



**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  
 FOLLOW UP – PARTIAL INSPECTION**

|                                   |                                       |    |                          |    |                    |                             |                  |   |                     |     |  |
|-----------------------------------|---------------------------------------|----|--------------------------|----|--------------------|-----------------------------|------------------|---|---------------------|-----|--|
| Program Name                      | LITTLE RAINBOW BRIDGEPORT             |    |                          |    | License Number     | DCCC.70691                  |                  | Date of Inspection                                  | 04/23/2026          |     |  |
|                                   |                                       |    |                          |    | Expiration Date    | 2/28/2027                   |                  | Time of Inspection                                  | 09:47 AM            |     |  |
| Address                           | 24 WHITTIER ST<br>BRIDGEPORT CT 06605 |    |                          |    | Telephone          | (203) 345-3267              |                  | Licensed Capacity                                   | 59                  |     |  |
|                                   |                                       |    |                          |    | Hours of Operation | 6:00 AM – 5:00 AM           |                  | Under Three Capacity                                | 45                  |     |  |
| Is this a Change of Address?      | Yes?                                  |    | No?                      | X  | Days of Operation  | Mon-Fri                     |                  | Ages Served   | 6 – 5 weeks – years |     |  |
| New Address                       |                                       |    |                          |    | Night Hours        | Yes                         | Summer Hours     | Open  | Weekend Hours       | Yes |  |
|                                   |                                       |    |                          |    | Program's Email    | Preschool@Lrdaycare.com     |                  |   |                     |     |  |
| Operator                          | LITTLE RAINBOW BRIDGEPORT, LLC        |    |                          |    | Director           | BETTY BREA, KEISHA HILLAIRE |                  |   |                     |     |  |
| Endorsements                      | Night Care, Pre-School, Under Three   |    |                          |    | Name of Inspector  | Kristi Morgan               |                  |   |                     |     |  |
| Numbers of Staff/Children Present | # Children Present under age 3        | 23 | # Total Children Present | 32 | # of Staff Present | 9                           | Purpose of Visit | Partial inspection on safe sleep from case 2026-245 |                     |     |  |

**REGULATIONS NOT IN COMPLIANCE**

|  |                       |
|--|-----------------------|
| Statute and/or Regulation and Description: | [-] 000 No Violations |
|--|-----------------------|

No violations were cited during this inspection

|  |  |
|--|--|
| Statute and/or Regulation and Description: |  |
|--|--|



|  |  |
|--|--|
| Statute and/or Regulation and Description: |  |
|--|--|

|  |  |
|--|--|
| <b>Statute and/or Regulation and Description:</b>                                    |  |
| <b>Statute and/or Regulation and Description:</b>                                    |  |
| <b>Statute and/or Regulation and Description:</b>                                    |  |
| <b>Statute and/or Regulation and Description:</b>                                    |  |
| <b>Statute and/or Regulation and Description:</b>                                    |  |
| <b>Statute and/or Regulation and Description:</b>                                    |  |
| <b>REGULATIONS IN COMPLIANCE</b>   |  |
| <b>Statute and/or Regulation and Description:</b>                                    | [19a-79-10(g)(1-8)]                      130- Safe Sleep |
| The regulation regarding safe sleep was found to be in compliance during this visit. |  |
| <b>Statute and/or Regulation and Description:</b>                                    |  |

|   |  |
|---|--|
| <b>Statute and/or Regulation and Description:</b> |  |
| <b>Statute and/or Regulation and Description:</b> |  |
| <b>Statute and/or Regulation and Description:</b> |  |
| <b>Statute and/or Regulation and Description:</b> |  |

**DISCUSSIONS/COMMENTS**

|  |           |  |
|--|-----------|--|
| Were Violations cited during this visit? Y or N? | <b>No</b> | <b>NOTE:</b> * 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                       | <b>Kristi Morgan</b>  | <b>keisha hillaire</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>DIVISION OF LICENSING</b><br>450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103<br>Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552<br>Email: <a href="mailto:oc.licensing@ct.gov">oc.licensing@ct.gov</a> Website: <a href="http://www.ctoec.org">www.ctoec.org</a> |
|---|--|---|

|   |  |
|---|--|
| OEC Representative's Email: <b>kristi.morgan@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> |
|---|--|