

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Stark Club - Southington Date: 6/20/25 Time: 11:07 AM
Location Address: 1348 West Street Southington Telephone #: 860-276-1031
e-mail address: starkclubs@gmail.com License #: 13065 Expiration Date: 3/31/26
Capacity: 136/5p # of Children Present: 40 # of Staff Present: 8

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. Provider/Applicant/Substitute's Signature</i>
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Purpose of visit: 2025-517

Observations/Corrections needed:

19a-79-3a(b)(7)(A) Administration - Child behavior management
(NS) Insufficient evidence to substantiate allegations. Staff deny allegations and use redirection as form of behavior management
19a-79-4a(d)(3)(A) Staffing - Personal Qualities
(NS) Insufficient evidence to substantiate allegations.
19a-79-10(g)(3) Under three endorsement - Safe Sleep
(S) Regulation not in compliance when OEC representative observed a three month old sleeping in crib with mobile attached to crib facing down on infant, playing & spinning.

Discussions

- Corporate to send email correspondence to OEC representative
- Submit witness statements within 5 business days.

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: [Signature] 7/7/25

Signature: [Signature]
(OEC Representative)
Print Name: Evelyn Vicente - Quiñones
Signature: [Signature]
(Person in Charge)
Print Name: Brenda Downey