

Blanco Caballero, Genesis

380 East 143rd Street
Bronx, NY

2 Inspection Visits Since 2025 - 5 Findings - 100% Corrected at Visit

Most recent inspection: Oct 20, 2025

● 5 Important

Across 2 inspections since 2025, the issues cited most often were The Provider, Assistant(s), and Substitute(s), Must Each Submit a Medical Statement on Forms Furnished by the Office or an Approved Equivalent From a Health Car (2), Applicants for Renewal of a License Must Submit to the Office at Least 60 Days in Advance of the Expiration Date of the License the Following: Proof of Complian (1), and All Child Day Care Providers, Employees, Volunteers and Any Person Age Eighteen (18) or Older Living or Who Begins to Live in a Group Family Day Care Home Are R (1). None of the 5 findings were critical.

Inspection Visits

Oct 20, 2025 3 Findings ● 3 Important

● **All Child Day Care Providers, Employees, Volunteers and Any Person Age Eighteen (18) or Older Living or Who Begins to Live in a Group Family Day Care Home Are R**

416.13(d)

Corrected at visit

● **Each Employee and Volunteer Must Complete a Minimum of Thirty (30) Hours of Training Every Two Years. The Required 30 Hours of Training Every Two Years Is Subje**

416.14(c)

Corrected at visit

● **Applicants for Renewal of a License Must Submit to the Office at Least 60 Days in Advance of the Expiration Date of the License the Following: Proof of Complian**

416.2(d)(7)

Corrected at visit

Jan 9, 2025 2 Findings ● 2 Important

About this report

Childery generates this report from public inspection records published by the New York State Office of Children and Family Services. Childery did not conduct these inspections or produce the original state reports. Childery is an independent directory and is not affiliated with the New York State Office of Children and Family Services.

- **The Provider, Assistant(s), and Substitute(s), Must Each Submit a Medical Statement on Forms Furnished by the Office or an Approved Equivalent From a Health Car**

416.11(b)(1)

Corrected at visit

- **The Initial Medical Statement for Providers, Assistants, and Substitutes Must Include the Results of a Mantoux Tuberculin Test or Other Federally Approved Tuber**

416.11(b)(6)

Corrected at visit

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