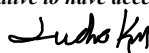




DIVISION OF LICENSING
 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103
 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552
 Email: occlicensing@ct.gov Website: www.ctoec.org

FAMILY CHILD CARE HOME INSPECTION

Provider	JUDIA KING				License Number	DCFH.58019	Date of Inspection	07/23/2025
					Expiration Date	6/30/2028	Time of Inspection	08:39 AM
Address	37 2ND ST HAMDEN CT 06514-4709				Telephone	(203) 600-4453	Regular Capacity	6
					Hours of Operation	7:00 AM - 4:00 PM	School Age Capacity	3
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Fri	Summer Hours	Open
New Address					# Under 18 mths present	0	Weekend Hours	No
					Total children present	9	Night Hours	No
Type of Inspection	UNANNOUNCED INSPECTION - FULL				Inspector's Name	Silvana Carreon Zegarra		
Provider's Email	kingjudia@gmail.com				Inspector's Email	silvana.carreon-zegarra@ct.gov		
Key: Compliant = X Non-Compliant = O	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/Substitute/Applicant							

TERMS OF REGISTRATION 19a-87b-5

X	4. Capacity	
X	5. Non-transferability of license	Pending?
X	6. Infant/Toddler Restriction	
O	7. License Posted	Provider not in compliance with ensuring the license is posted in a conspicuous location when the provider could not find her license. The provider asked "What does the license look like?"
O	8. Parent Access to OEC Phone Number	Provider not in compliance with furnishing the parents with the telephone number of the agency when the OEC representative did not observe any OEC phone numbers and the the provider did not have the number available.
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	
O	13. Medical statement Expiration date: 05/11/2025	Provider not in compliance with maintaining a medical statement when the provider could not find her documents
O	14. First Aid Certificate Expiration date: 06/30/2024	Provider not in compliance with maintaining a valid first aid certificate when she could not find her fist aid certificate.

<input checked="" type="radio"/>	15. CPR Certificate	Provider not in compliance with maintaining a valid CPR certification when she could not find her CPR certificate
	Expiration date: 06/30/2024	
<input checked="" type="radio"/>	16. Judgment	

MEMBERS OF THE HOUSEHOLD 19a-87b-7

<input checked="" type="radio"/>	17. Medical Statement	Provider not in compliance with maintaining medical statements when she could not find her documentations including household member's medical statements when.
<input checked="" type="radio"/>	18. Household Environment	

QUALIFICATIONS OF STAFF 19a-87b-8

<input checked="" type="radio"/>	19. Sub/Assistant	Y/N	Name:	Appvl #
	Type of Staff:	N		
<input checked="" type="radio"/>	20. Emergency Caregiver			

COMPREHENSIVE BACKGROUND CHECK 19a-87b-8a

<input checked="" type="radio"/>	21. Background Check(s)	Provider not in compliance with maintaining evidence of compliance with background checks when she could not access to her BCIS account.
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PHYSICAL ENVIRONMENT 19a-87b-9

<input checked="" type="radio"/>	22. Clean/Sanitary Environment	
<input checked="" type="radio"/>	23. Freedom of Hazards	
<input checked="" type="radio"/>	24. Harmful Substances/Materials Inaccessible	
<input checked="" type="radio"/>	25. Bio-contaminants Disposed Safely	
<input checked="" type="radio"/>	26. Safe Storage of Flammables	
<input checked="" type="radio"/>	27. Safe Door Fasteners	
<input checked="" type="radio"/>	28. Electrical Safety	Provider not in compliance with ensuring that electrical cords do not hang within reach of children when different cables (tv, sofa, cell- chargers, monitors, fans) were accessible to the children in the
<input checked="" type="radio"/>	29. Safe Exits	Provider not in compliance with maintaining exits free from obstruction(s) when the principal and emergency stairs have different objects on the steps. (Cat's litter, cat's food, fan, tables, boxes, bottles)
<input checked="" type="radio"/>	30. Basement Supervision	Y/N N
	Used for Care ?	Y/N
<input checked="" type="radio"/>	31. Stairways - Protected, Handrails	
<input checked="" type="radio"/>	32. Emergency Plan	

<input type="radio"/>	33. Emergency Evacuation Drills - Quarterly/Log	Provider not in compliance with practicing quarterly emergency evacuation drills when the OEC observed evacuation drill log without documentation. The provider stated that she did not practice drill because she did not have children	
<input checked="" type="checkbox"/>	34. Smoke Detectors		
<input checked="" type="checkbox"/>	35. Carbon Monoxide Detector		
<input checked="" type="checkbox"/>	36. Fire Extinguisher- 5 lb. ABC/Installed		
<input checked="" type="checkbox"/>	37. Auxiliary Heating System N Type?	Appvd?	
<input checked="" type="checkbox"/>	38. Safe Storage of Weapons and Ammunition		
<input checked="" type="checkbox"/>	39. Safe Space- Sufficient Indoors Outdoors Y Y		
<input checked="" type="checkbox"/>	40. Body of Water- Type: Barrier?	Y/N N	
<input checked="" type="checkbox"/>	41. Hot Tubs- Locked - Inaccessible	Y/N N	
<input checked="" type="checkbox"/>	42. Ventilation, Light and Temperature- 65°		
<input checked="" type="checkbox"/>	43. Window Safety		
<input checked="" type="checkbox"/>	44. Washing Toileting, Sewage Garbage Facilities		
<input checked="" type="checkbox"/>	45. Adequate and Safe Water - Type of System: Public Water		
<input type="radio"/>	46. Water Temperature- 60°-120°	Provider not in compliance with maintaining a safe water temperature between 60-120 degrees when the water temperature was 133F during the inspection.	
<input checked="" type="checkbox"/>	47. Pasteurization of Milk Supply		
<input checked="" type="checkbox"/>	48. Working Phone, Emergency Numbers Posted	The form was provided during the inspection, she completed and posted during the inspection.	
<input checked="" type="checkbox"/>	49. Safe Transportation Registered, Insured, Restraints		
<input type="radio"/>	50. First Aid supplies	Provider not in compliance with maintaining a complete first aid kit when the thermometer was missing	
<input checked="" type="checkbox"/>	51. Pet protection	Type: 1 cat 1 dog.	
<input checked="" type="checkbox"/>	Pets?	Y	
<input checked="" type="checkbox"/>	Rabies Certs?		
<input checked="" type="checkbox"/>	52. Smoking Prohibited		

RESPONSIBILITIES OF PROVIDER 19a-87b-10

<input checked="" type="checkbox"/>	53. Enrollment Form		
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X	54. Child Health Record	
X	55. Immunizations	
X	56. Emergency Permission	
X	57. Authorized Release	
X	58. Field Trip and Transportation Permission-To/From School	
X	59. Swimming Permission	
X	60. Incident Log	
X	61. Confidentiality	
X	62. Meeting the Child's Needs	
O	63. Sufficient Play Equipment	Provider not in compliance with providing sufficient indoor play equipment when the OEC representative did not observe play equipment or materials for children.
X	64. Good Nutrition- Meals/Snacks, Water Available	
X	65. Handwashing	
X	66. Flexible and Balanced Written Schedule	
X	67. Personal Articles- Blanket, Towel, Toilet Articles	
X	68. Proper Rest Provisions – Safe Cribs	The OEC representative did not observe cribs or playpen during the inspection
X	69. Individual Plan for Care (Written if Applicable)	
X	70. Cultural Differences, Sp. Needs, Dev. Appr. Activities	
X	71. Infant Care, Indiv Attention, Held for Bottle Feedings	
	72. Infants Placed on Back for Sleeping	
	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	
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NIGHT CARE 19a-87b-12 (10pm to 5am) Y/N? N

X	92. Separate Bed- Location of Bed - Appropriate Sleepwear	
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OFFICE ACCESS, INSPECTIONS AND INVESTIGATIONS 19a-87b-13

X	93. Access- Immediate, Entire or Part of Facility and Records	
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ADMINISTRATION OF MEDICATIONS 19a-87b-17 Y/N? N

O	94. Policies and Procedures for Admin of Meds	Provider not in compliance with maintaining complete written policies on the administration of medication when the provider could not find her documentations.
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X	95. Parent Permission for Nonprescription Topical Meds	
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X	96. Notification - Documentation of Med Error(s)	
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X	97. Nonprescription Topical Meds- Stored/Labeled	
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X	98. Unused - Expired Nonprescription Meds	
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X	99. Documented Medication Trained Staff	
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X	100. Written Auth Prescriber/Parent Permission	
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X	101. MAR Maintained	
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X	102. Prescription Meds - Stored/Labeled	
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X	103. Unused/Expired Prescription Meds	
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X	104. Emergency Meds- Equip. Labeled/Current	
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X	105. Self-Admin. Of Meds	
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X	106. Petition for Special Medication Authorization	
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MONITORING OF DIABETES 19a-87b-18 Child with diabetes enrolled? N

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

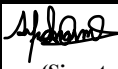

WERE VIOLATIONS CITED DURING THIS VISIT? Yes or No?	Yes	LEVEL OF NON-COMPLIANCE THIS VISIT:	14 out of 107
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DISCUSSIONS/COMMENTS

The provider review the OEC Regulations including safe sleep, clean and sanitary environment, capacity, enrollment documentation and more.
 She received the following forms.
 Emergency Numbers form
 Emergency Plan form
 Adult Medical Statement
 Enrollment form
 Written Permissions form and
 Safe Sleep n child care flyer.
 The provider requested that a copy of her License be sent.
 The OEC representative informed to the provider about the unannounced inspections and the expectations of the providers.
 The provider is not caring for children at this moment. She will contact the OEC specialist for an inspection before enrolling children,.

IMPORTANT NOTES

- o *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.*
- o *Only the regulations marked as compliant or non-compliant were monitored or discussed.*
- o *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:	 (Signature of Provider/Applicant/Substitute)
Silvana Carreon Zegarra (Printed Name)	 (Printed Name)	08/06/2025	JUDIA KING (Printed Name)