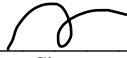




**FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION**

<b>Provider</b>	SHARI IVES				<b>License Number</b>	DCFH.57079	<b>Date of Inspection</b>	02/10/2026
					<b>Expiration Date</b>	7/31/2026	<b>Time of Inspection</b>	02:57 PM
<b>Address</b>	4B STONEGATE CIRCLE BRANFORD CT 06405-7311				<b>Telephone</b>	(203) 443-0446	<b>Regular Capacity</b>	6
					<b>Hours of Operation</b>	6:30 AM – 6:00 PM	<b>School Age Capacity</b>	3
<b>Is this a Change of Address?</b>	Yes?		No?	X	<b>Days of Operation</b>	Mon-Fri	<b>Summer Hours</b>	Open
<b>New Address</b>					<b># Under 18 mths present</b>	2	<b>Weekend Hours</b>	No
					<b>Total children present</b>	7	<b>Night Hours</b>	No
<b>Type of Inspection</b>	Follow-up inspection				<b>Inspector's Name</b>	Melissa Lohr		
<b>Provider's Email</b>	shari.ives@yahoo.com				<b>Inspector's Email</b>	melissa.lohr@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**

<b>Statute and/or Regulation:</b> [19a-87b-10(b)(1)]	<b>Description:</b> 053-Enrollment Form
Provider not in compliance with maintaining child enrollment form(s) when forms were not on site for 3 children present.	
<b>Statute and/or Regulation:</b> [19a-87b-10(b)(2)]	<b>Description:</b> 054-Child Health Record
Provider not in compliance with maintaining child health record(s) when forms were not on site for 3 children present.	
<b>Statute and/or Regulation:</b> [19a-87b-10(b)(2)(A)(v) and/or 19a-87b-10(l)]	<b>Description:</b> 055-Immunizations
Provider not in compliance with maintaining immunization record(s) when forms were not on site for 3 children present.	
<b>Statute and/or Regulation:</b> [19a-87b-10(b)(3)(B)]	<b>Description:</b> 056-Emergency Permission Form
Provider not in compliance with maintaining written parent permission for emergency medical care when permissions were not on site for 3 children present.	
<b>Statute and/or Regulation:</b> [19a-87b-10(b)(3)(A)]	<b>Description:</b> 057-Authorized Release
Provider not in compliance with maintaining written parent permission to authorize removal of child(ren) when permissions were not on site for 3 children present.	

<b>Statute and/or Regulation:</b> [19a-87b-10(b)(3)(C)-(D)-(F)]	<b>Description:</b> 058-Field Trip and Transportation Permission
Provider not in compliance with maintaining written parent permission for transportation of child(ren) when permissions were not on site for 3 children present.	
<b>Statute and/or Regulation:</b> [19a-87b-10(b)(3)(E)]	<b>Description:</b> 059-Swimming Permission
Provider not in compliance with maintaining written parent permission for recreational swimming when permissions were not on site for 3 children present.	
<b>Statute and/or Regulation:</b> [19a-87b-10(b)(4)]	<b>Description:</b> 060-Incident Log
Provider not in compliance with maintaining an incident log for each child when logs were not on site for 3 children present.	
<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>OTHER FINDINGS-REGULATIONS IN COMPLIANCE</b>	
<b>Statute and/or Regulation:</b> [19a-87b-9(h)]	<b>Description:</b> 046-Water Temperature
<b>Statute and/or Regulation:</b> [19a-87b-10(f)(1)]	<b>Description:</b> 073-Infants Placed in Safe Crib/Snug Mattress/Tight Sheet

Statute and/or Regulation: [19a-87b-10(i)(4)]	Description: 085-Substitute Care
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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?	<u>YES/NO:</u> Yes
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**DISCUSSIONS/COMMENTS**

Substitute was present with her 3 grandchildren who are not currently enrolled.

**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:  02/24/2026	 (Signature of Provider/Substitute/Applicant)
Melissa Lohr (Printed Name)	Chaelyn Lombardo (Printed Name)		SHARI IVES (Printed Name)