



**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](mailto:occlicensing@ct.gov) Website: [www.ctoec.org](http://www.ctoec.org)

**FAMILY CHILD CARE HOME INSPECTION**

Provider	MILDRE DEJESUS JAQUEZ PEREZ				License Number	DCFH.56992	Date of Inspection	08/26/2025
					Expiration Date	12/31/2025	Time of Inspection	02:25 PM
Address	72 DALTON AVE WATERBURY CT 06705-1219				Telephone	(203) 510-9417	Regular Capacity	6
					Hours of Operation	5:00 AM – 10:00 PM	School Age Capacity	3
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Sat	Summer Hours	Open
New Address					# Under 18 mths present	3	Weekend Hours	No
					Total children present	7	Night Hours	No
Type of Inspection	UNANNOUNCED INSPECTION - FULL				Inspector's Name	Janarish Lopez		
Provider's Email	candax100@hotmail.com				Inspector's Email	janarish.lopez@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). *Alberna Perez*

Signature of Provider/Substitute/Applicant

**TERMS OF REGISTRATION 19a-87b-5**

O	4. Capacity	Upon entering home daycare observed 7 children.	
X	5. Non-transferability of license	Pending?	
O	6. Infant/Toddler Restriction	Upon entering the daycare home observed a substitute alone with 3 children under 18 months	
X	7. License Posted		
X	8. Parent Access to OEC Phone Number		
X	9. Photo ID		
X	10. Requests for Information		
O	11. Notification of Change	Provider not in compliance with notifying the Office of the addition of any household member when 3 household members have been living in the home for about a month and the OEC was not notified.	

**QUALIFICATION OF PROVIDER 19a-87b-6**

X	12. Awareness of, Understanding of Regulations	
O	13. Medical statement Expiration date: 01/07/2025	Provider not in compliance with maintaining a current medical statement
X	14. First Aid Certificate Expiration date: 06/14/2027	

<b>X</b>	15. CPR Certificate	
	Expiration date:	
	06/14/2027	
<b>X</b>	16. Judgment	

**MEMBERS OF THE HOUSEHOLD 19a-87b-7**

<b>O</b>	17. Medical Statement	Didn't observe current adults physicals for 3 household members
<b>X</b>	18. Household Environment	

**QUALIFICATIONS OF STAFF 19a-87b-8**

<b>O</b>	19. Sub/Assistant	Y/N	Name: <b>Albenia perez</b>	Appvl #	<b>91574</b>
	Type of Staff:				
	Substitute	Y	Per substitute she was not aware and has not read the regulations.		
<b>X</b>	20. Emergency Caregiver				

**COMPREHENSIVE BACKGROUND CHECK 19a-87b-8a**

<b>O</b>	21. Background Check(s)	Provider not in compliance with ensuring comprehensive background check had been conducted for a staff member providing direct care for children. 3 household members don't have their background
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**PHYSICAL ENVIRONMENT 19a-87b-9**

<b>X</b>	22. Clean/Sanitary Environment		
<b>X</b>	23. Freedom of Hazards		
<b>X</b>	24. Harmful Substances/Materials Inaccessible		
<b>X</b>	25. Bio-contaminants Disposed Safely		
<b>X</b>	26. Safe Storage of Flammables		
<b>X</b>	27. Safe Door Fasteners		
<b>X</b>	28. Electrical Safety		
<b>O</b>	29. Safe Exits	Provider not in compliance with maintaining exits free from obstructions, when entering the daycare observed a child sleeping in front of an emergency exit door.	
<b>X</b>	30. Basement Supervision	Y/N	
		Y	
	Used for Care ?	Y/N	
<b>X</b>	31. Stairways - Protected, Handrails		
	32. Emergency Plan		

	33. Emergency Evacuation Drills - Quarterly/Log		
	34. Smoke Detectors		
	35. Carbon Monoxide Detector		
	36. Fire Extinguisher- 5 lb. ABC/Installed		
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:	Y/N	
	Barrier?	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		
	46. Water Temperature- 60°-120°		
	47. Pasteurization of Milk Supply		
	48. Working Phone, Emergency Numbers Posted		
X	49. Safe Transportation Registered, Insured, Restraints		
	50. First Aid supplies		
X	51. Pet protection	Type:	
	Pets? Rabies Certs?	N	
X	52. Smoking Prohibited		

**RESPONSIBILITIES OF PROVIDER 19a-87b-10**

O	53. Enrollment Form	Provider not in compliance with maintaining complete child enrollment forms for 7 children
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<input type="radio"/>	54. Child Health Record	Provider not in compliance with maintaining complete child health records for 6 children
<input type="radio"/>	55. Immunizations	Provider not in compliance with maintaining immunization records for 4 children
<input checked="" type="checkbox"/>	56. Emergency Permission	
<input checked="" type="checkbox"/>	57. Authorized Release	
<input type="radio"/>	58. Field Trip and Transportation Permission-To/From School	Provider not in compliance with maintaining complete written parent permission for transitioning children to/from school for 2 children
<input checked="" type="checkbox"/>	59. Swimming Permission	
<input checked="" type="checkbox"/>	60. Incident Log	
<input checked="" type="checkbox"/>	61. Confidentiality	
	62. Meeting the Child's Needs	
	63. Sufficient Play Equipment	
	64. Good Nutrition- Meals/Snacks, Water Available	
	65. Handwashing	
	66. Flexible and Balanced Written Schedule	
	67. Personal Articles- Blanket, Towel, Toilet Articles	
	68. Proper Rest Provisions – Safe Cribs	
	69. Individual Plan for Care (Written if Applicable)	
	70. Cultural Differences, Sp. Needs, Dev. Appr. Activities	
	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	

<b>X</b>	74. Crib or Other Provision Free from Observable Hazards	
	75. Infants not Swaddled	
	76. Infants Supervised – minimum every 15 minutes	
	77. Req. for Sleep Arrangements Posted/Discussed	
	78. Diaper Changing- Frequent, Sanitary, Handwashing, Waste Disposal	
<b>X</b>	79. Parent Information and Access	
	80. Developmental Milestones – Posted	
<b>X</b>	81. Supervision- at all Times, Indoors, Outdoors	
<b>X</b>	82. Personal Schedule- Alert, Competent Attention	
<b>X</b>	83. Full Attention - Distractions, Employment, Socialization	
<b>X</b>	84. Immediate Attention	
<b>X</b>	85. Substitute – Emergency Caregiver Present	
<b>X</b>	86. Appr. Discipline, Behavior Management	
<b>X</b>	87. Discuss Beh. Management Methods w/Staff and Parents	
<b>X</b>	88. Child Protection- Abuse/Neglect	
<b>X</b>	89. Notify OEC within 24 hrs. - Death or Serious Injury	
<b>X</b>	90. Mandated Reporting Abuse or Neglect to DCF	

### SICK CHILD CARE 19a-87b-11

<b>X</b>	91. Sick Child Care	
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### NIGHT CARE 19a-87b-12 (10pm to 5am) Y/N? N

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

<b>O</b>	<p>93. Access- Immediate, Entire or Part of Facility and Records</p>	<p>When knocking on the door waiting approximately 3 minutes on the side door then walked to the front door knocked and waited an additional 4 minutes after calling the provider, the substitute opened the door a few minutes after.</p>
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**ADMINISTRATION OF MEDICATIONS 19a-87b-17 Y/N? N**

	94. Policies and Procedures for Admin of Meds	
	95. Parent Permission for Nonprescription Topical Meds	
	96. Notification - Documentation of Med Error(s)	
	97. Nonprescription Topical Meds- Stored/Labeled	
	98. Unused - Expired Nonprescription Meds	
	99. Documented Medication Trained Staff	
	100. Written Auth Prescriber/Parent Permission	
	101. MAR Maintained	
	102. Prescription Meds - Stored/Labeled	
	103. Unused/Expired Prescription Meds	
	104. Emergency Meds- Equip. Labeled/Current	
	105. Self-Admin. Of Meds	
	106. Petition for Special Medication Authorization	

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

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

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

**ADDITIONAL VIOLATIONS**

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


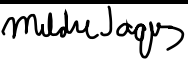
WERE VIOLATIONS CITED DURING THIS VISIT? Yes or No?	Yes	LEVEL OF NON-COMPLIANCE THIS VISIT:	13 out of 66
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**DISCUSSIONS/COMMENTS**

19a-87b-8a(a)- Provider not in compliance with ensuring comprehensive background check had been conducted for a staff member providing direct care for children. Immediate correction is required, only approved staff with current background check can provide direct care for the children.

**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 OEC Representative)	DATE CORRECTIONS DUE BY:	 (Signature of Provider/Applicant/Substitute)
Janarish Lopez (Printed Name)	(Printed Name)	09/09/2025	MILDRE DEJESUS JAQUEZ PEREZ (Printed Name)