

## Children of Paradise

171 Lott Street  
Brooklyn, NY

### 2 Inspection Visits Since 2026 - 5 Findings - 20% Corrected at Visit

Most recent inspection: May 19, 2026

● 5 Important

Across 2 inspections since 2026, 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 (3), The Provider, Assistant(s), and Substitutes Must Each Meet the Following Qualifications: Have a Minimum of Either Two (2) Years of Experience Caring for Childre (1), and Safety Plan Is a Written Strategy in Which the Office Imposes Restrictions on a Licensed or Registered Child Care Program When Allegations of Risk of Harm to Ch (1). None of the 5 findings were critical.

### Inspection Visits

**May 19, 2026** 3 Findings ● 3 Important

- **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)(ii)
- **The Program Must Retain on File in the Program a Medical Statement, on Forms Furnished by the Office or Approved Equivalents, From a Health Care Provider for Ea**  
416.11(b)(7)
- **The Provider, Assistant(s), and Substitutes Must Each Meet the Following Qualifications: Have a Minimum of Either Two (2) Years of Experience Caring for Childre**  
416.13(a)(2)

**Jan 9, 2026** 2 Findings ● 2 Important

- **Safety Plan Is a Written Strategy in Which the Office Imposes Restrictions on a Licensed or Registered Child Care Program When Allegations of Risk of Harm to Ch**  
413.2(d)(20)

Corrected at visit

#### 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 Program Must Retain on File in the Program a Medical Statement, on Forms Furnished by the Office or Approved Equivalents, From a Health Care Provider for Ea**

416.11(b)(7)

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