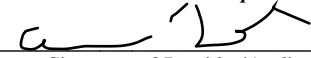




FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	STEPHANIE PAREDEZ DIAZ				License Number	DCFH.58035	Date of Inspection	10/08/2025
					Expiration Date	7/31/2028	Time of Inspection	02:54 PM
Address	169 SHERIDAN ST BRIDGEPORT CT 06610-2759				Telephone	(914) 327-8257	Regular Capacity	6
					Hours of Operation	6:00 AM – 6:00 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	2	Weekend Hours	No
					Total children present	4	Night Hours	No
Type of Inspection	Follow up on safe sleep				Inspector's Name	Candy Vargas		
Provider's Email	Stephanieparedez05@gmail.com				Inspector's Email	candy.vargas@ct.gov		

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/Applicant/Substitute/Emergency Caregiver

REGULATORY VIOLATIONS

Statute and/or Regulation:	[19a-87b-13]	Description:	093-Access
<p>Provider not in compliance with allowing OEC staff immediate access to any part of the facility during customary business hours. Immediate access was not granted to a locked bedroom on the second floor, key was not readily available.</p>			
Statute and/or Regulation:		Description:	
Statute and/or Regulation:		Description:	
Statute and/or Regulation:		Description:	
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Statute and/or Regulation:	Description:
OTHER FINDINGS-REGULATIONS IN COMPLIANCE	
Statute and/or Regulation: [19a-87b-10(a)]	Description: 004-Capacity
Statute and/or Regulation: [19a-87b-5(e)]	Description: 006-Infant/Toddler Restriction

Statute and/or Regulation:	Description:
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Statute and/or Regulation:	Description:
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Statute and/or Regulation:	Description:
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Statute and/or Regulation:	Description:
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WERE VIOLATIONS CITED DURING THIS VISIT?	YES/NO: Yes
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DISCUSSIONS/COMMENTS



Upon arrival the substitute was observed caring for four children, two of which were infants. During the walkthrough a bedroom on the second floor was observed locked, and there was no key readily available. It was discussed with the provider was during inspection conducted on October,7th, 2025 that access has to be immediate to all parts of the program during customary business hours.

The provider disclosed to the licenser that her brother might have lost the key to bedroom, however, she did tell him to leave the bedroom door unlocked.

No safe sleep violations cited.

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.
- Items left blank on this form were not monitored during this visit. Only the regulations marked as compliant or non-compliant were monitored or discussed. Providers are required by statutes and regulations to be in compliance at all times.
- **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: 10/22/2025	 (Signature of Provider/Substitute/Applicant)
Candy Vargas (Printed Name)	 (Printed Name)		STEPHANIE PAREDEZ DIAZ (Printed Name)