

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bristol Child Dev Center Date: 8-7-25 Time: 2:30

Location Address: 291 Burlington Ave, Bristol Telephone #: 860 314 0597

e-mail address: renee.dailey@bristolcdcr.com License #: 13152 Expiration Date: 4-30-26

Capacity: 136 # of Children Present: 95 # of Staff Present: 18

**Consent to Inspect
Family Child Care Home**

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

Purpose of visit: self report - case # 2025-836

Observations/Corrections needed:

§ 19a-79.3a(b)(7)(A). a staff member did not manage child behavior using techniques based on developmentally appropriate practices when she pushed a child.

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: 8-21-25

Signature: [Signature]

(OEC Representative)

Print Name: Ken Eddy

Signature: [Signature]

(Person in Charge)

Print Name: Renee Dailey