



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 INVESTIGATION

Program Name	DORIS MULLER PRESCHOOL @ THE STONINGTON COMO					License Number	DCCC.13227		Date of Inspection	04/09/2026	
						Expiration Date	12/31/2029		Time of Inspection	10:30 AM	
Address	28 CUTLER STREET- STONINGTON COMMUNITY CENTER STONINGTON CT 06378					Telephone	(860) 535-2476		Licensed Capacity	96	
						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	3 years – 12 years	
New Address						Night Hours	No	Summer Hours	Open	Weekend Hours	No
						Program's Email	p.rouquayrol@thecomo.org				
Operator	STONINGTON COMMUNITY CENTER INC					Director	PRISCILLA RAUQUAYROL				
Endorsements	Pre-School, School Age					Name of Inspector	Dianna Wassenhove				
Numbers of Staff/Children Present	# Children Present under age 3	0	# Total Children Present	44	# of Staff Present	5	Purpose of Visit	Investigation 2026-277			

SUBSTANTIATED VIOLATIONS

Statute and/or Regulation and Description:	[19a-79-3a(b)(7)(E)]	009-Mandated reporting
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The regulation regarding mandated reporting was found to be in compliance during this visit. . Program not in compliance with ensuring mandated reporting when an incident happened between two children of a sexual nature and DCF was reported.

Statute and/or Regulation and Description:	[19a-79-5a(a)(3)(A)]	041- Injury, Illness, Incident, Accident reports
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Program not in compliance with maintaining current/complete injury, illness, incident, accident reports for children when no incident reports were completed for either family involved in the incident

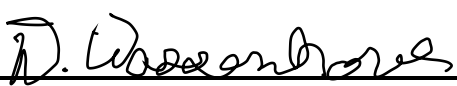
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DISCUSSIONS/COMMENTS

Make sure program documents all required documentation and ensure documents are signed by each person involved.

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.	
Signature of OEC Representative			Signature of Person in Charge
Printed Name	Dianna Wassenhove		Printed Name
2 nd OEC Representative			APPLICANTS: You <i>MAY NOT OPERATE</i> until all requirements have been met <u>and</u> 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: 04/23/2026	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
OEC Representative's Email: dianna.wassenhove@ct.gov		CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf	