




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	MARIA MARTINEZ				License Number	DCFH.56590	Date of Inspection	12/03/2025
					Expiration Date	2/28/2027	Time of Inspection	01:40 PM
Address	18 ORCHARD TER EAST HARTFORD CT 06108-2127				Telephone	(860) 977-7628	Regular Capacity	6
					Hours of Operation	7:00 AM – 5:30 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	5	Night Hours	No
Type of Inspection	UNANNOUNCED INSPECTION - FULL				Inspector's Name	Jannie Thornton		
Provider's Email	UNIK1208@YAHOO.COM				Inspector's Email	jannie.thornton@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	
O	13. Medical statement Expiration date: 04/10/2025	Provider not in compliance with maintaining a current medical statement when current certificate expired 4/10/2025
X	14. First Aid Certificate Expiration date: 04/26/2026	

X	15. CPR Certificate	
	Expiration date:	
	04/26/2026	
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: Maria Cotto	Appvl # 92974
	Type of Staff:	Y		
	Substitute			
X	20. Emergency Caregiver			

COMPREHENSIVE BACKGROUND CHECK 19a-87b-8a

X	21. Background Check(s)	
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PHYSICAL ENVIRONMENT 19a-87b-9

X	22. Clean/Sanitary Environment			
X	23. Freedom of Hazards			
X	24. Harmful Substances/Materials Inaccessible			
X	25. Bio-contaminants Disposed Safely			
X	26. Safe Storage of Flammables			
X	27. Safe Door Fasteners			
X	28. Electrical Safety			
X	29. Safe Exits			
X	30. Basement Supervision	Y/N		
		Y		
	Used for Care ?	Y/N		
X	31. Stairways - Protected, Handrails			
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 N	Appvd?	
	Type?		
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		
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		
X	51. Pet protection	Type: Cat, Dog	
	Pets?	Y	
	Rabies Certs?	Y	
X	52. Smoking Prohibited		

RESPONSIBILITIES OF PROVIDER 19a-87b-10

X	53. Enrollment Form	
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<input type="radio"/>	54. Child Health Record	Provider not in compliance with maintaining current child health record(s) when one child's health record was not updated.
<input checked="" type="radio"/>	55. Immunizations	
<input type="radio"/>	56. Emergency Permission	Provider not in compliance with maintaining written parent permission for emergency medical care when one child's permission was not on site.
<input type="radio"/>	57. Authorized Release	Provider not in compliance with maintaining written parent permission to authorize removal of child(ren) when one permission was not updated.
<input checked="" type="radio"/>	58. Field Trip and Transportation Permission-To/From School	
<input checked="" type="radio"/>	59. Swimming Permission	
<input checked="" type="radio"/>	60. Incident Log	
<input checked="" type="radio"/>	61. Confidentiality	
<input checked="" type="radio"/>	62. Meeting the Child's Needs	
<input type="radio"/>	63. Sufficient Play Equipment	Provider not in compliance with ensuring manufacturer guidelines are followed for furniture, equipment and any toy accessible to children when an extra mattress was added to 2 pack n plays.
<input checked="" type="radio"/>	64. Good Nutrition-Meals/Snacks, Water Available	
<input checked="" type="radio"/>	65. Handwashing	
<input checked="" type="radio"/>	66. Flexible and Balanced Written Schedule	
<input checked="" type="radio"/>	67. Personal Articles- Blanket, Towel, Toilet Articles	
<input checked="" type="radio"/>	68. Proper Rest Provisions – Safe Cribs	Provider not in compliance with ensuring children nap or rest on cribs, beds, cots, mats or other provisions when.
<input checked="" type="radio"/>	69. Individual Plan for Care (Written if Applicable)	
<input checked="" type="radio"/>	70. Cultural Differences, Sp. Needs, Dev. Appr. Activities	
<input checked="" type="radio"/>	71. Infant Care, Indiv Attention, Held for Bottle Feedings	
<input checked="" type="radio"/>	72. Infants Placed on Back for Sleeping	
<input checked="" type="radio"/>	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

X	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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