



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 Website: www.ctoec.org

FAMILY CHILD CARE HOME INSPECTION

Provider	JULISSA PERDOMO				License Number	DCFH.56953	Date of Inspection	11/20/2025
					Expiration Date	8/31/2029	Time of Inspection	08:37 AM
Address	111 S MAIN ST UNIT 4 NORWALK CT 06854-3148				Telephone	(347) 261-0460	Regular Capacity	6
					Hours of Operation	7:00 AM – 5:00 PM	School Age Capacity	3
Is this a Change of Address?	Yes?	X	No?		Days of Operation	Mon-Fri	Summer Hours	Open
New Address	1225 CUTSPRING RD STRATFORD CT 06614				# Under 18 mths present	0	Weekend Hours	No
					Total children present	0	Night Hours	No
Type of Inspection	CHANGE OF ADDRESS				Inspector's Name	Silvana Carreon Zegarra		
Provider's Email	Delanney.200@gmail.com				Inspector's Email	silvana.carreon-zegarra@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).

Signature of Provider/Substitute/Applicant

TERMS OF REGISTRATION 19a-87b-5

X	4. Capacity	
X	5. Non-transferability of license	Pending?
X	6. Infant/Toddler Restriction	
X	7. License Posted	
X	8. Parent Access to OEC Phone Number	
X	9. Photo ID	
X	10. Requests for Information	
X	11. Notification of Change	

QUALIFICATION OF PROVIDER 19a-87b-6

X	12. Awareness of, Understanding of Regulations	
X	13. Medical statement	
	Expiration date: 07/11/2028	
X	14. First Aid Certificate	
	Expiration date: 06/07/2027	

X	15. CPR Certificate	
	Expiration date:	
	06/07/2027	
X	16. Judgment	

MEMBERS OF THE HOUSEHOLD 19a-87b-7

X	17. Medical Statement	
X	18. Household Environment	

QUALIFICATIONS OF STAFF 19a-87b-8

X	19. Sub/Assistant	Y/N	Name:	Delaney Ventura/ Nikaury Perez Suero	Appvl #	92980/ 92872
	Type of Staff:	Y				
	Substitute					
X	20. Emergency Caregiver					

COMPREHENSIVE BACKGROUND CHECK 19a-87b-8a

<input type="radio"/>	21. Background Check(s)	Provider not in compliance with ensuring comprehensive background check is current for a household member.
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PHYSICAL ENVIRONMENT 19a-87b-9

X	22. Clean/Sanitary Environment	
X	23. Freedom of Hazards	
<input type="radio"/>	24. Harmful Substances/Materials Inaccessible	Provider not in compliance with ensuring harmful substances and materials are inaccessible to children. The OEC representative observed cleaning and toileting products under the bathroom sink, as well as cleaning supplies under the kitchen sink accessible to children.
X	25. Bio-contaminants Disposed Safely	
X	26. Safe Storage of Flammables	
<input type="radio"/>	27. Safe Door Fasteners	Provider not in compliance with ensuring safe door fasteners. The provider does not have the key to open the bathroom and is not able to open it from the outside.
X	28. Electrical Safety	
X	29. Safe Exits	
X	30. Basement Supervision	Y/N
		Y
	Used for Care ?	Y/N
<input type="radio"/>	31. Stairways - Protected, Handrails	Provider not in compliance with maintaining a sturdy handrail with no areas in which a child may fall through. The OEC representative observe the front stairs is missing sturdy handrail and a barrier for the retaining wall.
X	32. Emergency Plan	

X	33. Emergency Evacuation Drills - Quarterly/Log		
X	34. Smoke Detectors		
X	35. Carbon Monoxide Detector		
X	36. Fire Extinguisher- 5 lb. ABC/Installed		
X	37. Auxiliary Heating System Y Type? Wood	Appvd?	
X	38. Safe Storage of Weapons and Ammunition		
X	39. Safe Space- Sufficient Indoors Outdoors Y Y		
O	40. Body of Water- Type: Over ground pool Barrier?	Y/N Y	Provider not in compliance with maintaining a sturdy fence/barrier 4 feet high. The over ground pool is 44 inches high, the fence is 46 inches and the porch fence is 36 inches.
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		
X	46. Water Temperature- 60°-120°		
X	47. Pasteurization of Milk Supply		
X	48. Working Phone, Emergency Numbers Posted		
X	49. Safe Transportation Registered, Insured, Restraints		
X	50. First Aid supplies		
O	51. Pet protection Pets? Rabies Certs?	Type: 2 cats one dog Y N	Provider not in compliance with maintaining current rabies vaccination certificate(s) when the dog's rabies certificate expired on September 2025.
X	52. Smoking Prohibited		

RESPONSIBILITIES OF PROVIDER 19a-87b-10

X	53. Enrollment Form		
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X	54. Child Health Record	
X	55. Immunizations	
X	56. Emergency Permission	
X	57. Authorized Release	
X	58. Field Trip and Transportation Permission-To/From School	
X	59. Swimming Permission	
X	60. Incident Log	
X	61. Confidentiality	
X	62. Meeting the Child's Needs	
X	63. Sufficient Play Equipment	
X	64. Good Nutrition- Meals/Snacks, Water Available	
X	65. Handwashing	
X	66. Flexible and Balanced Written Schedule	
X	67. Personal Articles- Blanket, Towel, Toilet Articles	
X	68. Proper Rest Provisions – Safe Cribs	
X	69. Individual Plan for Care (Written if Applicable)	
X	70. Cultural Differences, Sp. Needs, Dev. Appr. Activities	
X	71. Infant Care, Indiv Attention, Held for Bottle Feedings	
X	72. Infants Placed on Back for Sleeping	
X	73. Infants Placed in Crib, Well constructed, Snug Mattress, Tight Sheet	

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

SICK CHILD CARE 19a-87b-11

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

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

X	93. Access- Immediate, Entire or Part of Facility and Records	
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ADMINISTRATION OF MEDICATIONS 19a-87b-17 Y/N? N

X	94. Policies and Procedures for Admin of Meds	
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X	95. Parent Permission for Nonprescription Topical Meds	
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X	96. Notification - Documentation of Med Error(s)	
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X	97. Nonprescription Topical Meds- Stored/Labeled	
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X	98. Unused - Expired Nonprescription Meds	
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X	99. Documented Medication Trained Staff	
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X	100. Written Auth Prescriber/Parent Permission	
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X	101. MAR Maintained	
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X	102. Prescription Meds - Stored/Labeled	
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X	103. Unused/Expired Prescription Meds	
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X	104. Emergency Meds- Equip. Labeled/Current	
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X	105. Self-Admin. Of Meds	
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X	106. Petition for Special Medication Authorization	
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MONITORING OF DIABETES 19a-87b-18 Child with diabetes enrolled? N

X	108. Policies for Finger Stick Blood Glucose Testing	
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X	109. Finger Stick Blood Glucose Testing - Staff Trained	
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X	110. Self Admin of Finger Stick Blood Glucose Testing	
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X	111. Testing Equip. & Supplies- Maintain, Labeled, Locked, Disposed	
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X	112. Finger Stick Blood Glucose Testing Records	
X	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:	6 out of 108
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DISCUSSIONS/COMMENTS

Care will be provided in the dining room and part of the living room. The bathroom is on the same level. The outdoor area is located in the backyard. The provider informed that she will remove the pool, which is fenced (36/45 inches) It has two emergency exit. The provider received Infant Sleep Policy.

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)
Silvana Carreon Zegarra (Printed Name)	 (Printed Name)	12/04/2025	JULISSA PERDOMO (Printed Name)