/>	69. Individual Plan for Care (Written if Applicable)	Regulation was not in compliance when a written individual plan of care for each child with disabilities or special health care needs observed to be expired for two children. One child diagnosed with asthma and food allergy and one child diagnosed with just asthma.
<input checked="" type="checkbox"/>	70. Cultural Differences, Sp. Needs, Dev. Appr. Activities	
<input checked="" type="checkbox"/>	71. Infant Care, Indiv Attention, Held for Bottle Feedings	
<input checked="" type="checkbox"/>	72. Infants Placed on Back for Sleeping	
<input checked="" type="checkbox"/>	73. Infants Placed in Crib, Well constructed, Snug Mattress, Tight Sheet	

X	74. Crib or Other Provision Free from Observable Hazards	
X	75. Infants not Swaddled	
X	76. Infants Supervised – minimum every 15 minutes	
X	77. Req. for Sleep Arrangements Posted/Discussed	
X	78. Diaper Changing- Frequent, Sanitary, Handwashing, Waste Disposal	
X	79. Parent Information and Access	
X	80. Developmental Milestones – Posted	
X	81. Supervision- at all Times, Indoors, Outdoors	
X	82. Personal Schedule- Alert, Competent Attention	
X	83. Full Attention - Distractions, Employment, Socialization	
X	84. Immediate Attention	
X	85. Substitute – Emergency Caregiver Present	
X	86. Appr. Discipline, Behavior Management	
X	87. Discuss Beh. Management Methods w/Staff and Parents	
X	88. Child Protection- Abuse/Neglect	
X	89. Notify OEC within 24 hrs. - Death or Serious Injury	
X	90. Mandated Reporting Abuse or Neglect to DCF	
SICK CHILD CARE 19a-87b-11		
X	91. Sick Child Care	
NIGHT CARE 19a-87b-12 (10pm to 5am) Y/N? N		
X	92. Separate Bed- Location of Bed - Appropriate Sleepwear	

OFFICE ACCESS, INSPECTIONS AND INVESTIGATIONS 19a-87b-13

O	93. Access-Immediate, Entire or Part of Facility and Records	Regulation was not in compliance when OEC staff was not allowed immediate access to the facility during customary business hours. Observed door leading from basement to main floor of home locked.provider arrived 90 minutes after licensing specialist arrived and unlocked main floor.
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ADMINISTRATION OF MEDICATIONS 19a-87b-17 Y/N?

X	94. Policies and Procedures for Admin of Meds	
X	95. Parent Permission for Nonprescription Topical Meds	
X	96. Notification - Documentation of Med Error(s)	
X	97. Nonprescription Topical Meds- Stored/Labeled	
X	98. Unused - Expired Nonprescription Meds	
O	99. Documented Medication Trained Staff	Regulation was not in compliance when training in the administration of injectable medications was not current of substitute caring for child with a prescribed EpiPen.
O	100. Written Auth Prescriber/Parent Permission	Regulation was not in compliance when a written order from prescriber for medication of two children are expired. One child diagnosed with asthma and food allergies and one child diagnosed with just asthma.
X	101. MAR Maintained	
X	102. Prescription Meds – Stored/Labeled	Regulation was not in compliance when proper storage of medication
O	103. Unused/Expired Prescription Meds	Observed one child's medication expired present in childcare. One child's albuterol and Benadryl were expired.
X	104. Emergency Meds- Equip. Labeled/Current	
X	105. Self-Admin. Of Meds	
X	106. Petition for Special Medication Authorization	

MONITORING OF DIABETES 19a-87b-18Child with diabetes enrolled? **N**

X	108. Policies for Finger Stick Blood Glucose Testing	
X	109. Finger Stick Blood Glucose Testing - Staff Trained	
X	110. Self Admin of Finger Stick Blood Glucose Testing	
X	111. Testing Equip. & Supplies- Maintain, Labeled, Locked, Disposed	

X	112. Finger Stick Blood Glucose Testing Records	
X	113. Parent Notification of Test Results	

ADDITIONAL VIOLATIONS

	114. Consent Order - Negotiated Corrective Action Plan	N/A?	
		X	

YES or NO?	Were Violations Cited during this visit?	Total Number of Violations this visit:	10
Yes			

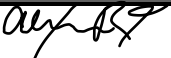

DISCUSSIONS/COMMENTS

Discussed with the provider and substitute the following ;

- Importance of immediate access to all areas of home: indoors and outdoors.
- importance of immediate access to two emergency exits. If provider is leaving for a personal matter, substitute should have keys to all areas of home.
- Importance of substitute having knowledge of where to locate children's records and emergency plan.
- Importance of having fire extinguisher mounted on wall and accessible.
- Importance of ensuring all children with prescription medication have current medication on site and current written authorization forms.
- Importance of anyone caring for child alone such as substitute must have a current medication administration certification if child has a medical need such as an allergy with a prescribed medication.
- Observed gate at stairway outside, provider understands it should be secured to railings to prevent tipping.
- Observed child age 2 years 11 months sleeping from upon start of inspection until 12:22pm. Provider stated child does not sleep at home. Reminded provider to ensure child wakes up at an appropriate time to meet their needs of toileting and meals.
- Importance of substitute being listed on BCIS roster.

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.*
- *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 Provider/Applicant/Substitute)	DATE CORRECTIONS DUE BY:
Alexandra Rodriguez (Printed Name)	MARIE R ST JEAN (Printed Name)	05/29/2025

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