



**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](mailto:oc.licensing@ct.gov) Website: [www.ctoec.org](http://www.ctoec.org)

**CHILD CARE CENTER/GROUP CHILD CARE HOME  
 INVESTIGATION**

Program Name	GROWING MINDS DAYCARE & LEARNING CENTER, LLC				License Number	DCCC.70694		Date of Inspection	02/27/2026		
					Expiration Date	2/28/2027		Time of Inspection	11:18 AM		
Address	1435 BEDFORD ST STE 1E STAMFORD CT 06905-5225				Telephone	(203) 322-8880		Licensed Capacity	46		
					Hours of Operation	7:00 AM - 5:30 PM		Under Three Capacity	27		
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	6 weeks - 5 years		
New Address					Night Hours	No	Summer Hours	Open	Weekend Hours	No	
					Program's Email	info@gmdaycarellc.com					
Operator	GROWING MINDS DAYCARE & LEARNING CENTER LLC				Director	NADEGE MEDOIT-JEAN					
Endorsements	Pre-School, Under Three				Name of Inspector	Karen Hicks					
Numbers of Staff/Children Present	# Children Present under age 3	17	# Total Children Present	34	# of Staff Present	9	Purpose of Visit	Investigation 2026-147			

**SUBSTANTIATED VIOLATIONS**

Statute and/or Regulation and Description:	[19a-79-3a(b)(7)(A)]	006-Child behavior management
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Staff failed to provide developmentally appropriate discipline to a child who used a bad word when the staff member used a harsh tone with the child, rubbed her face aggressively with a tissue and tugged at the child's face to make her look at the teacher causing child to cry.

Statute and/or Regulation and Description:	
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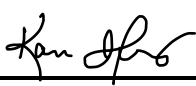

Statute and/or Regulation and Description:	
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<b>NOT SUBSTANTIATED or PENDING</b>	
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**DISCUSSIONS/COMMENTS**

Were Violations cited during this visit? Y or N?	<b>Yes</b>	<b>NOTE:</b> * 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	<b>Karen Hicks</b>	<b>Nadege Medoit-Jean</b>	Printed Name
2 <sup>nd</sup> OEC Representative	<b>APPLICANTS:</b> You <i>MAY NOT OPERATE</i> until all requirements have been met and a license has been issued by the Agency.		
Printed Name	<b>THIS INSPECTION SHALL BE POSTED OR SHALL BE AVAILABLE FOR REVIEW UPON REQUEST.</b>		

	Written Corrective Action Plan due by: <b>03/13/2026</b>	<b>DIVISION OF LICENSING</b> 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552 Email: <a href="mailto:oc.licensing@ct.gov">oc.licensing@ct.gov</a> Website: <a href="http://www.ctoec.org">www.ctoec.org</a>
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OEC Representative's Email: <b>karen.hicks@ct.gov</b>	CAP: <a href="https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf">https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf</a>
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