

LICENSING CORRECTIVE ACTION PLAN (CAP)

NAME OF PROVIDER/OPERATOR: Badria Ali LICENSE #: Pending
 LOCATION ADDRESS: 128 Englewood Drive TOWN: New Haven, CT INSPECTION REPORT DATE: 4/22/25

CAPs submitted that do not conform to the instructions provided on the back will not be accepted. Read the instructions carefully before completing this form. In accordance with this agency's policy, your CAP will be posted online and made accessible to parents and others seeking information pertaining to your child care program.

Inspection Report Item # or Regulation	Corrective Action Taken	Exact Date Corrected	Check if Accepted (OEC Use Only)
23. Hazards	NOTE: Your response should include a clear concise explanation of the changes the program has made to correct the violation to ensure compliance. TV on main level on home was gated off, Children will not have access	6/5/25	✓
28. Electrical safety	5 outlets on the main level of home is covered with safety outlet covers	6/5/25	✓
31 Stairways	Gates were placed on top and bottom stairway of basement	6/5/25	✓
36. Fire extinguisher	5 pound ABC fire extinguisher on site	5/20/25	✓
46 water temp	water temp. came up to 60°	6/5/25	✓
50 First Aid supplies	complete first aid kit was purchased and on site	5/20/25	✓
63 sufficient Play equipment	I now have sufficient Play equipments and purchased additional Play equipments for all kids ages.	5/20/25	✓

Based on the inspection report, the licensee was cited for failure to comply with the regulations listed above. I hereby declare that the licensee has complied with the regulation(s) in the above manner. I understand the Agency reserves the right to re-inspect the above program to verify compliance with the regulations and to request a meeting with the licensee when necessary to review patterns of non-compliance. Understanding the penalties for false statements, I attest that the information I submit on this form is true.

Providers/Operators are required by regulations and statutes to be in compliance at all times.

Prior to obtaining

CORRECTIVE ACTION PLAN SHALL BE RETURNED TO OEC BY: Stef Russo RETURN TO: Stef Russo

Connecticut Office of Early Childhood
 450 Columbus Blvd, Suite 302
 Hartford, CT 06103 Fax: 860-326-0552

6/5/25
 (Date)

(Provider/Operator)

Badria Ali

Printed Name:

Please see the reverse side for guidance in completing this CAP, sample CAPs and instructions for Resolving Disputed Violations