



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	FRIENDS CENTER FOR CHILDREN				License Number	DCCC.70792		Date of Inspection	11/03/2025		
					Expiration Date	11/30/2028		Time of Inspection	03:19 PM		
Address	25 FLINT ST NEW HAVEN CT 06513				Telephone	(203) 468-1966		Licensed Capacity	40		
					Hours of Operation	7:30 AM - 5:30 PM		Under Three Capacity	40		
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	6 weeks - 3 years		
New Address					Night Hours	No	Summer Hours	Open	Weekend Hours	No	
					Program's Email	info@friendscenterforchildren.org					
Operator	FRIENDS CENTER FOR CHILDREN INC				Director	KATHERINE FLORES					
Endorsements	Under Three				Name of Inspector	Kristi Morgan					
Numbers of Staff/Children Present	# Children Present under age 3	0	# Total Children Present	0	# of Staff Present	3	Purpose of Visit	Self-report virtual investigation for case #2025-1228			

SUBSTANTIATED VIOLATIONS

Statute and/or Regulation and Description: [19a-79-4a(d)(4)(D)] 028- Supervision

Program not in compliance with ensuring the supervision of children at all times while outdoors when 2 children under the age of 3 were unsupervised in a fenced area outside of the playgrounds for approximately 3-5 minutes.

Statute and/or Regulation and Description:

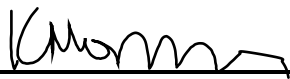
Statute and/or Regulation and Description:


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NOT SUBSTANTIATED or PENDING	
Statute and/or Regulation and Description:	[19a-79-3a(d)(2)-(7)] Pending 011-Policies- complete, implemented
Policy compliance is pending further investigation	
Statute and/or Regulation and Description:	[19a-79-5a(a)(3)(A)] Not Substantiated 041- Injury, Illness, Incident, Accident reports

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

DISCUSSIONS/COMMENTS

Were Violations cited during this visit? Y or N?	Yes	NOTE: * It is the operator's responsibility to ensure compliance with all local codes and ordinances.
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Signature of OEC Representative		Emailed	Signature of Person in Charge
Printed Name	Kristi Morgan	Kathy Flores	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: 11/17/2025	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: kristi.morgan@ct.gov	CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf
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