



DIVISION OF LICENSING

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

**CHILD CARE CENTER/GROUP CHILD CARE HOME
 INVESTIGATION**

Program Name	A LITTLE JOURNEY DAYCARE AND LEARNING CENTER				License Number	DCCC.70406		Date of Inspection	09/11/2025		
					Expiration Date	4/30/2026		Time of Inspection	10:59 AM		
Address	1790 ELLINGTON RD SOUTH WINDSOR CT 06074-2708				Telephone	(860) 899-9453		Licensed Capacity	44		
					Hours of Operation	7:00 AM - 6:00 PM		Under Three Capacity	24		
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	6 - 5 weeks - years		
New Address					Night Hours	No	Summer Hours	Open	Weekend Hours	No	
					Program's Email	alittlejourneydaycare@gmail.com					
Operator	A LITTLE JOURNEY DAYCARE AND LEARNING CENTER, INC				Director	HALAH M JOSEPH					
Endorsements	Pre-School, Under Three				Name of Inspector	Patty Tyburski					
Numbers of Staff/Children Present	# Children Present under age 3	21	# Total Children Present	31	# of Staff Present	7	Purpose of Visit	Follow Up for Supervision Violation Cited on 9-5-2025			

SUBSTANTIATED VIOLATIONS

Statute and/or Regulation and Description: [-] 000 No Violations

No violations were cited during this inspection

Statute and/or Regulation and Description:

Statute and/or Regulation and Description:


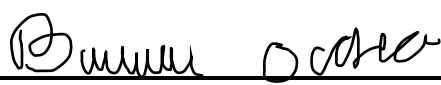
Statute and/or Regulation and Description:	
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Statute and/or Regulation and Description:	
Statute and/or Regulation and Description:	
NOT SUBSTANTIATED or PENDING	
Statute and/or Regulation and Description:	[19a-79-4a(d)(4)(D)] Not Substantiated 028- Supervision
Statute and/or Regulation and Description:	

Statute and/or Regulation and Description:	
Statute and/or Regulation and Description:	
Statute and/or Regulation and Description:	
Statute and/or Regulation and Description:	

DISCUSSIONS/COMMENTS

Observed compliance with supervision during this follow up.

Were Violations cited during this visit? Y or N?	No	NOTE: * It is the operator's responsibility to ensure compliance with all local codes and ordinances.
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Signature of OEC Representative			Signature of Person in Charge
Printed Name	Patty Tyburski	Brianna Ocasio	Printed Name
2 nd OEC Representative		APPLICANTS: You <i>MAY NOT OPERATE</i> until all requirements have been met and a license has been issued by the Agency.	
Printed Name		THIS INSPECTION SHALL BE POSTED OR SHALL BE AVAILABLE FOR REVIEW UPON REQUEST.	

	Written Corrective Action Plan due by:	DIVISION OF LICENSING 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552 Email: oc.licensing@ct.gov Website: www.ctoec.org
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OEC Representative's Email: patricia.tyburski@ct.gov	CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf
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