



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
 FOLLOW UP – PARTIAL INSPECTION**

Program Name	BERLIN YMCA AT GRISWOLD BEFORE/AFTER CARE				License Number	DCCC.70319		Date of Inspection	01/15/2026		
					Expiration Date	8/31/2028		Time of Inspection	03:30 PM		
Address	133 HEATHER LN BERLIN CT 06037-2056				Telephone	(860) 357-6211		Licensed Capacity	99		
					Hours of Operation	7:00 AM – 6:00 PM		Under Three Capacity	0		
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	5 – 12 years		
New Address					Night Hours	No	Summer Hours	Closed	Weekend Hours	No	
					Program's Email	sfusco@nbbymca.org					
Operator	MERIDEN-NEW BRITAIN-BERLIN YMCA, INC.				Director	STEPHANIE FUSCO					
Endorsements	School Age				Name of Inspector	Johanne Dalo					
Numbers of Staff/Children Present	# Children Present under age 3	0	# Total Children Present	25	# of Staff Present	2	Purpose of Visit	Follow up inspection from inspection conducted on 12/22/25			

REGULATIONS NOT IN COMPLIANCE

Statute and/or Regulation and Description: [19a-79-9a(b)(1)(A-F)-(2)(A-C) 160- Medication Trainings

Program not in compliance with ensuring staff are trained in oral/topical/inhalant medication topics when observed for the week of 01/05/26, no staff trained in administration of meds on 01/07 & 01/08 in Pm session. Program not in compliance with ensuring staff are trained in premeasured injectable medication topics when observed for the week of 01/05/26, no staff trained in epinephrine in AM session.

Statute and/or Regulation and Description:

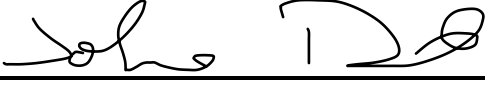
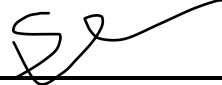
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DISCUSSIONS/COMMENTS

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			Signature of Person in Charge
Printed Name	Johanne Dalo	Stephanie Fusco	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: 01/29/2026	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: johanne.dalo@ct.gov	CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf
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