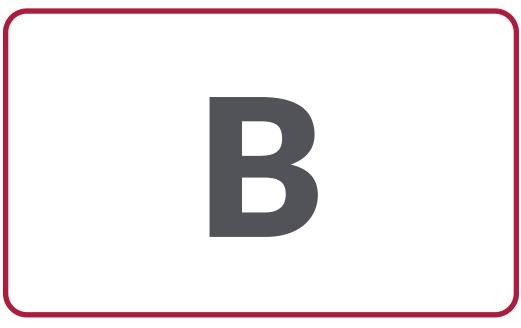


Child Care Scholarship Program Informal Child Care Monitoring Inspections



First letter of the provider's last name.

Posted June 2025

DISCLAIMER: The information in this document is provided as a public service by the MSDE Office of Child Care. Although the information contained herein is believed to be accurate and reliable, it is presented without guarantees and does not constitute an endorsement, either expressed or implied, of any child care provider or program. The Office of Child Care disclaims liability for any errors in, or omissions from monitoring record information.

200 West Baltimore Street Baltimore, MD 21201 | 410-767-0100 Deaf and hard of hearing use Relay.

marylandpublicschools.org

Notes	<u>.</u>			Û
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Virtual Inspection In-person Inspection		larship Program AL CARE	Child	Return to ocs.informalproviders@maryland.gov
spection Date 6/27/2024	Time In: 3 30pm	Time Out. 4 45pr	n Ren	ult. Follow Up Needed
pection Date: 7/09/2024	Time In: 11.45a			ult Passed
formal Care			-	
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	1		-1-	
rst Name: Shirley rovider ID #	Last Name: Bac	con	_	rider ID: 547366
are Location Inspected			Em	11 J
dreet Address oddress Verified? Yes	Caty	County		State Zip Code
iame of Children in Care	Indd panes (Freedod)		1.644	/ Present (Y/N)
and a annualen in care	(add pages if needed) Scholan	ship Date of Birth	Age	/ Present (init)
		12/28/2022	2 years	old / Y
		12/28/2022	2 years	old / Y
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	Standard Met	Comments/Notes
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Physical injury	Y Y	
Mental injury		
A child in care is not subjected to any form of neglect, industriant of the second	¥	
A child in care is not subjected to mistreatment, including: Anv oblivente and their burks a child chelefable re- enrolionally, schuling Provide means of physical discipling Any other means of physical discipling Typing child to a col of other equipment	Y	
neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit-	u.	
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The Encomment Bands to Ch Dark must be available and earlier to (including needed medications) and Energency Docasterias	reaccilds in the arms)	of an amamanna. This contains a Niesetar Roomh VP
Disaster Supply Kit		
Linectore. Rename and determine that each stern is edequatery inc contains enough supplies for each child in care. Also that the terms	iudes in the bisasier are clean, organized	Supply NJ. De centari chat the creasiel Gregory NJ. I, and usable. Comment and note below if needed.
⊠Flashlight SIBottied water		SFolder or binder for EPP documents
2 Batteries. 20 Non-penshab	ie food	Backpack(s) or carrying case(s)
SRutable Frei Ant Mr. SDiapers		2)Dortaldan septectal boys or gamma
EThermometer EChange of clo	atuena	SI Heavy Duty Scissors. Duct Tace/ Packing Tape & Sealing Plastic/ Trash Dags
☐Medications N/A StBlanket(s)		
SDE OCC Informal Care Inspection Checklist 2020-03-26	Page 2 of 3	

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To be eliserveil for compliance on 7/08/2024: Obse Duttom a for child	rved
Pressman Plan and Mathadam Brokening	
 The heating system is pending advise from 	MSDE on how to proceed.
Emergency Documents	
as informal informer cinergency Prepareoness	Pan (this completed form)
Plants - and Deleterate	
Person responsible for updating the Disaster Supply	Kil and the Emergency Documents regularly
First Name Shirley La	il Name Bacon
Description of how the Emergency Ready-to-Go Pac	k will be transported to an evacuation location
Shelter In Place Procedures;	
The Provider will grab the emergency bag and guide	all of the children to the hall bathroom (1 door 0 windows). On the way to the
they are secured and after the emergency is over.	With the second se
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they are secured and after the emergency is over. Evacuation Procedures:	
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⊠Virtual Inspection □In-person Inspection	Child	Care Scholars INFORMAL (SPECTION CH	CARE	unu varg	Return to: ccs.informalproviders@maryland.g ov	
Inspection Date: 09/02/2022	Time In: 3:30 PM		Time Out: 4:21 Pl	Result: PASSED		
Informal Care	d-					
Type of Care (check one):	Non-relative Info	rmal Provider Ca	are	Informal Pro	vider Care	
Provider Information						
First Name: Christina	Last	Name: Baierlein		Provid	ler ID: 493093	
Provider ID #:				Email		
Care Location Inspected						
Street Address: City Address Verified? Yes.	Coun	ty	State MD Zip Co	ode		
Name of Children in Care (add pag	es if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)	
			(11/10/2020)	1yr/N		
			(01/03/2015)	7yr/N		
					1	
					1	
					1	
					1	
Health and Safety Training: Basic Health and Safety Training Co	ompleted?		Standard Met Y/N Y	Corrective Action /Timeframe if needed Relative Informal Care - Certificate Subr		
Home is free of health and safety			Standard Met Y/N	Commen		
Is in good repair			Y	-	Very tidy	
 Is free of insect or rodent i 	nfestation		۴Y		No evidence of infestation	
 Is well-lit and well-ventilate 	ed		Y		Well-lit and ventilated	
 Has hot and cold running 	water		Y		Tested and observed by provider	
Has a working inside toilet	C		Y	F	lushed and observed in provider	
 Has utilities for cooking, light 	phting, and heat	ing	Y			
Has a working and safe here	eating system		Y	1		
 Has a working refrigerator 	and stove	10	Y			
 Has a working telephone 			Y		Only working cellphone	
 Has operational smoke de 	etector(s)		Y	-	Tested and observed by provider	
 Has first aid kit/supplies 	State Provide 14		Y	-		
 Has protective coverings of accessible to children 	on any electrical	l outlet that is	Y			
Harmful items are stored approp children:	riately and awa	ay from	Standard Met Y/N		e Action /Timeframe if needed	
Sharp or pointed items			Y	K	(itchen draw with lock on cabinet	
Medications of any kind			Y		High kitchen cabinet	
 Matches, lighters, and flar 	mmable product	S	Y		High kitchen cabinet	
Alcoholic beverages			Y		Stored above fridge	
Guns			Y		Does not own	
Cleaning agents			Y		Locked cabinet in kitchen	

Poisonous substances	Y	Has a lock on the garage entry door where its stored-on shelf Comments/Notes Corrective Action /Timeframe if needed	
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N		
All areas of the home are kept clean, including diapering area.	Y		
Trash, garbage, and wet and soiled diapers are disposed of in a sanitary manner.	Y		
Child is changed immediately when s/he has a soiled or wet diaper, clothing, or bedding.	Y		
Diapering procedures are followed.	Y		
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting. Diapering. Before food preparation and eating. After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	Soap station at every sink	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y		
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm. Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y		
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Ŷ		
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y		

Emergency Ready-to-Go Pack

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also, the items are clean, organized, and usable. Comment and note below if needed.

⊠ Flashlight

Batteries for Flashlight

Portable First Aid Kit

Bottled water

⊠Non-perishable food ⊠Diapers Solder or binder for EPP documents

Backpack(s) or carrying case(s)

Consider special toys or games

\times	Thermomet	er

Change of clothes

Medications

Blanket(s)

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Yes.

Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Yes, stored in master bedroom closet

Emergency Documents

Sinformal Provider Emergency Preparedness Plan (this completed form)

Authorization for emergency medical care

Planning and Maintenance

Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly:

First Name

Last Name

Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location:

Itemized List: 1 flashlight, AA extra batteries, no specific meds, 2 blankets, 2 canned foods, baby food, 3 bottled waters, 1 thermometer, diapers & wipes, 2 outfits/1 per child, 1 first aid kit, 1 backpack carrying case, 1 small toy, 2 books, 1 roll of duct tape, 2 trash bags, 1 pair of scissors, Folder w/ EPP and ECMA forms.

Shelter-in-Place Procedures: Provider will take the children and emergency bag and go into the master bedroom closet (1 door 0 windows), will call 911 and then call her sister to inform her that they are in lockdown.

Evacuation Locations:

<u>Primary</u> — Provider will gather the emergency bag along with the children, she will strap each child in their car seats and put the to-go bag in the trunk. They will go to the **sector** where she will have key access for entry. They will go into the bathroom (1 door 1 window) and seal the windows with sealing plastic and tape if needed. Then she will contact the parent via call.

<u>Alternate –</u> Provider will gather the children and emergency bag, will go into the car, and secure each child in their car seats and to-go in the trunk. Upon arrival the provider will have key access into the home, and they will go into the master bedroom closet (1 door 0 windows), once settled in provider will call the parent and inform her of the emergency status.

Items to be Corrected: N/A

Signatures & Date			
Acknowledgement: By signing below the parties acknowledge that al been discussed. The parties also acknowledge that, if approved, the pop up visit which will be conducted virtually or in-person.	I standards have been reviewed, and any corrections if needed have home in which care is provided is subject to random, unannounced		
PROVIDER INSPECTOR			
Printed Name: Christina Baieslein	Printed Name:		
Signature	Signature:		
Date: 9 5 22 Phone:	Date: 09/02/2022 Phone: 1-877-227-0125		

⊠Virtual Inspection □In-person Inspection		epartment of Edu Id Care Scholars INFORMAL NSPECTION CI	ship Program CARE	Child Care	Return to: ccs.informalproviders@maryland.g ov	
Inspection Date: 08/15/2023	pection Date: 08/15/2023 Time In: 10:30AM			AM Result	ult: PASSED	
Informal Care						
Type of Care (check one):	Non-relative Init	formal Provider C	are	Informal Pro	wider Care	
Provider Information		And and a second second				
First Name: Betty Last Name: Balk Provider ID #.			Provider ID: <u>518003</u> Email:			
Care Location Inspected	States - Andrew States					
Street Address: Address Verified? Yes.	City:	County:	State Zip	Code:	er A.	
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)	
			(11/09/2017)	5yr. / N		
			(10/26/2019)	3yr. / N		
		1				
Safety of the Home						
Directions: Review and determ pages may be used for comme	nine compliance with ea ents.	ach standard. Note	Y-Yes, N-No, I	D – Discusse	ed, n/a - Not Applicable	
Health and Safety Training:			Standard Met Y/N		Action /Timeframe if needed	
Basic Health and Safety Train	ning Completed?		Y		nformal Care – Certificate Submitted	
Home is free of health and s	safety hazards:	a salar salar	Standard Met Y/N	Connents	Action /Timeframe if needed	
 Is in good repair 	the second second	/ · · · · · · · · · · · · · · · · · · ·	Y	All areas were clean		
 Is free of insect or ro 	dent infestation		Y	No evidence of infestation		
Is well-lit and well-ve	entilated		Y	All lights were turned on and natural window lighting		
			Y	Tested by provider and steam observed on camera		
				Flushed by provider and observed		
Has a working inside		- The end of the second s				
Has a working inside	e toilet ing, lighting and heati	ng	Y	Thomas	actat tacted by provider for cooling ?	
 Has a working inside Has utilities for cooking Has a working and s 	ing, lighting and heati afe heating system	ng	Y	heatin	ostat tested by provider for cooling & ng – utility bill previously submitted	
 Has a working inside Has utilities for cooking 	ing, lighting and heati afe heating system	ng	Y Y	heatii	ng – utility bill previously submitted ested by provider and observed	
 Has a working inside Has utilities for cooking Has a working and s Has a working refrige Has a working telephone 	ing, lighting and heati afe heating system erator and stove none	ng	Y Y Y	heatii Te Outbound	ng – utility bill previously submitted ested by provider and observed call made by informal team to provider phone	
 Has a working inside Has utilities for cooking Has a working and some some source of the source of th	ing, lighting and heati afe heating system erator and stove none ke detector(s)	ng	Y Y Y Y	Outbound Te	ng – utility bill previously submitted ested by provider and observed call made by informal team to provider phone ested by provider and observed	
 Has a working inside Has utilities for cooking Has a working and s Has a working refrige Has a working telephing Has operational smoother than the second structure Has first aid kit/supplice 	ing, lighting and heati afe heating system erator and stove none ke detector(s) lies		Y Y Y	Outbound Te	ng – utility bill previously submitted ested by provider and observed call made by informal team to provider phone	
 Has a working inside Has utilities for cooking Has a working and s Has a working refrige Has a working refrige Has a working teleph Has operational smoother that first aid kit/supplies Has protective covert accessible to children 	ing, lighting and heati afe heating system erator and stove none ke detector(s) lies ings on any electrical n	outlet that is	Y Y Y Y Y Y	Outbound Te	ng – utility bill previously submitted ested by provider and observed call made by informal team to provider phone ested by provider and observed	
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 Has a working inside Has utilities for cooking Has a working and s Has a working refrige Has a working teleph Has operational smo Has first aid kit/suppl Has protective covering accessible to childrer Harmful items are stored ap 	ing, lighting and heati afe heating system erator and stove none ke detector(s) lies ings on any electrical n	outlet that is	Y Y Y Y Y Standard Met	Comments Corrective	ng – utility bill previously submitted ested by provider and observed call made by informal team to provider phone ested by provider and observed irst aid kit stored in dining room All outlets covered or occupied /Notes	
 Has a working inside Has utilities for cooking Has a working and s Has a working refrige Has a working teleph Has operational smo Has first aid kit/suppl Has protective covering Has protective covering As protective covering Has protective covering Sharp or pointed item Medications of any kit 	ing, lighting and heati afe heating system erator and stove none ike detector(s) lies ings on any electrical n propriately and away ns	outlet that is y from	Y Y Y Y Y Standard Met Y/N Y Y	heatin Te Outbound Te Fi Comments Corrective Stored in Stored	ng – utility bill previously submitted ested by provider and observed call made by informal team to provider phone ested by provider and observed irst aid kit stored in dining room All outlets covered or occupied /Notes Action /Timeframe if needed n high level kitchen cabinet with knife coverings ed in high cabinet in laundry room	
 Has a working inside Has utilities for cooking Has a working and s Has a working refrige Has a working teleph Has operational smoother and statistical structures Has first aid kit/supplies Has protective covernancessible to children Sharp or pointed item 	ing, lighting and heati afe heating system erator and stove none ike detector(s) lies ings on any electrical n propriately and away ns	outlet that is y from	Y Y Y Y Y Standard Met Y/N Y Y Y	Comments Corrective Stored in Store	ng – utility bill previously submitted ested by provider and observed call made by informal team to provider phone ested by provider and observed irst aid kit stored in dining room All outlets covered or occupied /Notes Action /Timeframe if needed n high level kitchen cabinet with knife coverings ed in high cabinet in laundry room ored in high level garage cabinet	
 Has a working inside Has utilities for cooking Has a working and s Has a working refrige Has a working teleph Has operational smo Has first aid kit/suppl Has protective covering accessible to children Sharp or pointed item Medications of any kit 	ing, lighting and heati afe heating system erator and stove none ike detector(s) lies ings on any electrical n propriately and away ns	outlet that is y from	Y Y Y Y Y Standard Met Y/N Y Y Y Y	Comments Corrective Stored in Store	ng – utility bill previously submitted ested by provider and observed call made by informal team to provider phone ested by provider and observed irst aid kit stored in dining room All outlets covered or occupied /Notes Action /Timeframe if needed n high level kitchen cabinet with knife coverings ed in high cabinet in laundry room ored in high level garage cabinet ine in fridge moved to back of top shelf	
 Has a working inside Has utilities for cooking Has a working and s Has a working refrige Has a working teleph Has operational smoother and statistical statis statistical statistical statistext at statistical statisti	ing, lighting and heati afe heating system erator and stove none ike detector(s) lies ings on any electrical n propriately and away ns	outlet that is y from	Y Y Y Y Y Standard Met Y/N Y Y Y	Comments Corrective Stored in Store	ng – utility bill previously submitted ested by provider and observed call made by informal team to provider phone ested by provider and observed irst aid kit stored in dining room All outlets covered or occupied /Notes Action /Timeframe if needed n high level kitchen cabinet with knife coverings ed in high cabinet in laundry room ored in high level garage cabinet	

Poisonous substances		Y	Stored in provider's locked shed
GENERAL CLEANLINESS STANDARDS		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Il areas of the home are kept clean, including d	iapering area.	Y	No diaper age children in care
rash, garbage and wet and soiled diapers are d anitary manner.		Y	No diaper age children in care
child is changed immediately when s/he has a s iaper, clothing or bedding.	oiled or wet	Y	
Diapering procedures are followed.		Y	No diaper age children in care
 Handwashing procedures are followed. Provider vashed thoroughly with soap and warm running Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent disease. 	water after:	Y	
CHILD ABUSE, NEGLECT AND MISTREATME		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, in Physical injury Any sexual abuse Mental injury 	ncluding:	Y	
 A child in care is not subjected to any form of including: The failure to give proper care and atter including leaving a child unattended un that indicate that the child's health or we placed at substantial risk of harm; Mental injury to a child, or a substantial injury that is caused by the failure to give attention to a child. 	ntion to a child der circumstances elfare is harmed or risk of mental	Y	
 A child in care is not subjected to mistreatme Any deliberate act that hurts a child phy emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical need Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distast child's mouth Requiring a child to stand on one foot a Tying child to a cot or other equipment 	ysically or Is eful items in a as punishment	Y	
The provider immediately reports any suspect neglect or mistreatment by calling 911 and you Department of Social Services Child Protecti	ted child abuse,	Y	
Emergency Ready-to-Go Pack			and the brack of the second
The Emergency Ready-to-Go Pack must be available needed medications) <u>and</u> Emergency Documents. Disaster Supply Kit	and easily accessible in	n the event of an em	ergency. This contains a Disaster Supply Kit (including
Directions: Review and determine that each item is a enough supplies for each child in care. Also the items	dequately included in th are clean, organized, a	e Disaster Supply K nd usable, Commen	it. Be certain that the Disaster Supply Kit contains at and note below if needed
⊠ Flashlight	Bottled water		Selder or binder for EPP document
⊠Batteries for Flashlight	⊠Non-perishable	e food	Backpack(s) or carrying case(s)
ØPortable First Aid Kit	Diapers (N/A)		Consider special toys or games
⊠ Thermometer	Change of clo		Executive special toys or games. Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags

⊠Medications (N/A)	⊠Blanket(s)
Items in the Disaster Supply Kit are cle	
Emergency Ready-to-Go Pack is available	able and easily accessible in the event of an emergency (Y/N)? Y
<u>Item Specification (if needed):</u> <u>1 flashlight, 1 pk of AA batteries</u> outfits (top/bottom), 2 med blan	to go Pack: Stored in kitchen near exit s, 1 first aid kit, 1 thermometer, no spec meds, 6 bottled waters, 6 canned foods, no diapers, 2 ikets, folder w/ EPP and ECMA docs per child, 4 card games, 2 rolls of tape, 1 pair of scissors, ic and 1 carry-on suitcase (carrying case) cvvvv N/A
Emergency Documents	
Authorization for emergency	Preparedness Plan (this completed form)
	medical care
Planning and Maintenance	
Person responsible for updating the Di First Name	isaster Supply Kit and the Emergency Documents regularly:
Betty	Last Name Balk
Description of how the Emergency Rea	ady-to-Go Pack will be transported to an evacuation location: carried by the provider.
Shelter In Place Procedure:	
Evacuation Procedures	
facing car seats in the provider's vehic and she and before, during, and after with emergen Alternate: If they could not access the and then place both children in their fo	e primary location, the provider will account for the children by taking a head count, grab the ERT rward-facing car seats in the provider's vehicle. The provider would provider and children will go into the provider will call or text the
facing car seats in the provider's vehic and she and before, during, and after with emergen Alternate: If they could not access the and then place both children in their fo Upon arrival the p parent before during, and after with em Care Hours: M-Tu 5:30am-7:00pm W 5:30am-5:15pm Th 7:30am-5:15pm F	Ale. The provider would call the parent and drive
facing car seats in the provider's vehic and she and before, during, and after with emergen Alternate: If they could not access the and then place both children in their fo Upon arrival the p parent before during, and after with em Care Hours: M-Tu 5:30am-7:00pm W 5:30am-5:15pm Th 7:30am-5:15pm F 7:30am-5:30pm Signatures & Date	e parties acknowledge that all standards have been reviewed, and any corrections if needed have bowledge that, if approved, the home in which care is provided is subject to random, unannounced
facing car seats in the provider's vehic and she and before, during, and after with emergen Alternate: If they could not access the and then place both children in their fo Upon arrival the p parent before during, and after with em Care Hours: M-Tu 5:30am-7:00pm W 5:30am-5:15pm Th 7:30am-5:15pm F 7:30am-5:30pm Signatures & Date Acknowledgement: By signing below the peen discussed. The parties also acknowledgements	e parties acknowledge that all standards have been reviewed, and any corrections if needed have bowledge that, if approved, the home in which care is provided is subject to random, unannounced tually or in-person.
facing car seats in the provider's vehic and she and before, during, and after with emergen Alternate: If they could not access the and then place both children in their fo Upon arrival the p parent before during, and after with em Care Hours: M-Tu 5:30am-5:10pm W 5:30am-5:15pm Th 7:30am-5:15pm F 7:30am-5:30pm Signatures & Date Acknowledgement: By signing below the been discussed. The parties also ackno pop up visit which will be conducted virt	Re. The provider would call the parent and drive Upon arrival the provider had the children will go into 1 door 0 windows). The provider will call or text the parent icy updates. e primary location, the provider will account for the children by taking a head count, grab the ERT marked facing car seats in the provider's vehicle. The provider would
facing car seats in the provider's vehic and she and before, during, and after with emergen Alternate: If they could not access the and then place both children in their fo Upon arrival the p parent before during, and after with em Care Hours: M-Tu 5:30am-7:00pm W 5:30am-5:15pm Th 7:30am-5:15pm F 7:30am-5:30pm Signatures & Date Acknowledgement: By signing below the been discussed. The parties also acknow pop up visit which will be conducted virt PROVIDER	Re. The provider would call the parent and drive Upon arrival the provider had the children will go into 1 door 0 windows). The provider will call or text the parent icy updates. e primary location, the provider will account for the children by taking a head count, grab the ERT marked facing car seats in the provider's vehicle. The provider would

⊠Virtual Inspection ⊡In-person Inspection	Maryland S	Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST					Return to: ccs.informalproviders@maryland ov
Inspection Date: 05/03/2022 Time In: 3:30PM Follow Up Inspection: 05/04/2022 Time In: 11:00AM			Time Out: 5:00PM Result Time Out: 11:15AM Result 5/4/20		sult P	ollow Up inspection scheduled ASSED if returned by 5PM on	
Informal Care							
Type of Care (check one):	D Non-rela	tive Infr	ormal Provider C	are Relative	e Informal I	Provid	er Care
Provider Information		ure mis	////				
First Name: Pamela Provider ID #:	irst Name: Pamela Last Name: Banks				Pro		ID: 485448
Care Location Inspected		-					
Street Address: Address Verified? Yes	C	ity:	Cour	nty	State:	-	Zip Code:
Name of Children in Care	(add nages if nee	ded)	Scholarship	Date of Birth	Age	1	Present (Y/N)
	1000 Pages in 1100			05/26/2010	11 yr	/ No	
	-			09/06/2016	5 yr	/ No	
				10/20/2021	7 mos.		
C-6-46-0111					-	_	
Safety of the Home							
Safety of the Home	rmine compliance	with eac	ch standard, Note	any comments or o	corrective ad	tions	needed, Additional
Directions: Review and deter pages may be used for comm	rmine compliance nents.	with eac	ch standard. Note	any comments or o Y – Yes, N – No,	corrective ac D – Discus	tions i sed, i	needed, Additional n/a – Not Applicable
Directions: Review and deter	nents.	with eac	ch standard. Note	any comments or o Y – Yes, N – No, Standard Met Y/N	D - Discus	nts/No	n/a – Not Applicable
Directions: Review and deter pages may be used for comm	nents. g:		ch standard. Note	Y – Yes, N – No, Standard Met	D – Discus Comme Correct	nts/No ive Ac	n/a – Not Applicable otes tion /Timeframe if needed
Directions: Review and deter pages may be used for comm Health and Safety Training	nents. g: aining Completed	1?	ch standard, Note	Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N	D – Discus Comme Correct	nts/No ive Ac	n/a – Not Applicable otes tion /Timeframe if needed
Directions: Review and deter pages may be used for comm Health and Safety Training Basic Health and Safety Tra Home is free of health and Is in good repair	nents. g: aining Completed d safety hazards	1?	ch standard. Note	Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N Y	D – Discus Correct Correct	nts/No ive Ac	n/a – Not Applicable otes tion /Timeframe if needed otes tion /Timeframe if needed
Directions: Review and deter pages may be used for comm Health and Safety Training Basic Health and Safety Tra Home is free of health and Is in good repair Is free of insect or	nents. g: aining Completed d safety hazards rodent infestation	1?	ch standard. Note	Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N Y Y Y	D – Discus Correct Correct	nts/No ive Ac	n/a – Not Applicable otes tion /Timeframe if needed
Directions: Review and deter pages may be used for comm Health and Safety Training Basic Health and Safety Tra Home is free of health and Is in good repair Is free of insect or Is well-lit and well-	nents. g: aining Completed d safety hazards rodent infestation ventilated	1?	ch standard. Note	Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N Y Y Y Y	D – Discus Comme Correcti Correcti No infes	nts/No ive Act nts/No ive Act	n/a – Not Applicable otes tion /Timeframe if needed otes tion /Timeframe if needed
Directions: Review and deter pages may be used for comm Health and Safety Training Basic Health and Safety Tra Home is free of health and Is in good repair Is free of insect or Is well-lit and well- Has hot and cold r	nents. g: aining Completed d safety hazards rodent infestation ventilated unning water	1?	ch standard. Note	Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y	D – Discus Comme Correcti Correcti No infes Steam o	ised, ints/No ive Act ive Act ive Act ive Act	n/a – Not Applicable otes tion /Timeframe if needed otes tion /Timeframe if needed
Directions: Review and deter pages may be used for comm Health and Safety Training Basic Health and Safety Tra Home is free of health and Is in good repair Is free of insect or Is well-lit and well- Has hot and cold n Has a working insi	nents. g: aining Completed d safety hazards rodent infestation ventilated unning water de toilet	1? :: 1		Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y	D – Discus Comme Correcti No infes Steam o Needs lo	nts/No ive Act nts/No ive Act ive Act tation of bserve bck und	n/a – Not Applicable otes tion /Timeframe if needed otes tion /Timeframe if needed observed od der sink. Follow up needed
Directions: Review and deter pages may be used for comm Health and Safety Training Basic Health and Safety Tra Home is free of health and Is in good repair Is free of insect or Is well-lit and well- Has hot and cold r Has a working insi Has utilities for coo	nents. g: aining Completed d safety hazards rodent infestation ventilated unning water de toilet oking, lighting and	l? :: n d heatin		Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	D – Discus Comme Correcti Correcti No infes Steam o	nts/No ive Act nts/No ive Act ive Act tation of bserve bck und	n/a – Not Applicable otes tion /Timeframe if needed otes tion /Timeframe if needed observed od der sink. Follow up needed
Directions: Review and deter pages may be used for comm Health and Safety Training Basic Health and Safety Tra Home is free of health and Is in good repair Is free of insect or Is well-lit and well- Has hot and cold r Has a working insi Has a working and	nents. g: aining Completed d safety hazards rodent infestation ventilated unning water de toilet oking, lighting and safe heating sys	l? :: 1 d heatin stem		Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	D – Discus Comme Correcti No infes Steam o Needs lo	nts/No ive Act nts/No ive Act ive Act tation of bserve bck und	n/a – Not Applicable otes tion /Timeframe if needed otes tion /Timeframe if needed observed od der sink. Follow up needed
Directions: Review and deter pages may be used for comm Health and Safety Training Basic Health and Safety Tra Home is free of health and Is in good repair Is free of insect or Is well-lit and well- Has hot and cold r Has a working insi Has utilities for coo Has a working and Has a working refr	nents. g: aining Completed d safety hazards rodent infestation ventilated unning water de toilet oking, lighting and l safe heating sys igerator and stove	l? :: 1 d heatin stem		Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	D – Discus Comme Correcti No infes Steam o Needs to Operatio	nts/No ive Act nts/No ive Act tation of bserve bock und nal gas	n/a – Not Applicable otes tion /Timeframe if needed otes tion /Timeframe if needed observed ed der sink. Follow up needed s stove
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GENERAL CLEANLINESS STANDARDS	Sta	ndard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
All areas of the home are kept clean, including diaper	ring area.	Y			
Trash, garbage and wet and soiled diapers are dispo sanitary manner.	sed of in a	Y			
Child is changed immediately when s/he has a soiled diaper, clothing or bedding.	f or wet	Y			
Diapering procedures are followed.		Y			
 Handwashing procedures are followed. Provider and washed thoroughly with soap and warm running wate Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent th disease. 	er after:	Y			
CHILD ABUSE, NEGLECT AND MISTREATMENT S	STANDARDS Sta	ndard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
A child is not subject to any form of abuse, includi Physical injury Any sexual abuse Mental injury		Y			
 A child in care is not subjected to any form of neglincluding: The failure to give proper care and attention including leaving a child unattended under cithat indicate that the child's health or welfare placed at substantial risk of harm; Mental injury to a child, or a substantial risk of injury that is caused by the failure to give proattention to a child. 	to a child ircumstances e is harmed or of mental	Y			
 A child in care is not subjected to mistreatment, ir Any deliberate act that hurts a child physical emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful it child's mouth Requiring a child to stand on one foot as pur Tying child to a cot or other equipment 	lly or tems in a nishment	Y			
The provider immediately reports any suspected c neglect or mistreatment by calling 911 and your <u>lo</u> Department of Social Services Child Protective Se	ocal	Y			
Emergency Ready-to-Go Pack					
The Emergency Ready-to-Go Pack must be available and ea needed medications) and Emergency Documents.	asily accessible in the ev	vent of an emo	ergency. This contains a Disaster Supply Kit (including		
Disaster Supply Kit					
Directions: Review and determine that each item is adequat enough supplies for each child in care. Also the items are cle	tely included in the Disa ean, organized, and usa	ster Supply Ki ble. Comment	it. Be certain that the Disaster Supply Kit contains t and note below if needed.		
⊠ Flashlight	Bottled water		Solder or binder for EPP documents		
Batteries for Flashlight	Non-perishable food		Backpack(s) or carrying case(s)		
⊠Portable First Aid Kit	Diapers		⊠ Consider special toys or games		
		Heavy Duty Scissors, duct tape			

⊠Thermometer

Change of clothes

Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash

bags

	PBlanket(s)
Items in the Disaster Supply Kit are clean, organ	nized, and usable (Y/N)? Y
Emergency Ready-to-Go Pack is available and	easily accessible in the event of an emergency (Y/N)? Y
Location of The Emergency Ready to go Pac	k: Living room
Item Specification (if needed): Pajamas, 2 onesies, 2 outfits diapers, wipes, top 4 tuna packages, 12 8 oz, bottles of water, 4 ap Rattles, blocks, stuffed animal, books, playing c 4 AA, band aids, gauze, antiseptic wipes.	ple sauce, pop larts, chips
Items to review on 05/04/2022 if needed:	
Lock under sink in kitchen and bathroom – Observed Folder with emergency documents – Observed Second bag - Observed 5/4/2022	
Emergency Documents	
Planning and Maintenance	
	upply Kit and the Emergency Documents regularly:
First Name	Last Name
⊠Informal Provider Emergency Prepare ⊠Authorization for emergency medical of	
Shelter In Place Procedure: Gather the children the baby, take baby's swin	g and the emergency to go bag and head to the basement. The basement one window and
entry and once inside they will shelter in the ba as she knows they have to evacuate the house house, they would drive to provider's sister's ho vehicle. Provider will secure the baby in a rear	
Evacuation Procedures: Gather the children and the emergency to go b entry and once inside they will shelter in the ba as she knows they have to evacuate the house house, they would drive to provider's sister's he vehicle. Provider will secure the baby in a rear alternate evacuation location. Provider will call	g and after the shelter in place. ag and walk across the street to provider's friend's house. The provider has a key to gain asement of the house that has one window and one door. Provider will call parent as soon a and keep contact, during and after the emergency. If they cannot shelter at the friend's ouse. Provider will gather the children, get the car seat, emergency bag and go to the facing car seat and make sure other children are secure with seat belt before driving to
Evacuation Procedures: Gather the children and the emergency to go be entry and once inside they will shelter in the bas as she knows they have to evacuate the house house, they would drive to provider's sister's how vehicle. Provider will secure the baby in a rear- alternate evacuation location. Provider will call Signatures & Date Acknowledgement: By signing below the parties been discussed. The parties also acknowledge	ag and after the shelter in place. ag and walk across the street to provider's friend's house. The provider has a key to gain asement of the house that has one window and one door. Provider will call parent as soon a and keep contact, during and after the emergency. If they cannot shelter at the friend's ouse. Provider will gather the children, get the car seat, emergency bag and go to the facing car seat and make sure other children are secure with seat belt before driving to parent before leaving care location and keep contact, during and after the emergency.
Evacuation Procedures: Gather the children and the emergency to go be entry and once inside they will shelter in the base as she knows they have to evacuate the house house, they would drive to provider's sister's how vehicle. Provider will secure the baby in a rear- alternate evacuation location. Provider will call Signatures & Date Acknowledgement: By signing below the parties been discussed. The parties also acknowledge	ag and after the shelter in place. ag and walk across the street to provider's friend's house. The provider has a key to gain asement of the house that has one window and one door. Provider will call parent as soon a and keep contact, during and after the emergency. If they cannot shelter at the friend's ouse. Provider will gather the children, get the car seat, emergency bag and go to the facing car seat and make sure other children are secure with seat belt before driving to parent before leaving care location and keep contact, during and after the emergency.
Evacuation Procedures: Gather the children and the emergency to go be entry and once inside they will shelter in the bases as she knows they have to evacuate the houses house, they would drive to provider's sister's how vehicle. Provider will secure the baby in a rear alternate evacuation location. Provider will call Signatures & Date Acknowledgement: By signing below the parties been discussed. The parties also acknowledge top up visit which will be conducted virtually or PROVIDER Printed Name:	ag and after the shelter in place. Ag and walk across the street to provider's friend's house. The provider has a key to gain asement of the house that has one window and one door. Provider will call parent as soon a and keep contact, during and after the emergency. If they cannot shelter at the friend's ouse. Provider will gather the children, get the car seat, emergency bag and go to the facing car seat and make sure other children are secure with seat belt before driving to parent before leaving care location and keep contact, during and after the emergency. As acknowledge that all standards have been reviewed, and any corrections if needed have that, if approved, the home in which care is provided is subject to random, unannounced in-person. INSPECTOR
Evacuation Procedures: Gather the children and the emergency to go be entry and once inside they will shelter in the bas as she knows they have to evacuate the house house, they would drive to provider's sister's ho- rehicle. Provider will secure the baby in a rear- alternate evacuation location. Provider will call Signatures & Date Acknowledgement: By signing below the parties been discussed. The parties also acknowledge house virtually or PROVIDER	ag and after the shelter in place. Ag and walk across the street to provider's friend's house. The provider has a key to gain asement of the house that has one window and one door. Provider will call parent as soon a and keep contact, during and after the emergency. If they cannot shelter at the friend's ouse. Provider will gather the children, get the car seat, emergency bag and go to the facing car seat and make sure other children are secure with seat belt before driving to parent before leaving care location and keep contact, during and after the emergency. As acknowledge that all standards have been reviewed, and any corrections if needed have that, if approved, the home in which care is provided is subject to random, unannounced in-person. INSPECTOR

⊠Virtual Inspection ⊡In-person Inspection		epartment of Ed Care Care Scholarsh INFORMAL C. PECTION CHE	ip Program ARE	f Child	Return to: ccs.informalproviders@maryland.go		
Inspection Date: 8/20/2024	tion Date: 8/20/2024 Time In: 2:00 pm			om Re	ssed		
Informal Care							
Type of Care (check one):	Non-relative Infe	ormal Provider Ca	are ⊠Relative	Informal	Provide	r Care	
Provider Information							
First Name: Ashley	Last	Name: Bauer		Pro	vider ID	0: 558518	
Provider ID #:	Luot	Humo. Budor			ail:		
Care Location Inspected							
Street Address: Address Verified?: Yes	<u>City</u> :	Count	Х :		State	Zip Code:	
Name of Children in Care	add names if needed)	Scholarship	Date of Birth	Age	1	Present (Y/N)	
tame of officient in oare i	add pages it needed)	Genolaramp	4/25/2022	2 years		Fleadin (1/14)	
			4/25/2022	2 years			
Safety of the Home							
Directions: Review a Additional pages ma	and determine complianc y be used for comments.	e with each standa	ard. Note any comm Y - Yes, N - No,	nents or co D – Discu:	rrective ssed, n	actions needed. /a – Not Applicable	
lealth and Safety Training			Standard Met Y/N		ents/Not	es ion /Timeframe if needed	
Basic Health and S	afety Training Complete	ed?	Y				
lome is free of health and	safety hazards:		Standard Met Y/N		ents/Not	es ion /Timeframe if needed	
 Is in good repair 			Y				
 Is free of insect or r 	odent infestation		Y	0			
 Is well-lit and well-w 	rentilated		Y				
 Has hot and cold rule 	inning water		Y				
 Has a working insid 	le toilet		Y				
 Has utilities for coo 	king, lighting and heatin	g	Y	1			
 Has a working and 	safe heating system		Y				
 Has a working refrig 	gerator and stove		Y				
 Has a working telep 	phone		Y				
 Has operational sm 			Y				
 Has first aid kit/sup 	Last to an		Y				
 Has protective cover accessible to children 	erings on any electrical en	outlet that is	Y				
larmful items are stored a children:	ppropriately and away	/ from	Standard Met Y/N	Commen		s n /Timeframe if needed	
 Sharp or pointed ite 	ms		Y				
Medications of any	kind		Y	-	_		
	nd flammable products		Y				
 Alcoholic beverages 	8		Y				
Guns			Y				
Cleaning agents			Y				
Poisonous substant	ces		Y				
SENERAL CLEANLINESS			Standard Met Y/N	Commen Correctiv		s n /Timeframe if needed	
Il areas of the home are ke	ot clean, including diape	ering area.	Y				

Trash, garbage and wet and soiled diapers are dis sanitary manner.	sposed of in a	Y	
Child is changed immediately when s/he has a soi diaper, clothing or bedding.	iled or wet	Y	
Diapering procedures are followed.	Sel mont	Y	
 Handwashing procedures are followed. Provider a washed thoroughly with soap and warm running w Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to preven disease. 	vater after:	Y	
CHILD ABUSE, NEGLECT AND MISTREATMEN	IT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, inc Physical injury Any sexual abuse Mental injury	luding:	Y	
 A child in care is not subjected to any form of including: The failure to give proper care and attent including leaving a child unattended under that indicate that the child's health or well placed at substantial risk of harm; Mental injury to a child, or a substantial ri injury that is caused by the failure to give attention to a child, 	ion to a child er circumstances fare is harmed or isk of mental	Y	
 A child in care is not subjected to mistreatmen Any deliberate act that hurts a child physi emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distastefic child's mouth Requiring a child to stand on one foot as Tying child to a cot or other equipment 	ically or ul items in a	Y	
The provider immediately reports any suspecte neglect or mistreatment by calling 911 and yo Department of Social Services Child Protec <u>Unit</u> .	ur local	Y	
Emergency Ready-to-Go Pack			
The Emergency Ready-to-Go Pack must be av (including needed medications) and Emergence		cessible in the even	t of an emergency. This contains a Disaster Supply Kit
Disaster Supply Kit	Service of the service of the		
Directions: Review and determine that each ite contains enough supplies for each child in care	em is adequately inclue. Also that the items	uded in the Disaster are clean, organized	Supply Kit. Be certain that the Disaster Supply Kit d, and usable. Comment and note below if needed.
⊠ Flashlight	Bottled water	2	Sector of binder for EPP documents
⊠Batteries	⊠Non-perishable	food	⊠Backpack(s) or carrying case(s)
⊠Portable First Aid Kit	⊠Diapers		⊠Consider special toys or games
⊠Thermometer	⊠Change of clot	hes	☑ Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash
and the second se			Bags

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Yes

Medications

⊠Blanket(s)

		sible in the event of an emergency ()	Y/N)? Yes
Location of Emergency Ready to	o go Pack: Dining Room		
Emergency Documents			
⊠Informal Provider Emergen ⊠Authorization for emergen		(this completed form)	
Planning and Maintenance			
Person responsible for updating the	e Disaster Supply Kit an	d the Emergency Documents regul	larly:
First Name Ashley	Last Nan Bauer	ne	
Description of how the Emergency	Ready-to-Go Pack will	be transported to an evacuation loc	cation:
Shelter In Place Procedures:	and the second	and the second sec	
facing car seat. The provider will	n and the ready to go ba	ag taking both the bag and the cl before, during and after sheltering	hild to car, placing the child in a rear (1
The Provider will gather the childre facing car seat. The provider will doors, 4 window(s)). The provider			hild to car placing the child in a rear 1
The Provider will gather the childre facing car seat. The provider will doors, 4 window(s)). The provider CARE HOURS:			1
The Provider will gather the childre facing car seat. The provider will doors, 4 window(s)). The provider CARE HOURS: - Signatures & Date Acknowledgement: By signing below been discussed. The parties also ack	r will text and call parent the parties acknowledge	before, during and after sheltering that all standards have been reviewe	1
The Provider will gather the childre facing car seat. The provider will doors, 4 window(s)). The provider CARE HOURS: - Signatures & Date Acknowledgement: By signing below been discussed. The parties also ack	r will text and call parent the parties acknowledge mowledge that, if approve virtually or in-person.	before, during and after sheltering that all standards have been reviewe	1 ed, and any corrections if needed have
The Provider will gather the childre facing car seat. The provider will doors, 4 window(s)). The provider CARE HOURS: - Signatures & Date Acknowledgement: By signing below been discussed. The parties also ack pop up visit which will be conducted w PROVII Printed Name:	r will text and call parent the parties acknowledge mowledge that, if approve virtually or in-person.	before, during and after sheltering that all standards have been reviewe	1 ed, and any corrections if needed have d is subject to random, unannounced
The Provider will gather the childre facing car seat. The provider will doors, 4 window(s)). The provider CARE HOURS: - Signatures & Date Acknowledgement: By signing below been discussed. The parties also ack pop up visit which will be conducted v PROVII Brinted Name:	the parties acknowledge nowledge that, if approve virtually or in-person.	that all standards have been reviewe	1 ed, and any corrections if needed have d is subject to random, unannounced

B Vrtual Inspecton ☐In-person	tree and the second sec							
Informal Care Type of Care (check one): Non-relative information Provider Information Provider ID .496840 Email Email Email Email Email Provider ID .496840 Email Age / Present (YN) Age / All age way be chorder order (Additional present dynomical additional present dynomical additional present dynomical additional present dynomical additional fineadddyn (YN) All additional fineadd (Additional presen		IVirtual Inspection Child Care Scholarship Program IIn-person Inspection INFORMAL CARE				ccs.informalproviders@maryland.g		
Type of Care (check one): □ Non-relative Informal Provider Care Statelative Informal Provider Care Provider Information □	Inspection Date: 09/08/2023	In: 3:00PM	Time Out: 4:00P	M Result	PASSED			
Provider Information First Name: Shirley Last Name: Bauer Provider ID: 496849 First Name: Shirley Last Name: Bauer Email Care Location Inspected Street Address Zip Code: Street Address County: State Zip Code: Address Verified? Yee. Scholarship Date of Birth Age / Present (Y/N) Safety of the Home (04/24/2022) 1yr. / Y Safety of the Home Corrective Action rest. Corrective Action / Timeframe if needed Directions: Review and determine compliance with each standard. Note any comments or corrective action / Timeframe if needed Comments/Notes Basic Health and Safety Training: Standard Met VYNN Corrective Action / Timeframe if needed Home is free of neath and safety hazards: Standard Met VYNN Corrective Action / Timeframe if needed Is in good repair Y Relative Informatica Care - Certificate Submitted Is is well-lit and well-ventilated Y Relative Informaticance if needed on camera Is well-lit and well-ventilated Y All lights were turned on and natural window lighting Is the of insect or rodent infestation Y Fisted by provider and steam observed on camera Has a wo	Informal Care							
First Name: Shirley Provider ID # Last Name: Bauer Provider ID: 496840 Email Care Location Inspected Street Address: Zip Code: Street Address: Care Location Inspected Stoet Address Zip Code: Name of Children in Care (add pages if needed) Scholarship Date of Birth Age / Present (YIN) Safety of the Home (04/24/2022) fyr. / Y Safety of the Home (04/24/2022) fyr. / Y Safety of the Home Scholarship Date of Birth Age / Present (YIN) Basic Mealth and Safety Training completance with each standard. Note any comments or corrective actions needed. Additional pages may be used for comments. Comments/Notes Corrective Action Timeframe if needed YiN Relative Informal Care - Certificate Submitted Home is free of health and safety hazards: Y Y Relative Informal Care - Certificate Submitted is in good repair Y Y Relative Informal Care - Certificate Submitted Conments/Notes is swell-lit and well-ventilated Y Relative Informal Care - Certificate Submitted Contextive Action Timeframe if needed is hag odr repair Y Relative Informal Care - Certificate Submitted Y All areas were clean	Type of Care (check one): Non-relative Informal Provider Care Relative Informal Provider Care							
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Guns Y Does not own Cleaning agents Y Cleaning products stored on top of the fridge								
Cleaning agents Y Cleaning products stored on top of the fridge								
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Poisonous subsiances	Orieaning agents Poisonous substance	2es		Y	Does not own			

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	Diapering area in living room
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Yes, thrown away outside daily
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	Yes changing area had a diaper bag, with all materials
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily accessible in needed medications) and Emergency Documents.	the event of an em	ergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit		

⊠Medications (N/A)	⊠Blanket(s)	
⊠ Thermometer	⊠Change of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
⊠Portable First Aid Kit	⊠Diapers	⊠Consider special toys or games
Batteries for Flashlight	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
⊠ Flashlight	Bottled water	Solder or binder for EPP documents

Items in the Disaster Supply Kit are clean, organized	zed, and usable (Y/N))? Y				
Emergency Ready-to-Go Pack is available and ea	asily accessible in the	event of an emergency (Y/N)	? Y			
Location of The Emergency Ready to go Pack	: Stored near exit or	n staircase railing				
Item Specification (if needed):						
<u>1 carrying case (tote bag), 1 flashlight, 4 extra AA batteries, 1 first aid kit, 1themometer, no specific meds only general medicine,</u>						
1 canned food, 2 dried food, 1 blanket, 1 pk of wipes, 4 diapers, 2 outfits, folder w/ EPP and ECMA docs, 1 toy book, 1 toy, 1 pair						
of scissors, 1 roll of duct tape, and 1 box of sealing plastic Items to be reviewed on xx/xx/xxxx: N/A						
Emergency Documents						
⊠Informal Provider Emergency Prepared	ness Plan (this comp	pleted form)				
Authorization for emergency medical ca	re					
Planning and Maintenance						
Person responsible for updating the Disaster Su	oply Kit and the Eme	ergency Documents regularly	/:			
First Name	Last Name					
Shirley Description of how the Emergency Ready-to-Go	Bauer Back will be transpo	ated to an everyation location	on: carried by the provider			
Shelter In Place Procedure:	Pack will be transpo	fied to an evacuation rotation	on, carned by the provider.			
	DTO and head to th	- b-coment (1 door 2 windo	The provider will use the sealing			
The provider will pick up the child and grab the E plastic and tape to secure the door and window i						
emergency occurs and after.		ise. The provider with interes	latery can the parent then the			
Evacuation Procedures						
Primary: The provider will account for the child,	nick her up and grat	the ERTG, and head to the	provider's vehicle. The provider will			
secure the child in her rear-facing car seat and	plot nor up and gran	. The provider	, upon entry the			
	ws) for shelter. The		the parent before and after with			
emergency updates.						
Alternate: If they could not access the primary						
to the provider's vehicle. The provider will secure			. The provider			
, upon entry the provider w the parent before and after with emergency upda		(1 door 3 windows) for she	elter. The provider will immediately call			
the patent before and and with emergency upor	iles.					
Care Hours:						
Signatures & Date						
Acknowledgement: By signing below the parties a	acknowledge that all	standards have been review	ed, and any corrections if needed have			
been discussed. The parties also acknowledge the pop up visit which will be conducted virtually or in	nat, if approved, the l	home in which care is provid	ed is subject to random, unannounced			
PROVIDER			INSPECTOR			
Printed Name: Shirley Bauer		Printed Name:				
Signature		Signature:				
Date: 09/14/2023 / Phone:		Date: 09/08/2023	Phone: 1-877-227-0125			

Imperson Inspection Child Care Scholarship Program ccs.in In-person Inspection INFORMAL CARE ov INSPECTION CHECKLIST INSPECTION CHECKLIST INSPECTION CHECKLIST					Return to: ccs.informalproviders@maryland.g ov	
Inspection Date: 10/05/2022	Ti	me In: 1:45PM	Time Out: 2:10P	M Result	PASSED	
Informal Care						
Type of Care (check one):	□ Non-relative	Informal Provider C	are	Informal Prov	vider Care	
Provider Information	•					
First Name: Shirley	La	st Name: Bauer		Provid	er ID: 496840	
Provider ID #				Email:		
Care Location Inspected						
Street Address: Address Verified? Yes	City:	Coun	ty: S	tate MD Zip	p Code:	
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)	
			04/24/2022	5 Months	/Yes	
				1		
Safety of the Home						
Directions: Review and determ pages may be used for comme	nine compliance with ents.	each standard. Note	e any comments or c Y – Yes, N – No,	orrective actio D – Discusse	ns needed. Additional d, n/a – Not Applicable	
Health and Safety Training			Standard Met Y/N	Comments Corrective	s/Notes Action /Timeframe if needed	
Basic Health and Safety Trai	ning Completed?		Y	Certificate	Submitted	
Home is free of health and	safety hazards:		Standard Met Y/N	Comments Corrective	s/Notes Action /Timeframe if needed	
 Is in good repair 			Y			
 Is free of insect or re 			Y	No sign of i	infestation	
 Is well-lit and well-well-well-well-well-well-well-well			Y			
Has hot and cold ru			Y	Steam obse	erved	
Has a working insid			Y	Casatava	124	
Has utilities for cool		-	Y	Gas stove		
Has a working and s			Y Y	Thermosta		
Has a working refrig			Y Y	Landline ca	alled out	
Has a working telep			Y Y	Landine ca		
Has operational sm Has first aid kit/supp	. ,		Y	Band aide	Neosporin, gauze, tape, cool pack	
		al outlet that is				
accessible to childre	n		Y		n use or behind furniture	
Harmful items are stored a children:		wayfrom	Standard Met Y/N		Action /Timeframe if needed	
 Sharp or pointed ite 			Y	High Cabine		
 Medications of any 			Y	High Cabine	et	
 Matches, lighters ar 		ots	Y			
 Alcoholic beverages 	3		Y	None		
Guns			Y	None		
 Cleaning agents 			Y			
 Poisonous substand 	ces		Y	Other than n	nedications and cleaning solutions	

GENERAL CLEANLINESS STANDARDS	Sta	andard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diaperi	ng area.	Y	
Trash, garbage and wet and soiled diapers are dispos sanitary manner.	ed of in a	Y	
Child is changed immediately when s/he has a soiled diaper, clothing or bedding.	or wet	Y	
Diapering procedures are followed.		Y	
 Handwashing procedures are followed. Provider and washed thoroughly with soap and warm running water Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the disease. 	• after:	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT S	TANDARDS St	tandard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, includir Physical injury Any sexual abuse Mental injury 	ng:	Y	
 A child in care is not subjected to any form of negincluding: The failure to give proper care and attention including leaving a child unattended under cithat indicate that the child's health or welfare placed at substantial risk of harm; Mental injury to a child, or a substantial risk of injury that is caused by the failure to give proattention to a child. 	to a child rcumstances is harmed or of mental	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 		Y	
The provider immediately reports any suspected of neglect or mistreatment by calling 911 and your log Department of Social Services Child Protective	ocal	Y	
Emergency Ready-to-Go Pack			
The Emergency Ready-to-Go Pack must be available and e needed medications) and Emergency Documents.	asily accessible in the	e event of an em	ergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit			
Directions: Review and determine that each item is adequa enough supplies for each child in care. Also the items are cl	tely included in the Dia ean, organized, and u	isaster Supply K usable. Commer	(it. Be certain that the Disaster Supply Kit contains at and note below if needed.
⊠Flashlight	Bottled water		⊠Folder or binder for EPP documents
⊠Batteries for Flashlight	⊠Non-perishable foo	od	⊠Backpack(s) or carrying case(s)
⊠Portable First Aid Kit	⊠Diapers		⊠Consider special toys or games
⊠Thermometer	Change of clothes	5	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags

⊠Medications

Blanket(s)

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N						
Emergency Ready-to-Go Pack is available and easily accessible in the	Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y					
Location of The Emergency Ready to go Pack: Close to front door						
Item Specification (if needed):						
5 shirts, 5pants, shorts, Sox, bibs, 9 diapers, Box of wipes						
2 extra 48 batteries, formula, baby food carrots, cereal, berry mixed Band aids, ointment, gauze, tape, alcohol wipes, Neosporin, cold com	press, gloves,					
2 16oz Water						
Items to review on xx/xx/xxxx if needed: N/A						
Emergency Documents						
⊠ Informal Provider Emergency Preparedness Plan (this com	pleted form)					
⊠Authorization for emergency medical care						
Planning and Maintenance						
Person responsible for updating the Disaster Supply Kit and the Eme	ergency Documents regularly:					
First Name Last Name						
Description of how the Emergency Ready-to-Go Pack will be transpo	orted to an evacuation location: Carried					
Shelter In Place Procedure:	room which has one door and two windows. If the need should arise					
the provider will use plastic and tape to seal the shelter. The provide	er will call the parent once they are secure.					
Evacuation Procedures:						
The provider will gat	e will secure seats before driving to the primary					
head to the basement that has two windows and one door. If the new	ed should arise, the provider will use plastic and tape to seal the					
shelter. The provider will call the parents before leaving the care loc	ation and after they are secure in the evacuation location.					
If they couldn't shelter at the primary location, they will go to the alter house. The provider will gate vehicle w	where she will secure the secure the secure tar seats before driving to the					
alternate evacuation location Once at the location, the provider will of	gain entry with spare key and head to the basement that has two					
windows and one door. If the need should arise the provider will use before leaving the care location and after they are secure in the alte	e plastic and tape to seal the shelter. The provider will call the parents rnate evacuation location.					
Delote leaving the care location and alter they are becare in the alter						
Signatures & Date						
Acknowledgement: By signing below the parties acknowledge that al been discussed. The parties also acknowledge that, if approved, the	I standards have been reviewed, and any corrections if needed have home in which care is provided is subject to random, unannounced					
pop up visit which will be conducted virtually or in-person.						
PROVIDER						
Printed Name: Shirley Bauer	Printed Name:					
Signature:	Signature					
Date: 10/6/22 Phone:	Date: 10/05/2022 Phone: 1-877-227-0125					

INFORMAL CHILD CARE INSPECTION REPORT

INSPECTION DATE/TIME/DURATION: 04-02-2025/3:30pm/91minutes	INS	INSPECTION TYPE		AGES	Total Approved	# Scholarship	# Present	Resident Children
•		V Initial Application		0-23 months	I	I	I	
APPLICANT ID:		Renewal Application		2 year olds				
		Complaint Investigation	3 year olds					
PROVIDER ID: 574127		Monitoring		4 year olds				
		Other		5's (pre-school)				
APPLICATION DATE: 03/01/2025 COUNTY: Prince Georges		Follow-Up		5-12 (school age)				
				13-19 year olds				
				TOTAL	I	I	l	
				Overnight				

FATALITY: N/A	SERIOUS INJURY:	COMPLAIN	Τ#:	
INFORMAL PROVIDER PHOTO ID VERIFIED:	Yes No	ID TYPE: Driver's License	EXP. DATE: 07/21/2032	
CARE LOCATION: O Child's Home Informal Child Care Provider's Home				
CARE TYPE: Relative Informal Child Care Non-Relative Informal Child Care				
INFORMAL PROVIDER NAME: Richard Beckwith				
PERSON(S) INTERVIEWED: Richard Beckwith and Cereese Williams				

All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

Instructions: 1. Review each Standard that applies to the Inspection being conducted.

- 2. Select the Standard that requires documentation and enter the compliance status.
- 3. Enter finding notes as appropriate.

<u>C</u> = In Compliance, <u>D</u> = Discussed, <u>N</u> = Not in Compliance, <u>X</u> = Not Inspected, <u>NA</u> = Not Applicable

Part 1 – Safety of Home					
С	1. Health & Safety Training (Basic 3 hrs. & the Annual Update)	C k) Has first aid kit/supplies			
	2. Home is free of health and safety hazards	C I) Has protective coverings on accessible electrical outlets			
С	a) Is in good repair	 Harmful items are stored appropriately and away from children 			
С	b) Is free of insect or rodent infestation	C a) Sharp or pointed items			
С	c) Is well-lit and well-ventilated	C b) Medications of any kind should be stored			
С	d) Has hot and cold running water	C c) Matches lighters and flammable products			
С	e) Has a working inside toilet	C d) Alcoholic beverages			
С	f) Has utilities for cooking, lighting and heating	C e) Weapons and firearms			
С	g) Has a working and safe heating system	C f) Cannabis edibles, smoking and vaping paraphernalia and by products			
С	h) Has a working refrigerator and stove	C g) Cleaning agents			
С	i) Has a working telephone	C h) Poisonous substances			
С	j) Has operational smoke and carbon-monoxide detector(s)	C i) Interior environmental hazards			

All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

Instructions: 1. Review each Standard that applies to the Inspection being conducted.

- 2. Select the Standard that requires documentation and enter the compliance status.
- 3. Enter finding notes as appropriate.

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Part 2 – General Cleanliness					
С	4.	All areas of the home are kept clean, including diapering area.	9. Rest Area and Furnishings		
С	5.	Trash garbage and wet or soiled diapers are disposed	C a) SIDS prevention review		
		of in a sanitary manner.	C b) Infant/toddler rest furnishings		
С	6.	Children are changed immediately when they have a soiled or wet diaper, clothing or bedding.	C c) Crib safety		
С	7.	Diapering procedures are followed.	C d) Individual rest place		
	8.	Handwashing procedures are followed.	 e) The provider shall provide furnishings for each child approved for care in the home. 		
С		a) Toileting	C ei) Younger than 12 months old, a crib, portable crib, or playpen		
С		b) Diapering	eii) At least 12 months old and younger than 5 years		
С		c) Food preparation and eating	old, a bed, cot, mat, or sleeping bag		
С		d) After playing outdoors			
С		e) Preventing the spread of disease			

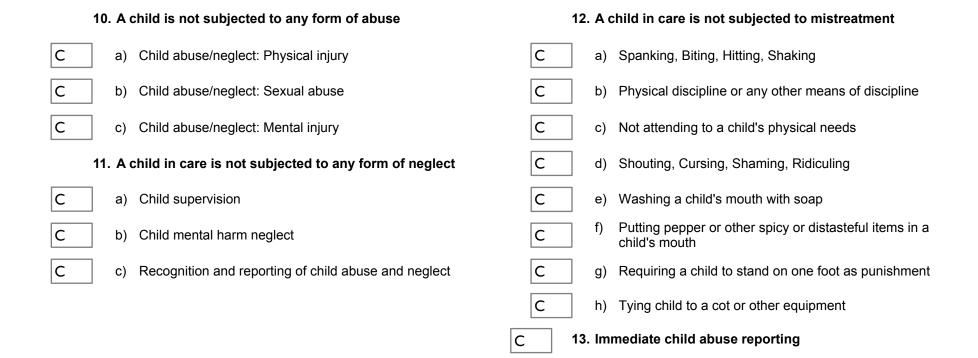
All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

Instructions: 1. Review each Standard that applies to the Inspection being conducted.

- 2. Select the Standard that requires documentation and enter the compliance status.
- 3. Enter finding notes as appropriate.

<u>C</u> = In Compliance, <u>D</u> = Discussed, <u>N</u> = Not in Compliance, <u>X</u> = Not Inspected, <u>NA</u> = Not Applicable

Part 3 – Child Abuse, Neglect and Mistreatment Standards



All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

Instructions: 1. Review each Standard that applies to the Inspection being conducted.

- 2. Select the Standard that requires documentation and enter the compliance status.
 - 3. Enter finding notes as appropriate.

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Part 4 – Vehicular Traffic and Transportation Safety



Part 5 – Outdoor Activity Area

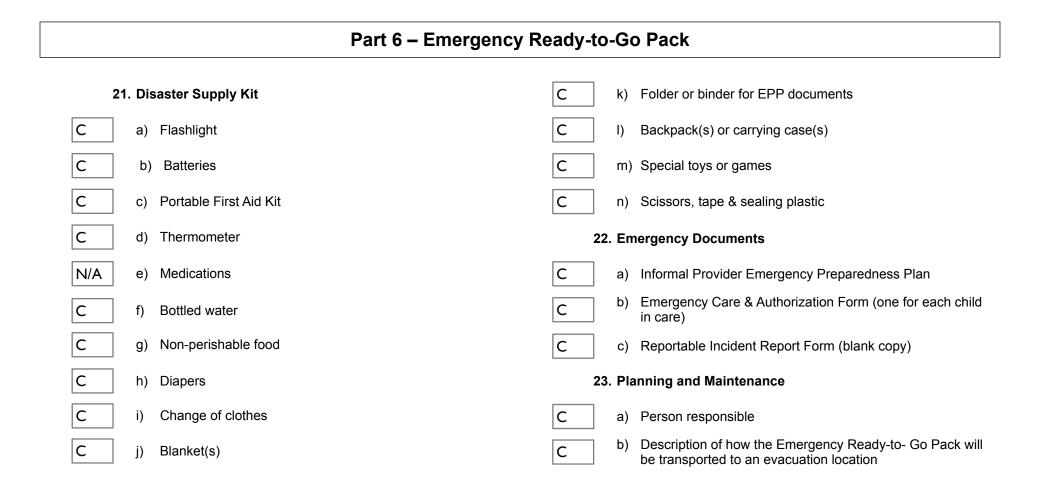
17. Safe outdoor play area С 20. Pool Safety C С a) 4 ft. fence that surrounds the pool 18. Enclosed safe play area b) Self-closing and self-latching mechanism on the С 19. Traffic and congested areas assessment С entry/exit way С c) Secured Lock С d) Sensor or alarm on the access door

All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

Instructions: 1. Review each Standard that applies to the Inspection being conducted.

- 2. Select the Standard that requires documentation and enter the compliance status.
- 3. Enter finding notes as appropriate.

<u>C</u> = In Compliance, <u>D</u> = Discussed, <u>N</u> = Not in Compliance, <u>X</u> = Not Inspected, <u>NA</u> = Not Applicable



All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

Instructions: 1. Review each Standard that applies to the Inspection being conducted.

- 2. Select the Standard that requires documentation and enter the compliance status.
- 3. Enter finding notes as appropriate.

<u>C</u> = In Compliance, <u>D</u> = Discussed, <u>N</u> = Not in Compliance, <u>X</u> = Not Inspected, <u>NA</u> = Not Applicable

Part 7 – Health & Safety Review					
C 24. Shelter in Place	C 31. Health & Safety Review: Premises safety, hazard protection				
C 25. Lockdown (partial & full)	C 32. Emergency response planning				
26. Home is free of health and safety hazards	C 33. Food allergy emergency preparedness				
C a) Primary Evacuation Location	C 34. Hazardous materials management				
C b) Alternate Evacuation Location	C 35. Prevention and control of infectious diseases (including immunization)				
C 27. Infant sleep safety	C 36. Pediatric first-aid and CPR				
C 28. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment	C 37. Appropriate precautions in transporting children				
C 29. Recognition and reporting of child abuse and neglect	C 38. Substance-free child care environment				
C 30. Health & Safety Review: Administration of medication.					

consistent with standards for parental consent



Time Out:	04/02/2025	17:01
	Date	Time

Date	Start Time	End Time	Duration	Follow-Up
04/02/2025	15:30	17:01	91 minutes	

Total Duration: **91 minutes** Minutes

SUMMARY OF CORRECTION

PROVIDER ID:	APPLICANT ID:	ZIP CODE:	COUNTY:		
574127	-	20721	Prince Georges		
INFORMAL PROVIDER NAME:		CARE LOCATION:			
Richard Beckwith		Child's Home Informal Child's Home Provider's H			
PERSON(S) INTERVIEWED:	PERSON(S) INTERVIEWED:				
Richard Beckwith and Cereese Williams					
VISIT TYPE:		INSPECTION TIME/DATE/DURATION:			
Initial Application		3:30pm/04-02-2025/91 minutes			

The following Summary of Correction has been submitted to the Child Care Scholarship Program (CCSP) in response to non-compliances found during a recent inspection. CCSP has either observed the following corrections or reviewed the submitted summary of correction(s) and has made a determination as follows:

All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

STANDARD NUMBER	STANDARD TEXT	SUMMARY OF CORRECTION	DATE OF CORRECTION
	No corrections needed.		

Blessen Harris	04/25	Complete	Includes overflow page	
Signature of Agency Representative	Date			ICCP Form SOC108c
Blessen Harris				

⊠Virtual Inspection □In-person Inspection					Return to: ccs.informalproviders@maryland.g ov	
Inspection Date: 1/31/2023 Follow-up Inspection Date: 02/03/2023			In: 3:30PM In: 1:31PM	Time Out: 4:33P Time Out: 1:58F	6755 C	t: Follow-up Required t: PASSED
Informal Care		1		1		
Type of Care (check one):	□ Non-rela	ative Info	ormal Provider C	are Relative	Informal Pro	vider Care
Provider Information						
First Name: Demetrius Last Name: Benjami			n-Frazier Provider ID: 505296 Email:		The second	
Care Location Inspected	and the second second	Carly Mark	1	and set of the set of	1993	
Street Address: Address Verified? Yes.			City:	County:	F t	ate Zip Code:
Name of Children in Care	add pages if nee	ded)	Scholarship	Date of Birth	Age	/ Present (Y/N)
	lada pageo il nec	dod)	Conordionip	06/04/2012	10 / No, at school	
Safety of the Home Directions: Review and dete pages may be used for com	ments.	with eac	h standard. Note	e any comments or o Y – Yes, N – No, Standard Met	corrective action D – Discusse Comment	ed, n/a – Not Applicable
Health and Safety Trainin	ig:			Y/N		Action /Timeframe if needed
Basic Health and Safety Tr	aining Completed	1?		Y	Relative	nformal Care - Certificate Submitted
Home is free of health an	d safety hazard	s:		Standard Met Y/N	Comment Corrective	s/Notes Action /Timeframe if needed
 Is in good repair 				Y		
Is free of insect or rodent infestation			Y			
Is well-lit and well-ventilated			Y			
Has hot and cold running water			Y	Test	ed hot water and observed steam	
Has a working inside toilet			Y			
 Has utilities for cooking, lighting and heating 			Y			
 Has a working and safe heating system 			Y	Provid	ler tested both cooling & heating on thermostat	
 Has a working refrigerator and stove 			Y			
Has a working telephone			Y	Phor	ne call made to test proper function	
 Has operational smoke detector(s) 			Y			
Has first aid kit/supplies			Y		Hydrogen Peroxide, bandaids,	
 Has protective coverings on any electrical outlet that is accessible to children 			Y			
Harmful items are stored appropriately and away from children:			Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed	
Sharp or pointed items			Y	Knife was moved to highest cabinet above sto		
Medications of any kind			Y	Corrective Action: Lock added to medicine cabir		
 Matches, lighters and flammable products 			Y	Does not own		
Alcoholic beverage	jes			Y	Does not own	
Guns				Y		Does not own
Cleaning agents			Y	Correctiv	ve Action: Lock added to cabinet with cleaning agents	
MSDE OCC Informal Care Inspe	ction Checklist			Page 1 of 3		Revised 10/2021

.

Poisonous substances	Y	Other than medications and cleaning solutions		
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
All areas of the home are kept clean, including diapering area.	Y			
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y			
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	No diaper age children in care		
Diapering procedures are followed.	Ŷ	N/A		
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y			
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y			
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	ÿ			
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y			
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Ŷ			
Emergency Ready-to-Go Pack				
The Emergency Ready-to-Go Pack must be available and easily accessible i needed medications) and Emergency Documents.	in the event of an en	nergency. This contains a Disaster Supply Kit (including		
Disaster Supply Kit				
Directions: Review and determine that each item is adequately included in the enough supplies for each child in care. Also the items are clean, organized, a				
⊠Flashlight ⊠Bottled water				
☑ Batteries for Flashlight ☑ Non-perishabl ☑ Portable First Aid Kit ☑ Diapers N/A	le food	⊠Backpack(s) or carrying case(s) ⊠Consider special toys or games		

⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags

MSDE OCC Informal Care Inspection Checklist

⊠ Thermometer

Page 2 of 3

⊠Change of clothes

Revised 10/2021

Blanket(s)

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y

Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)?Y

Location of The Emergency Ready to go Pack: Closet by front door

Item Specification (if needed):

4 16oz bottles of water, can each of chicken noodle soup, chef Boyardee lasagna, Ramen noodles, Band-aids, gauze, tape, scissors, tweezers, gloves, skin wipes, burn ointment, splinter probes, emergency blanket, bandages wound dressing, 2 outfits(shirts&pants), EPP & ECMA docs in folder, 2 books, 1 flashlight, 5 extra AA batteries

Items to review on 02/03/2023 if needed: Reviewed & Corrected on 02/03/2023

Electrical outlet covers – corrected all outlets covered or in use, Lock on cleaning agents under sink – added locks to both the kitchen and bathroom cabinets w/ cleaning products & medicines, Observe large knife – moved to highest kitchen cabinet above the stove, First aid for the home – first aid kit stored in bathroom wall cabinet, move Hydrogen peroxide, rubbing, alcohol and Lysol to Kitchen – moved to bathroom and kitchen cabinets with locks, Flash light and extra batteries – added to ERTG, Clothes – 1 t shirt, underwear & 2 pants, Book or game – 2 books, EPP & ECMA – both set of forms in folder in ERTG, Hot water – observed and tested the hot water and observed steam

Emergency Documents

Sinformal Provider Emergency Preparedness Plan (this completed form)

Authorization for emergency medical care

Planning and Maintenance

Person responsible for updating the Disaster	Supply Kit and the Emergency Documents regularly:
First Name Demetrius	Last Name Benjamin-Frazier

Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: Carried

Shelter In Place Procedure:

The provider will grab the ERTB and and shelter in the bathroom. The room has one door and no window. If the need should arise the provider will use plastic and tape to seal the shelter. The provider will call the parent once they are secure in the bathroom...

Evacuation Procedures:

The provider will grab the emergency bag and the manual and proceed to the designated path that has been established with Yering and walk to the primary evacuation location, which is the provider will call the parent before leaving the care location and after provider will shelter in the gram owindow one double door. The provider will call the parent before leaving the care location and after they are secure in the evacuation location.

If they couldn't shelter at the primary location, they will go to the alternate evacuation location which is a set of the provider will grab the emergency bag, get the secure of the location de to either catch a bus or an Uber. If traveling by Uber, the provider will make sure the secure of the location, the provider will inquire as to where to shelter. The provider will call the parents before leaving the care location and immediately after they are secure in the alternate evacuation location.

Signatures & Date Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. The parties also acknowledge that, if approved, the home in which care is provided is subject to random, unannounced pop up visit which will be conducted virtually or in-person. PROVIDER INSPECTOR Printed Name: Printed Name: Signature: Signature: Date: 21 -4 1 -32-32 Phone: 1-877-227-0125

MSDE OCC Informal Care Inspection Checklist

Page 3 of 3

Revised 10/2021

Ma ⊠Virtual Inspection □In-person Inspection	Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST					
Inspection Date: 10/11/2024	Time In: 9:45 AM		Time Out: 10:47 AM		Result: Passed	
Informal Care						
Type of Care (check one):	Non-relative Inform	al Provider Ca	are Relative	Informal	Provider Care	
Provider Information						
First Name: Jennifer	Last Name: Bennett Pro			ovider ID: 564468		
Provider ID #:				Em	nail:	
Care Location Inspected				_		
Street Address: Address Verified?: Yes	<u>City</u> :	County:			State: Zip Code:	
Name of Children in Care (add page	es if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)	
			11/14/2020		s old/ Y	
			12/17/2022	1 year		
Safety of the Home						
Directions: Review and deter	mine compliance w	vith each standa	ard. Note any comm	nents or co	prrective actions needed.	
Additional pages may be use	d for comments.		Y-Yes, N-No,	D – Discu	issed, n/a – Not Applicable	
Health and Safety Training:			Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Basic Health and Safety Tra	aining Completed?	,	Y	1		
Home is free of health and safety	hazards:		Standard Met Y/N		ents/Notes tive Action /Timeframe if needed	
 Is in good repair 	1000 -		Y			
 Is free of insect or rodent in 	festation		Y			
 Is well-lit and well-ventilated 	d		Y			
 Has hot and cold running w 	ater		Y			
Has a working inside toilet			Y	1		
 Has utilities for cooking, light 	hting and heating		Y			
 Has a working and safe heating system 			Y			
 Has a working refrigerator and stove 			Y	11		
Has a working telephone			Y			
 Has operational smoke determined 	ector(s)		Y	2		
 Has first aid kit/supplies 			Y			
 Has protective coverings or accessible to children 	n any electrical out	let that is	Y			
Harmful items are stored appropriately and away from children:			Standard Met Y/N		nts/Notes ive Action /Timeframe if needed	
Sharp or pointed items			Y			
Medications of any kind			Y			
 Matches, lighters and flammable products 			Y			
Alcoholic beverages			Y			
• Guns			Y			
Cleaning agents			Y			
Poisonous substances			Y			
GENERAL CLEANLINESS STAND	ARDS		Standard Met Y/N		nts/Notes ive Action /Timeframe if needed	
All areas of the home are kept clean, including diapering area.		ng area.	Y			

	The second se	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: • Toileting;		
 Diapering; Before food preparation and eating; 	Y	
 After playing outdoors; and At other times when necessary to prevent the spread of disease. 		
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed

Y

V

V

V

A child is not subject to any form of abuse, including:

- Physical injury
- Any sexual abuse
 - Mental injury

A child in care is not subjected to any form of neglect, including:

- The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm;
- Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child.

A child in care is not subjected to mistreatment, including:

- Any deliberate act that hurts a child physically or emotionally, including:
- Spanking, Biting, Hitting, Shaking
- Any other means of physical discipline
- Not attending to a child's physical needs
- Shouting, Cursing, Shaming, Ridiculing
- Washing a child's mouth with soap
- Putting pepper or other spicy or distasteful items in a child's mouth
- Requiring a child to stand on one foot as punishment
- Tying child to a cot or other equipment

The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.

Emergency Ready-to-Go Pack

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also that the items are clean, organized, and usable. Comment and note below if needed.

⊠ Flashlight	Bottled water	Section of the sectio
Batteries	Non-perishable food	Backpack(s) or carrying case(s)
Portable First Aid Kit	Diapers	Consider special toys or games
Thermometer	Change of clothes	Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags
Medications-N/A	□Blanket(s)	

MSDE OCC Informal Care Inspection Checklist 2020-03-26

Page 2 OF 3

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Yes

Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Yes

Location of Emergency Ready to go Pack: Laundry Room

Item Specification (if needed):

To be observed for compliance on :

Emergency Documents

⊠Informal Provider Emergency Preparedness Plan (this completed form)

Authorization for emergency medical care

Planning and Maintenance Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly: Last Name First Name Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: Shelter In Place Procedures: (1 doors, 0 window(s)). The provider will text The Provider will gather the ready to go bag and the children, parent before, during and after sheltering. **Evacuation Procedures:** The Provider will gather the children and the ready to go bag, taking them to the car securing the both children in forward facing car-seats. The provider will The provider will text parent before, during and after sheltering. The Provider will gather the children and the ready to go bag, taking them to the car securing the both children in forward facing car-seats. The provider will

The provider will text parent before, during and after sheltering.

CARE HOURS: Signatures & Date Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. The parties also acknowledge that, if approved, the home in which care is provided is subject to random, unannounced pop up visit which will be conducted virtually or in-person. INSPECTOR PROVIDER Printed Name: Jennifor Bennett **Printed Name:** Signature: Signature:

MSDE OCC Informal Care Inspection Checklist 2020-03-26

Phone:

DA

Date: 10 - 15- 2024

Page 3 of 3

Date: 10/11/2024

Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection	Cł	Department of Ed hild Care Scholar INFORMAL INSPECTION C	CARE	Child Care	Return to: ccs.informalproviders@maryland.g ov
nspection Date: 11/08/2022 Time In: 1:30PM			Time Out: 3:05P	M Result	: Failed, Follow up needed
Follow up Scheduled: 11/09/2022 Time In: 10:00AM		Time Out: 10:26	AM Result	PASSED	
Informal Care					Dimaring procedures are televisit
Type of Care (check one):	Non-relative In	nformal Provider C	are ⊠Relative	e Informal Pro	vider Care
Provider Information					
First Name: Shaniqua Last Name: Bentley			,	Provid	ler ID: 501073
Provider ID #:				Email:	
Care Location Inspected			the second section		
Street Address: Address Verified? Yes	City:	Cou	nty:	State	Zip Code:
Name of Children in Care (add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
			5/16/2022	5 Months	/ No With mom
			3/13/2016	6 / Scho	ol
			2/10/2012	10 / Scho	
			2/10/2012		
			1		
Safety of the Home			ALL LENTINES IN CONTRA	na ng inition a Propinsi	the contraction of the broken
Directions: Review and detern pages may be used for comme		each standard. Note			ons needed. Additional ed, n/a – Not Applicable
Health and Safety Training			Standard Met Y/N	Comments Corrective	s/Notes Action /Timeframe if needed
Basic Health and Safety Training Completed?		Y		Certificate Submitted	
Home is free of health and safety hazards:		Standard Met Y/N	Comments Corrective	s/Notes Action /Timeframe if needed	
Is in good repair			Y		
Is free of insect or rodent infestation		Y	No sign of	infestation	
Is well-lit and well-ventilated		Y			
Has hot and cold ru			Y	Steam obs	
Has a working insid			Y	Cleaning ag	gents & Bleach must be moved
	king, lighting and hea	ting	Y		
	safe heating system		Y	Thermostat	t dialed up
Has a working refrig			Y	Descridente	
Has a working telep			Y	Provider's	cell called
Has operational smoke detector(s)		Y	Dandanaa	tana aquita (Qintmant pacedod)	
Has first aid kit/supplies		Y	Bandages,	tape, gauze, (Ointment needed)	
 Has protective coverings on any electrical outlet that is accessible to children 		Y	Covered, ir	n use or behind furniture	
Harmful items are stored appropriately and away from children:		Standard Met Y/N	Comments/ Corrective	Notes Action /Timeframe if needed	
Sharp or pointed ite			Y		
Medications of any			Y	Upper Cabir	net
	nd flammable product	ts	Y	None	
Alcoholic beverages	\$		Y	None	
Guns			Y		
Cleaning agents			Y		en sink cabinet needs lock
 Poisonous substance 	ces		Y	Other than n	nedications and cleaning solutions

GENERAL CLEANLINESS STANDARDS	i se Milloritation de Milloritation Production Milloritation	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diap	ering area.	Y	,
Trash, garbage and wet and soiled diapers are disp sanitary manner.	osed of in a	Y	· · · · · · · · · · · · · · · · · · ·
Child is changed immediately when s/he has a soile diaper, clothing or bedding.	ed or wet	Y	
Diapering procedures are followed.		Y	
 Handwashing procedures are followed. Provider an washed thoroughly with soap and warm running war Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent to disease. 	ter after:	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT	STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, inclu Physical injury Any sexual abuse Mental injury 	ding:	Y	
 A child in care is not subjected to any form of neincluding: The failure to give proper care and attention including leaving a child unattended under that indicate that the child's health or welfan placed at substantial risk of harm; Mental injury to a child, or a substantial risk injury that is caused by the failure to give prattention to a child. 	n to a child circumstances re is harmed or k of mental	Y	
 A child in care is not subjected to mistreatment, Any deliberate act that hurts a child physic emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful child's mouth Requiring a child to stand on one foot as p Tying child to a cot or other equipment 	ally or items in a	Y	
The provider immediately reports any suspected neglect or mistreatment by calling 911 and your Department of Social Services Child Protective S	local	Y	
Emergency Ready-to-Go Pack			enter internet sommer service and
The Emergency Ready-to-Go Pack must be available and needed medications) <u>and</u> Emergency Documents.	easily accessible in	the event of an em	ergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit			
Directions: Review and determine that each item is adeque enough supplies for each child in care. Also the items are			
⊠Flashlight	Bottled water		Solder or binder for EPP documents
⊠Batteries for Flashlight	⊠Non-perishable	e food	⊠Backpack(s) or carrying case(s)
⊠Portable First Aid Kit	⊠Diapers		⊠Consider special toys or games
☑Thermometer ☑Change of clot		hes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags

Blanket(s)

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)	? Y
Emergency Ready-to-Go Pack is available and easily accessible in the	event of an emergency (Y/N)? Y
Location of The Emergency Ready to go Pack: By the front door	
Item Specification (if needed): 26 AA batteries, 29 diapers, box of wipes, can mixed soup, 7 baby food packets, 29 diapers, box of wipes, can mixed 2 Onesie, Onesie under wares, 2 shorts, 6 pants, 4 shirt, 7 under ware Alcohol wipes, tape, gauze, gloves, band aids, thermal blankets, 4 box	s, 2 socks
Items to review on 11/09/2022 if needed: Observed 11/09/2022	
Cabinet under kitchen sink needs lock, First aid ointment, Hydrogen pe	roxide, Emergency papers in the bag
Emergency Documents	
⊠ Informal Provider Emergency Preparedness Plan (this comp	leted form)
⊠Authorization for emergency medical care	
Planning and Maintenance	
Person responsible for updating the Disaster Supply Kit and the Eme	rgency Documents regularly:
First Name Last Name	
Description of how the Emergency Ready-to-Go Pack will be transpo	rted to an evacuation location: Carried
Shelter In Place Procedure:	
The provider will grab the ERTB, Strap the baby to her, gather the oth room has 4 small windows and two doors. If the need should arise the will text the parent before, during and after sheltering.	
Evacuation Procedures:	
The provider will place the baby in the stroller, grab the emergency be stroller as they walk to the primary evacuation location for some reason they to the primary evacuation location. The provided by the primary evacuation is the primary to doller in booster seat and the older child in their seatbelts, before be	If ider will secure the baby in rear facing car seat, the 6 year old in eing driven to the primary evacuation location. Provider will call ney will shelter in the basement which has no windows and one door.
If they couldn't shelter at the primary location, they will go to the altern provider will put the baby in the stroller, put the emergency bag under who will also be carrying the toddler seat, toddler seat and the older child in their seatbelts, before being driven care location, to let her know they are on their way. They will shelter is should arise the provider will use plastic and tape to seal the shelter.	The stroller, Constant of the stroller . The provider will secure the baby in car seat, 6 year old in to the location. The provider will Constant of the secure that has one windows and two doors. If the need The provider will call the parents before leaving the care location,
Signatures & Date	tenderede have been reviewed and any competition. If we did have
Acknowledgement: By signing below the parties acknowledge that all seen discussed. The parties also acknowledge that, if approved, the h pop up visit which will be conducted virtually or in-person.	
PROVIDER	INSPECTOR

PROVIDER	INSPECTOR
Printed Name: Sharigua Bertleg	Printed Name
Signature	Signature:
	Date: 11/09/2022 Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection	Child	Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST			Return to: ccs.informalproviders@maryland.gov	
Inspection Date: 4/18/2024	Time In: 10:30am		Time Out: 11:09am		esult: Passed	
Informal Care						
Type of Care (check one):	□ Non-relative Info	ormal Provider Ca	are ⊠Relative	Informal	Provider Care	
Provider Information						
First Name: Esther Provider ID #:	t Name: Esther Last Name: Benyowi		tz		ovider ID: 441671	
Care Location Inspected						
Street Address: Address Verified?: Yes	City		County		State Zip Code	
Name of Children in Care (ad	Id pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)	
	a pages in needed/	outofarship	1/3/2023	1 /N		
			3/17/2021	3 /N		
			7/20/2019	4 /N		
			112012013	4/14		
Safety of the Home						
Directions: Review and Additional pages may b					prrective actions needed. Issed, n/a – Not Applicable	
Health and Safety Training:			Standard Met Y/N		ents/Notes tive Action /Timeframe if needed	
Basic Health and Saf	ety Training Complete	ed?	Y			
Home is free of health and s	afety hazards:		Standard Met Y/N		ents/Notes tive Action /Timeframe if needed	
 Is in good repair 			Y	_		
 Is free of insect or room 	Is free of insect or rodent infestation		Y			
 Is well-lit and well-ver 	Is well-lit and well-ventilated		Y			
	Has hot and cold running water		Y			
			Y			
 Has utilities for cooking 	ng, lighting and heatin	g	Y			
 Has a working and sa 	afe heating system		Y			
Has a working refrige			Y			
Has a working teleph			Y	-		
Has operational smol			Y			
	Has protective coverings on any electrical outlet that is		Y	Bedrooms ARE KEPT LOCKED DURING CA HOURS. NO ACCESS FOR CHILDREN.		
Harmful items are stored app children:		/ from	Standard Met Y/N	Comme	nts/Notes ive Action /Timeframe if needed	
Sharp or pointed item	IS.		Y	Concou		
Medications of any ki			Y			
 Matches, lighters and 			Y			
Alcoholic beverages			Y			
Guns			Y			
Cleaning agents			Y			
 Poisonous substance 	S		Y			
GENERAL CLEANLINESS ST			Standard Met Y/N		nts/Notes ive Action /Timeframe if needed	

All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

	hat each item is adequately included in the Disaster child in care. Also that the items are clean, organized	
⊠Flashlight	Bottled water	Solder or binder for EPP documents
⊠Batteries	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
Portable First Aid Kit	⊠Diapers	Consider special toys or games
⊠Thermometer	⊠Change of clothes	 Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags
□ Medications N/A	⊠Blanket(s)	

MSDE OCC Informal Care Inspection Checklist 2020-03-26

	ed, and usable (Y/N)? YES	N//NO VEO
Emergency Ready-to-Go Pack is available and eas	sily accessible in the event of an emergency	(Y/N)? YES
Location of Emergency Ready to go Pack: FRO	ONT HALL CLOSET NEAR FRONT DOOR	
Item Specification (if needed):		
LARRGE DUFFLE BAG		
BAG OF DAIPERS AND WIPES	10	
 1 LARGE BLANKET 2 SMALLER BLANKET PROTEIN BARS, CANNED TUNA(2), CANI 		
 BOOKS 		
WATER BOTTLES(4)		
 DUCT TAPE, SEALING PLASTIC AND SCI 	ISSORS	
To be observed for compliance on :		
Emergency Documents		
⊠Informal Provider Emergency Preparedne	ess Plan (this completed form)	
Authorization for emergency medical care	e	
Planning and Maintenance		
Person responsible for updating the Disaster Supp	ply Kit and the Emergency Documents reg	ularly:
First Name Esther	Last Name Benyowitz	
toor(s) () window(s)). The provider will seal the doubt	or using the supplies in the emergency ha	and call/ text the parent after securing the
	por using the supplies in the emergency ba	ig and call/ text the parent after securing the
door(s) 0 window(s)). The provider will seal the doo children. <u>Evacuation Procedures:</u>	por using the supplies in the emergency ba	ig and call/ text the parent after securing the
children. Evacuation Procedures: The Provider will gather the children and carry the forward facing car seats and contact the pare	e emergency bag to the car. The Provider	vill secure the child(ren) in their rear facing/
children.	e emergency bag to the car. The Provider The Provider pon arriving to the new location and after the emergency bag to the car. The Provider efor	will secure the child(ren) in their rear facing/ will ask the where she he emergency is over. will secure the child(ren) in their rear facing/
Children. Evacuation Procedures: The Provider will gather the children and carry the orward facing car seats and contact the parent will shelter. The Provider will contact the parent up The Provider will gather the children and carry the orward facing car seats and contact the parent be will shelter. The Provider will call/ text the parent up	e emergency bag to the car. The Provider The Provider pon arriving to the new location and after the emergency bag to the car. The Provider efor	will secure the child(ren) in their rear facing/ will ask the where she he emergency is over. will secure the child(ren) in their rear facing/
children. Evacuation Procedures: The Provider will gather the children and carry the orward facing car seats and contact the parent vill shelter. The Provider will contact the parent up The Provider will gather the children and carry the orward facing car seats and contact the parent be vill shelter. The Provider will call/ text the parent up	e emergency bag to the car. The Provider The Provider pon arriving to the new location and after the emergency bag to the car. The Provider efor	will secure the child(ren) in their rear facing/ will ask the where she he emergency is over. will secure the child(ren) in their rear facing/
Evacuation Procedures: The Provider will gather the children and carry the forward facing car seats and contact the parent will shelter. The Provider will contact the parent up The Provider will gather the children and carry the forward facing car seats and contact the parent be will shelter. The Provider will call/ text the parent up CARE HOURS:	e emergency bag to the car. The Provider The Provider pon arriving to the new location and after the emergency bag to the car. The Provider efor	will secure the child(ren) in their rear facing/ will ask the where she he emergency is over. will secure the child(ren) in their rear facing/
Children. Evacuation Procedures: The Provider will gather the children and carry the orward facing car seats and contact the parent will shelter. The Provider will contact the parent up The Provider will gather the children and carry the orward facing car seats and contact the parent be will shelter. The Provider will call/ text the parent up	e emergency bag to the car. The Provider v the Provider pon arriving to the new location and after the e emergency bag to the car. The Provider v eformation and after the provider upon arriving to the new location and after nowledge that all standards have been review if approved, the home in which care is provide	will secure the child(ren) in their rear facing/ will ask the secure the child(ren) in their rear facing/ will secure the child(ren) in their rear facing/ where she securing the children.
Children. Evacuation Procedures: The Provider will gather the children and carry the orward facing car seats and contact the parent will shelter. The Provider will contact the parent up The Provider will gather the children and carry the orward facing car seats and contact the parent be will shelter. The Provider will call/ text the parent up CARE HOURS: - Signatures & Date Acknowledgement: By signing below the parties acknowledge that, in the parent is parties also acknowledge that, in	e emergency bag to the car. The Provider v the Provider pon arriving to the new location and after the e emergency bag to the car. The Provider v eformation and after the provider upon arriving to the new location and after nowledge that all standards have been review if approved, the home in which care is provide	will secure the child(ren) in their rear facing/ will ask the secure the child(ren) in their rear facing/ will secure the child(ren) in their rear facing/ where she securing the children.
Evacuation Procedures: The Provider will gather the children and carry the orward facing car seats and contact the parent will shelter. The Provider will contact the parent up The Provider will gather the children and carry the orward facing car seats and contact the parent be will shelter. The Provider will call/ text the parent up CARE HOURS: - Signatures & Date Acknowledgement: By signing below the parties acknowledge that, if pop up visit which will be conducted virtually or in-per- PROVIDER	e emergency bag to the car. The Provider v the Provider pon arriving to the new location and after the e emergency bag to the car. The Provider v eformation and after the provider upon arriving to the new location and after nowledge that all standards have been review if approved, the home in which care is provide	will secure the child(ren) in their rear facing/ will ask the the the where she he emergency is over. will secure the child(ren) in their rear facing/ er wil the child(ren) in their rear facing/ where she securing the children.
Evacuation Procedures: The Provider will gather the children and carry the orward facing car seats and contact the parent will shelter. The Provider will contact the parent up The Provider will gather the children and carry the orward facing car seats and contact the parent be will shelter. The Provider will call/ text the parent up CARE HOURS: - Signatures & Date Acknowledgement: By signing below the parties acknowledge that, if pop up visit which will be conducted virtually or in-per- tiop up visit which will be conducted virtually or in-per-	e emergency bag to the car. The Provider with the Provider to the new location and after the emergency bag to the car. The Provider we for the provider to the new location and after the provider to the provider to the new location and after the provider to the new location and after the provider to the new location and after the provider to the provider to the new location and after to the provider to the new location and after to the provider to the pr	will secure the child(ren) in their rear facing/ will ask the she he emergency is over. will secure the child(ren) in their rear facing/ er will where she securing the children.

Virtual Inspection In-person Inspection		Care Scholarsh INFORMAL C SPECTION CH	hip Program ARE	lid Care	Return to: ccs.informalproviders@maryland.g ov
Inspection Date: 3/23/2023	Time in order in		Time Out: 4:22PM	A Resu	It: Failed Needs Follow Up
Inspection Date: 3/27/2023			Time Out: 3:13PM	A Resu	It: Passed
nformal Care					
Type of Care (check one):	Non-relative Inf	ormal Provider C	are ⊠Relative	Informal Pr	ovider Care
Provider Information		The second second			
First Name: Esther Last Name: Benyowi Provider ID #:		vitz	tz Provider ID: 441671 Email:		
Care Location Inspected	12 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1000 SEA		1000	
Street Address: Address Verified? Yes	City:	Count	State		Zip Code:
Name of Children in Care	e (add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
turio or ormanorrin our	,		7/20/2019	3 / No, v	with parents
			3/17/2021		/ith parents
			1/3/2023	2 Mos / 1	No, with parents
Safety of the Home					
Directions: Review and det pages may be used for com	termine compliance with ea nments.	ach standard. Not	e any comments or o Y - Yes, N - No,	D - Discus	tions needed. Additional sed, n/a – Not Applicable
Health and Safety Traini	ng:		Standard Met Y/N	Correcti	nts/Notes ve Action /Timeframe if needed
Basic Health and Safety Training Completed?		Y		te submitted	
Home is free of health a			Standard Met Y/N	Correcti	nts/Notes ve Action /Timeframe if needed
 Is in good repair 			Y		ntained home
 Is free of insect of 	or rodent infestation		Y	No sign o	of infestation
 Is well-lit and we 	II-ventilated		Y		
Has hot and cold running water		Y	Steam o		
Has a working inside toilet		Y	Flush ob	oserved	
 Has utilities for c 	cooking, lighting and heat	ing	Y		
Has a working a	nd safe heating system		Y	Thermostat dialed up	
Has a working re	efrigerator and stove		Y	Gas burners operational	
 Has a working te 	elephone		Y		g call made on Landline
 Has operational 	smoke detector(s)		Y		and Carbon Monoxide detector observe
• Has first aid kit/s	supplies		Y	Band aid gauze, t	ds, anti-itch cream, ace straps, ice pack ape, ointments
Has protective of accessible to ch	coverings on any electrica ildren	al outlet that is	Y	Covered	d, in use or behind furniture
Harmful items are stored children:	appropriately and awa	ly from	Standard Met Y/N	Comment Corrective	s/Notes e Action /Timeframe if needed
Sharp or pointed	items		Y	Upper Cal	pinets
Medications of a			Y	Top of cab	pinet
	and flammable products		Y	Upper cab	inet
Alcoholic bevera			Y	None	
Guns	•		Y	None	
Cleaning agents		24	Y		nder the sink
Poisonous subst	ances		Y	Other than	n medications and cleaning solutions
GENERAL CLEANLINES	and the second		Standard Met Y/N	Comment	ts/Notes e Action /Timeframe if needed

All areas of the home are kept clean, including diapering area.	Y	
rash, garbage and wet and soiled diapers are disposed of in a anitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet liaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect. including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	¥	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily accessible in needed medications) and Emergency Documents.	n the event of an en	nergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit		

Items in the Disaster Supply Kit are clear Emergency Ready-to-Go Pack is availa	n, organized, and usable (Y/N)? Y	nergency (Y/	N)? Y
⊠Medications N/A	Blanket(s)		
Thermometer	Change of clothes		packing tape & sealing plastic/trash bags
X	X		Heavy Duty Scissors, duct tape/
⊠Portable First Aid Kit	⊠Diapers		⊠Consider special toys or games
⊠Batteries for Flashlight	⊠Non-perishable food		⊠Backpack(s) or carrying case(s)
⊠Flashlight	⊠Bottled water		Solder or binder for EPP documents

Location of The Emergency Ready to go Pack: Front coat closet

Item Specification (if needed):

3 AAA batteries, 1 Onesie, 3 pants, 3 shirts, 7 diapers, pack of wipes, 2 blankets 3 16oz bottles of water, 2 can each of corn, peanut butter, 2 packs of rice cakes, 2 protein bars, chick peas, Formula, Gloves, hand sanitizer, gauze, tweezers, tape, band aids, ointment, alcohol wipes

Items to review on 3/27/2023 if needed: Observed on 3/27/2023 at 3:00pm

Smoke detector alarm,

Emergency Documents

☑ Informal Provider Emergency Preparedness Plan (this completed form)
 ☑ Authorization for emergency medical care

Planning and Maintenance

Person responsible for updating the Disaster Su	pply Kit and the Emergency Documents regularly:
First Name Esther	Last Name Benyowitz

Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: Carried

Shelter In Place Procedure:

The provider will grab the ERTB from hallway closet, gather the children and head to hallway bathroom. The room has one door And no window. If the need should arise the provider will use plastic and tape to seal the shelter. The provider will call the parent once they are secure.

Evacuation Procedures:

The provider will grab the emergency bag and carry it on her shoulder, carry the babies with the 3 year old walking and proceed to the provider's vehicle where she will secure 2 month old in rear facing car seat, 2 year old and 3 year old in front facing car seat, before driving to the primary evacuation location, which the provider will call the parents before leaving the term on if time allows, and then after they are secure in the evacuation location.

If they couldn't shelter at the primary location, they will go to the alternate evacuation location which is 7 mile market. The provider will grab the emergency bag, Gather the children and proceed to the provider's vehicle where she will secure 2 month old in rear facing car seat, 2 year old and 3 year old in front facing car seat, before driving to the alternate evacuation location. Once at the location provider will ask to be directed to a shelter room. The provider will call the parents before leaving the care location, if time allows, and then after they are secure in the alternate evacuation location.

Signatures & Date

Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. The parties also acknowledge that, if approved, the home in which care is provided is subject to random, unannounced pop up visit which will be conducted virtually or in-person.

PROVIDER		INSPECTOR
Printed Name: Esther Benyowitz	Printed Name:	
Signature:	Signature:	
Date: 3 23 202 > Phone	Date: 3/23/2023	Phone: 1-877-227-0125

Man Virtual Inspection In-person Inspection	ryland State Department of E Care Child Care Scholars INFORMAL INSPECTION CH	hip Program CARE	Child Return to: ccs.informalproviders@maryland.gov
Inspection Date: 02/27/2025	Time In: 3:30pm	Time Out: 4:14pr	n Result: Passed
Informal Care			
Type of Care (check one):	Ion-relative Informal Provider	Caro MPelative	Informal Provider Care
///			
Provider Information			Provider ID: 541070
First Name: Robin Provider ID #:	Last Name: Berkley		Email:
Care Location Inspected			
Street Address:	<u>City:</u>	County:	State: Zip Code:
Address Verified?: Yes Name of Children in Care (add page	es if needed) Scholarship	Date of Birth	Age / Present (Y/N)
	ss (i Hebueu) ochoidi ship		n <mark>a ser a la constante de la constante de</mark>
		7/12/2017	7 years old/ N
		5/29/2014	10 years old/ N
Safety of the Home			
	mine compliance with each star	idard. Note any comm	ents or corrective actions needed.
Additional pages may be used		Y - Yes, N - No,	D – Discussed, n/a – Not Applicable
Health and Salety Training:		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe If needed
Basic Health and Safety Tra	aining Completed?	Y	
Home is free of health and safety I		Standard Met	Comments/Notes
		Y/N Y	Corrective Action /Timeframe II needed
Is in good repair			
Is free of insect or rodent in		Y	
Is well-lit and well-ventilated		Y Y	
Has hot and cold running w	ater		
Has a working inside toilet	- 41	Y	
Has utilities for cooking, light		Y Y	
Has a working and safe hea		Y	
Has a working refrigerator a	and stove	Y	
Has a working telephone			
Has operational smoke determined	ector(s)	Y	
Has first aid kit/supplies		Ŷ	
 Has protective coverings or accessible to children 	any electrical outlet that is	Y	
Harmful items are stored appropri children;	ately and away from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 Sharp or pointed items 	an marin an an an that an tha tha tha an tha an Tha an tha an	Y	ne ne na ser en
Medications of any kind		Y	
Matches, lighters and flamn	nable products	Y	
Alcoholic beverages	· · · · · ·	Y	
Guns		Y	
Cleaning agents		Y	
Poisonous substances		Y	
GENERAL CLEANLINESS STAND	ARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean	. includino diaperino area.	Y	na na na kana a sa katawa na kana kana kana yanging kanakararana kana kana ka

Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Ŷ	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit		
Directions: Review and determine t contains enough supplies for each of	hat each item is adequately included in the Disaster shild in care. Also that the items are clean, organized	Supply Kit. Be certain that the Disaster Supply Kit I, and usable. Comment and note below if needed.
⊠ Flashlight	⊠Bottled water	Sector or binder for EPP documents
⊠Batteries	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
⊠ Portable First Aid Kit	□Diapers-N/A	⊠Consider special toys or games
⊠Thermometer	⊠Change of clothes	⊠ Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags
□Medications-N/A	⊠ Blanket(s)	

MSDE OCC Informal Care Inspection Checklist 2020-03-26

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Yes				
Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Yes				
Location of Emergency Ready to go Pack: Liv	Location of Emergency Ready to go Pack: Living Room			
Emergency Documents				
⊠Informal Provider Emergency Prepared	ness Plan (this completed form)			
⊠Authorization for emergency medical ca	Ire			
Planning and Maintenance				
Person responsible for updating the Disaster Su	pply Kit and the Emergency Documents reg	ularly:		
First Name Robin	Last Name Berkley			
Description of how the Emergency Ready-to-Go	Pack will be transported to an evacuation lo	ocation:		
Sheiter in Place Procedures:				
The Provider will gather the ready to go bag and provider will <u>call/text</u> parent before, during and a Evacuation Procedures:		<mark>1 doors, ≎ window(s))</mark> . The		
	dute as her, ensuring both shildren in th	athelte. The provider will		
The Provider will gather the children and the rea		w(s)). The provider will <u>call/text</u> parent		
before, during and after sheltering.				
The Provider will gather the children and the rea	dy to go bag, securing both children in se	atbelts. The provider will		
parent before, during and after sheltering.	<u>1 0001</u>	s, 0 window(s)). The provider will call/text		
CARE HOURS				
Signatures & Date				
Acknowledgement: By signing below the parties act been discussed. The parties also acknowledge that pop up visit which will be conducted virtually or in-p	, if approved, the home in which care is provid	ved, and any corrections if needed have led is subject to random, unannounced		
PROVIDER		INSPECTOR		
	Printed Name:			
Robin Berkley Printed Name:				
Signatur	Signature:			
Date: 2/27/25 Phone	Date: 2/27/2025	Phone: 1-877-227-0125		

⊠Virtual Inspection □In-person Inspection		ate Department of E Care Child Care Scholars INFORMAL (INSPECTION CH	hip Program CARE	of Child	Return ccs.info	to: prmalproviders@maryland.gov
Inspection Date: 2/28/2024 8	& 2/29/2024	Time In: 1:30pm 10:36am	Time Out: 2:15 11:11am	10:	sult: Follo 30am ssed	ow Up Scheduled- 2/29/2024 @
Informal Care				0.000 8.000	The Assessment	
Type of Care (check one):	Non-relativ	e Informal Provider C		1.4.4	14	学校学习,中国新闻的学
Provider Information		e informal Frovider C	are Kelativ	e Informal F	Provider (Care
First Name: Robin		Loot Name: Dedular				
Provider ID		Last Name: Berkley			vider ID:	541070
Care Location Inspected				Ema	ail:	
Street Address: Address Verified?: Yes		City	Cour	ity	State	Zip Code
Name of Children in Care (a	add pages if needed	d) Scholarship	Date of Birth	Age	1	Propert (M/N)
			5/29/2014	9	/ N	Present (Y/N)
			7/12/2017	6	/ N	
			111212011	0	/ 1	
					1	
					/	
					/	
					/	
Directions: Review an Additional pages may Health and Safety Training:	d determine compl be used for comme	iance with each stand ents.	ard. Note any comm Y – Yes, N – No, Standard Met	D – Discuss	sed, n/a	 Not Applicable
			Y/N			, /Timeframe if needed
Basic Health and Sat	fety Training Com	pleted?	Y			
Home is free of health and s	afety hazards:		Standard Met Y/N	Commen Correctiv		/Timeframe if needed
Is in good repair			Y			
Is free of insect or roo			Y			
Is well-lit and well-ver			V			
Has hot and cold run Has a working inside			Y		-	
the a trenting molde			Y			
			Y Y			
	ng, lighting and he		Y Y Y			
 Has a working refrige 	ng, lighting and he afe heating system		Y Y Y Y			
Has a working refrige Has a working telephy	ng, lighting and he afe heating system rator and stove		Y Y Y Y Y			
Has a working telepho	ng, lighting and he afe heating system rator and stove one		Y Y Y Y Y Y		Note: (Cell or Home Phone
Has a working telephoHas operational smoke	ng, lighting and he afe heating system rator and stove one se detector(s)		Y Y Y Y Y Y Y		Note: (Cell or Home Phone
 Has a working teleph Has operational smok 	ng, lighting and he afe heating system rator and stove one ke detector(s) es ngs on any electric		Y Y Y Y Y Y		Note: (Cell or Home Phone
 Has a working telephi Has operational smok Has first aid kit/suppli Has protective covering 	ng, lighting and he afe heating system rator and stove one ke detector(s) es ngs on any electric	cal outlet that is	Y Y Y Y Y Y Y Standard Met	Comments	Notes	
 Has a working telephone Has operational smoke Has first aid kit/suppli Has protective covering accessible to children Harmful items are stored approximation 	ng, lighting and he afe heating system rator and stove one ce detector(s) es ngs on any electric propriately and a	cal outlet that is	Y Y Y Y Y Y Y Y	Comments	Notes	Cell or Home Phone
 Has a working telepho Has operational smok Has first aid kit/suppli Has protective covering accessible to children Harmful items are stored approhibren: 	ng, lighting and he afe heating system rator and stove one ke detector(s) es ngs on any electric propriately and a s	cal outlet that is	Y Y Y Y Y Y Y Standard Met Y/N	Corrective	/Notes Action /	Timeframe if needed
 Has a working telepho Has operational smok Has first aid kit/suppli Has protective covering accessible to children Harmful items are stored approximation items Sharp or pointed item 	ng, lighting and he afe heating system rator and stove one ke detector(s) es ngs on any electric propriately and an s	cal outlet that is	Y Y Y Y Y Y Y Standard Met Y/N Y	Corrective	/Notes Action /	Timeframe if needed

• Guns	Y	
Cleaning agents	Y	Moved to a higher location
Poisonous substances	Y	
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	No diaper aged children in care.
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	No diaper aged children in care.
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	Concerve Action / Intervance If needed
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
ne provider immediately reports any suspected child abuse, eglect or mistreatment by calling 911 and your <u>local</u> epartment of Social Services Child Protective Services Unit.	Y	

Emergency Ready-to-Go Pack

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also that the items are clean, organized, and usable. Comment and note below if needed.

⊠Flashlight

⊠Bottled water

SFolder or binder for EPP documents

⊠Non-perishable food

Backpack(s) or carrying case(s)

⊠Portable First Aid Kit	□Diapers N/A	⊠Consider special toys or games
⊠Thermometer	⊠Change of clothes	⊠ Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags
☐ Medications N/A	⊠Blanket(s)	Dugo
Items in the Disaster Supply Kit are clean, organ	ized, and usable (Y/N)? Yes	
Emergency Ready-to-Go Pack is available and e		ency (Y/N)? Yes
Location of Emergency Ready to go Pack: Kee Item Specification (if needed): • 4 Canned meals • 2 Bottled Waters • No medications needed • Book for children <u>To be observed for compliance on 2/29/2024-</u> • Cleaning Items moved to an higher loc • ERTG Bag Items • Shelter in Place and Evacuation proce	ept in the living room/ near the front doo Reviewed on 2/29/2024 : cation	
Emergency Documents		
⊠Informal Provider Emergency Prepared	ness Plan (this completed form)	
⊠Authorization for emergency medical ca	are	
Planning and Maintenance		
Person responsible for updating the Disaster Su	pply Kit and the Emergency Documents	s regularly:
First Name Robin	Last Name Berkley	
Description of how the Emergency Ready-to-Go	Pack will be transported to an evacuat	ion location:
Shelter In Place Procedures:		
The Provider will gather the children, whom are the basement(2 doors 2 small windows). The Pr basement.		ider, grab the bag from the front door and go into and the children are safe and settled in the
Evacuation Procedures:		
The Provider will gether the children whem are	tunically in the same appear as the provi	ider, areh the has from the front door and loove
The Provider will gather the children, whom are out of the front door. The provider will secure the		ider, grab the bag from the from door and leave
window). The Provider will contact the Parent ar	. The Provider and children will not the prior to lea	(2 doors 1 large Bay aving the care location.
The Provider will gather the children, whom are		
out of the front door. The provider will secure the . T Provider will contact the Parent and the children	he Provider and children will	(2 doors 3 windows). The
<u>Care Hours:</u>		
Signatures & Date		
Acknowledgement: By signing below the parties ac been discussed. The parties also acknowledge that pop up visit which will be conducted virtually or in-	t, if approved, the home in which care is p	
PROVIDER		INSPECTOR
Printed Name: Rabin Berktey	Printed Name:	
Signature:	Signature:	

MSDE OCC In

0-03-26

Data 20 La la			
	Date: 2/29/2024	Phone: 1-877-227-0125	
		1 10110. 1 011 221 0120	

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Man Virtual Inspection In-person Inspection	ryland State Department of E Care Child Care Scholars INFORMAL INSPECTION CH	hip Program CARE	Child Return to: ccs.informalproviders@maryland.gov
Inspection Date: 02/27/2025	Time In: 3:30pm	Time Out: 4:14pr	n Result: Passed
Informal Care			
Type of Care (check one):	Ion-relative Informal Provider	Caro MPelative	Informal Provider Care
Provider Information			Provider ID: 541070
First Name: Robin Provider ID #:	Last Name: Berkley		Email:
Care Location Inspected			
Street Address:	<u>City:</u>	County:	State: Zip Code:
Address Verified?: Yes Name of Children in Care (add page	es if needed) Scholarship	Date of Birth	Age / Present (Y/N)
	ss (i Hebueu) ochoidi ship		n <mark>a ser a la constante de la constante de</mark>
		7/12/2017	7 years old/ N
		5/29/2014	10 years old/ N
Safety of the Home			
	mine compliance with each star	idard. Note any comm	ents or corrective actions needed.
Additional pages may be used		Y - Yes, N - No,	D – Discussed, n/a – Not Applicable
Health and Salety Training:		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe If needed
Basic Health and Safety Tra	aining Completed?	Y	
Home is free of health and safety I		Standard Met	Comments/Notes
		Y/N Y	Corrective Action /Timeframe II needed
Is in good repair			
Is free of insect or rodent in		Y	
Is well-lit and well-ventilated		Y Y	
Has hot and cold running w	ater		
Has a working inside toilet	- 41	Y	
Has utilities for cooking, light		Y Y	
Has a working and safe hea		Y	
Has a working refrigerator a	and stove	Y	
Has a working telephone			
Has operational smoke determined	ector(s)	Y	
Has first aid kit/supplies		Ŷ	
 Has protective coverings or accessible to children 	any electrical outlet that is	Y	
Harmful items are stored appropri children;	ately and away from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 Sharp or pointed items 	an marin an an an that an tha tha an	Y	ne ne na ser en
Medications of any kind		Y	
Matches, lighters and flamn	nable products	Y	
Alcoholic beverages	· · · · · ·	Y	
Guns		Y	
Cleaning agents		Y	
Poisonous substances		Y	
GENERAL CLEANLINESS STAND	ARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean	. includino diaperino area.	Y	na na na kana ana kana kana na kana kan

Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Ŷ	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit		
Directions: Review and determine t contains enough supplies for each of	hat each item is adequately included in the Disaster shild in care. Also that the items are clean, organized	Supply Kit. Be certain that the Disaster Supply Kit I, and usable. Comment and note below if needed.
⊠ Flashlight	⊠Bottled water	Sector or binder for EPP documents
⊠Batteries	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
⊠ Portable First Aid Kit	□Diapers-N/A	⊠Consider special toys or games
⊠Thermometer	⊠Change of clothes	⊠ Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags
□Medications-N/A	⊠ Blanket(s)	

MSDE OCC Informal Care Inspection Checklist 2020-03-26

Items in the Disaster Supply Kit are clean, organiz	zed, and usable (Y/N)? Yes	
Emergency Ready-to-Go Pack is available and ea	asily accessible in the event of an emergency	(Y/N)? Yes
Location of Emergency Ready to go Pack: Liv	ing Room	
Emergency Documents		
⊠Informal Provider Emergency Prepared	ness Plan (this completed form)	
⊠Authorization for emergency medical ca	Ire	
Planning and Maintenance		
Person responsible for updating the Disaster Su	pply Kit and the Emergency Documents reg	ularly:
First Name Robin	Last Name Berkley	
Description of how the Emergency Ready-to-Go	Pack will be transported to an evacuation lo	ocation:
Sheiter in Place Procedures:		
The Provider will gather the ready to go bag and provider will <u>call/text</u> parent before, during and a Evacuation Procedures:		<mark>1 doors, ≎ window(s))</mark> . The
	dute as her, ensuring both shildren in th	athelte. The provider will
The Provider will gather the children and the rea		w(s)). The provider will <u>call/text</u> parent
before, during and after sheltering.		
The Provider will gather the children and the rea	dy to go bag, securing both children in se	atbelts. The provider will
parent before, during and after sheltering.	<u>1 0001</u>	s, 0 window(s)). The provider will call/text
CARE HOURS		
Signatures & Date		
Acknowledgement: By signing below the parties act been discussed. The parties also acknowledge that pop up visit which will be conducted virtually or in-p	, if approved, the home in which care is provid	ved, and any corrections if needed have led is subject to random, unannounced
PROVIDER		INSPECTOR
	Printed Name:	
Kobin Berkley		
Signatur	Signature:	
Date: 2/27/25 Phone	Date: 2/27/2025	Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection	Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST				Return to: ccs.informalproviders@maryland.gov
Inspection Date: 12/05/2024	Tim	ie In: 1:30 pm	Time Out: 2:46 p	m Res	sult: Follow up Needed
Inspection Date: 12/10/2024		ne In: 3:00 pm			sult: Follow up Needed
Informal Care			Real face in the		The state of the s
Type of Care (check one):	□ Non-relative In	formal Provider C	are ⊠Relative	Informal F	Provider Care
Provider Information					
First Name: Cheryl Provider ID #:	Las	t Name: Birdow		Pro	vider ID: 357957
Care Location Inspected					
<u>Street Address</u> <u>Address Verified?</u> : Yes	<u>City</u> :	County	State	<u>)</u> :	Zip Code:
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
	, ,		2/28/2012	12 year	
			2/28/2012	12 year	
			9/15/2016	8 years	
Health and Safety Training:	be used for comments		Standard Met Y/N	Comme	ssed, n/a – Not Applicable nts/Notes ive Action /Timeframe if needed
	afety Training Comple	tod2	Y	Correct	ive Action / I imetrame if needed
Home is free of health and	54 T L L L L L L L L L L L L L L L L L L		Standard Met Y/N		nts/Notes ive Action /Timeframe if needed
Is in good repair			Y		
 Is free of insect or ro 	odent infestation		Y		
 Is well-lit and well-vell 	entilated		Y		
 Has hot and cold rule 	nning water		Y		
 Has a working inside 	e toilet		Y		
Has utilities for cook	ing, lighting and heat	ing	Y		
 Has a working and s 	* .		Y		
 Has a working refrig 			Y		
Has a working telep			Y		
Has operational smo	· · ·		Y		
 Has first aid kit/supp Has protective cove accessible to childred 	rings on any electrica	l outlet that is	Y Y		
Harmful items are stored ap		ay from	Standard Met Y/N	Commen	ts/Notes ve Action /Timeframe if needed
Sharp or pointed iter	ms		Y		
Medications of any I			Y		
 Matches, lighters and 	d flammable products	3	Y		
Alcoholic beverages	· · · · · · · · · · · · · · · · · · ·		Y		
Guns			Y		
 Cleaning agents 			Y		
D · · · ·			1 14		

Poisonous substances

GENERAL CLEANLINESS STANDARDS

٠

Y

Standard Met Y/N Comments/Notes Corrective Action /Timeframe if needed

All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> <u>Department of Social Services Child Protective Services</u> <u>Unit</u> .	Y	

Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack (including needed medications) and		t of an emergency. This contains a Disaster Supply Kit
Disaster Supply Kit		
Directions: Review and determine to contains enough supplies for each c	nat each item is adequately included in the Disaster hild in care. Also that the items are clean, organized	Supply Kit. Be certain that the Disaster Supply Kit I, and usable. Comment and note below if needed.
⊠Flashlight	Bottled water	Section 2012 Folder or binder for EPP documents
⊠Batteries	⊠Non-perishable food	Backpack(s) or carrying case(s)
Portable First Aid Kit	□Diapers- N/A	⊠Consider special toys or games
⊠Thermometer	⊠ Change of clothes	☑ Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags

Medications-N/A	⊠Blanket(s)
Items in the Disaster Supply Kit are c	lean, organized, and usable (Y/N)? Yes
Emergency Ready-to-Go Pack is ava	ilable and easily accessible in the event of an emergency (Y/N)? Yes
Location of Emergency Ready to g	o Pack: In the living room
Item Specification (if needed):	
Thermometer <u>To be observed for compliance on</u>	12/10/2024 •
Secure Garage	12/10/2024 :
a_	
Emergency Documents	
⊠Informal Provider Emergenc	y Preparedness Plan (this completed form)
⊠Authorization for emergency	medical care
Planning and Maintenance	
Person responsible for updating the D	Disaster Supply Kit and the Emergency Documents regularly:
First Name	Last Name
Cheryl	Birdow
Shelter in Place Procedures:	eady-to-Go Pack will be transported to an evacuation location:
Shelter in Place Procedures.	
The Provider will gather the ready to call/text the parent before, during a	
Cantext the parent before, during a	nu alter shellening.
Evacuation Procedures:	
The Provider will gather the children a	and the ready to go bag, securing all of the children in seat belts. The provider will
	(1 doors, 2 window(s)). The provider will
call/text the parent before, during a	nd after sheltering.
The Provider will gather the children a	and the ready to go bag, securing all of the children in seat belts. The provider will
will call/text the parent before, durin	(1 doors, 2 window(s)). The provider
CARE HOURS:	
Signatures & Date	
Acknowledgement: By signing below the	e parties acknowledge that all standards have been reviewed, and any corrections if needed have
been discussed. The parties also ackno	wledge that, if approved, the home in which care is provided is subject to random, unannounced

pop up visit which will be conducted virtually or in-person.	
PROVIDER	INSPECTOR
Printed Name: Chery/ Lee Birdow	Printed Name:
Signature:	Signature:
Date: / 8/10/24 Phone	Date: 12/10/2024 Phone: 1-877-227-0125

⊠Virtual Inspection ⊡In-person Inspection					Return ccs.inf		oviders@maryland.gov
Inspection Date: 2/15/2024	Date: 2/15/2024 Time In: 9:08am			: 10:01am Result: Passed			
Informal Care		30 - E ¹¹	P				
Type of Care (check one):	Non-relative	Informal Provider Ca	are ⊠Relative	Informal F	Provider	Саге	
Provider Information							
First Name: Cheryl Provider ID #:	La	est Name: Birdow		Pro		: 357957	
Care Location Inspected							
Street Address: Address Verified?: Yes		City	Coun	ty	State		Zip Code
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	1	Prese	nt (Y/N)
			2/28/2012	11	/N		
			2/28/2012	11	/N		
,			9/15/2016	7	/N		
					1		
					1		
r.				1	1		
Health and Safety Training:			Standard Met				
Basic Health and Safety Training Completed?			Y/N		nts/Note		frame if needed
Dasic Health and Sa	afety Training Comp	leted?		Correct	ive Actic	on /Timel	frame if needed
Home is free of health and		leted?	Y/N Y Standard Met Y/N	Correct	ive Actio	on /Timel	frame if needed frame if needed
fome is free of health and Is in good repair	safety hazards:	leted?	Y/N Y Standard Met Y/N Y	Correct	ive Actio	on /Timel	
fome is free of health and Is in good repair Is free of insect or re	safety hazards:	leted?	Y/N Y Standard Met Y/N Y Y	Correct	ive Actio	on /Timel	
 fome is free of health and Is in good repair Is free of insect or ro Is well-lit and well-vell 	safety hazards: odent infestation entilated	leted?	Y/N Y Standard Met Y/N Y Y Y	Correct	ive Actio	on /Timel	
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold ru	safety hazards: odent infestation entilated nning water	leted?	Y/N Y Standard Met Y/N Y Y Y Y	Correct	ive Actio	on /Timel	
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold ru Has a working inside	safety hazards: odent infestation entilated nning water a toilet		Y/N Y Standard Met Y/N Y Y Y Y Y Y	Correct	ive Actio	on /Timel	
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold ru Has a working inside Has utilities for cook	safety hazards: odent infestation entilated nning water e toilet ing, lighting and hea		Y/N Y Standard Met Y/N Y Y Y Y Y Y	Correct	ive Actio	on /Timel	
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold ru Has a working inside Has utilities for cook Has a working and s	safety hazards: odent infestation entilated nning water e toilet ing, lighting and hea safe heating system		Y/N Y Standard Met Y/N Y Y Y Y Y Y Y	Correct	ive Actio	on /Timel	
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold ru Has a working inside Has a working and s Has a working and s	safety hazards: odent infestation entilated nning water e toilet ing, lighting and hea safe heating system erator and stove		Y/N Y Standard Met Y/N Y Y Y Y Y Y	Correct	ive Actio	on /Timel	
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-vo Has hot and cold ru Has a working inside Has utilities for cook Has a working and s Has a working refrig Has a working telep	safety hazards: odent infestation entilated nning water e toilet ing, lighting and hea safe heating system erator and stove hone		Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y	Correct	ive Actio	on /Timel	
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold ru Has a working inside Has a working and s Has a working refrig Has a working telep	safety hazards: odent infestation entilated nning water e toilet ing, lighting and hea safe heating system erator and stove hone oke detector(s)		Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y	Correct	ive Actio	on /Timel	
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold ru Has a working inside Has a working and s Has a working refrig Has a working telep Has operational smo	safety hazards: odent infestation entilated nning water e toilet ing, lighting and hea safe heating system erator and stove hone oke detector(s) ilies rings on any electric	ating	Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y	Correct	ive Actic	on /Timet	
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold ru Has a working inside Has a working and s Has a working and s Has a working refrig Has a working telep Has operational smo Has first aid kit/supp Has protective cove accessible to childre Harmful items are stored ap	safety hazards: odent infestation entilated nning water e toilet ting, lighting and hea safe heating system erator and stove hone oke detector(s) lies rings on any electric en	ating al outlet that is	Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y	Correct Comme Correct All outle Comme	ive Actic ive Actic ive Actic	on /Timel	
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold ru Has a working inside Has a working and s Has a working and s Has a working refrig Has a working telep Has operational smo Has first aid kit/supp Has protective cove accessible to childre	safety hazards: odent infestation entilated nning water e toilet ing, lighting and hea safe heating system erator and stove hone bke detector(s) blies rings on any electric opropriately and av	ating al outlet that is	Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Standard Met	Correct Comme Correct All outle Comme	ive Actic ive Actic ive Actic	on /Timel	frame if needed
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-vo Has hot and cold ru Has a working inside Has a working and s Has a working and s Has a working refrig Has a working telep Has operational smo Has first aid kit/supp Has protective cove accessible to childres Harmful items are stored and children: Sharp or pointed item	safety hazards: odent infestation entilated nning water e toilet ing, lighting and hea safe heating system erator and stove hone bke detector(s) lies rings on any electric en propriately and av ms kind	ating al outlet that is vay from	Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Standard Met Y/N Y	Correct Comme Correct All outle Comme	ive Action	use.	frame if needed
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-vo Has hot and cold run Has a working inside Has a working inside Has a working and s Has a working refrig Has a working refrig Has operational smo Has protective cove accessible to children Harmful items are stored and children: Sharp or pointed item Medications of any F	safety hazards: odent infestation entilated nning water e toilet ing, lighting and hea safe heating system erator and stove hone oke detector(s) ilies rings on any electric opropriately and av ms kind d flammable produce	ating al outlet that is vay from	Y/N Y Standard Met Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y	Correct Correct	ive Action	use.	frame if needed
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-vo Has hot and cold ru Has a working inside Has a working and s Has a working and s Has a working refrig Has a working telep Has operational smo Has first aid kit/supp Has protective cove accessible to childres Harmful items are stored and children: Sharp or pointed item	safety hazards: odent infestation entilated nning water e toilet ing, lighting and hea safe heating system erator and stove hone oke detector(s) ilies rings on any electric opropriately and av ms kind d flammable produce	ating al outlet that is vay from	Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Standard Met Y/N Y	Correct Correct	ive Action	use.	frame if needed

Pointy I = #----

Cleaning agents	Y	,
Poisonous substances	Y	
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe If needed
All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment 	Y	
 Tying child to a cot or other equipment 		

Emergency Ready-to-Go Pac	:k	
The Emergency Ready-to-Go Pa (including needed medications)	ack must be available and easily accessible in the event and Emergency Documents.	of an emergency. This contains a Disaster Supply Kit
Disaster Supply Kit		
	ne that each item is adequately included in the Disaster ch child in care. Also that the items are clean, organized	
⊠ Flashlight	⊠Bottled water	Solder or binder for EPP documents
⊠Batteries	⊠Non-perishable food	Backpack(s) or carrying case(s)

I

	bogs to 1	44453	
Portable First Aid Kil	⊠Diapers		⊠Consider spec a toys or games
⊠Thermometer	⊠Change of clo	thes	☑ Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags
Medications	⊠Blanket(s)		
Items in the Disaster Supply Kit are clear	, organized, and usable (Y/N)? ×	
Emergency Ready-to-Gc Pack is availabl	e and easily accessible in the	event of an emergency (V	/N/?Y
 Location of Emergency Ready to go P: 	ack: Kept near front door		
Item Specification (if needed):			
 3 blankets 			
3 outfits			
 No diapers Ball, flash card 			
No medication			
 4 bottles of water 			
 3 chef boyardi- chicken and rice 	e. Beefaroni and spaghetti		
 Roll of Garbage bags 			
To be abased for a second to a			
To be observed for compliance on _:			
-			
Emergency Documents			
⊠Informal Provider Emergency Pr	eparedness Plan (this comp	eted form)	
⊠Authorization for emergency me		,	
Planning and Maintenance			
Person responsible for updating the Disa: First Name Cheryl	ster Supply Kit and the Eme Last Name Birdow		arly:
Description of how the Emergency Ready	/-to-Go Pack will be transpo	rted to an evacuation loca	ation:Carried.
Shelter in Place Procedures:			
The Provider will gather the children. The room(1window 1 door) and shut the door.			
Evacuation Procedures:			
The Provider will gather the children. The children would be secured in the seat belichildren be on the phone with the parent providing	ts and the Provider would d Once there they will	rive	o the other and go to the vehicle. The She would have the door 1 large window). The provider would
The Provider will gather the children. The children would be secured in the seat held leaving. Once there they will providing updates.	provider will grab one bag ts and the Provider would d	rive to	the other and go to the vehicle. The She would prior to uld be on the phone with the parent
Blue dunce & Deda			
Signatures & Date	tion polynouladae that all -t-	adarda have heer review	
Acknowledgement: By signing below the pa been discussed. The parties also acknowled pop up visit which will be conducted virtually	ige that, if approved, the horr	ie in which care is provided	a, and any corrections it needed have is subject to random, unannounced
PROVIDER	at second and		INSPECTOR
Printed Name: Chery/ Lep	KING ST) Prinks Hame	
Signature:		Signature:	

1. See 1. An 1997 - 1997 - 1997 - 1997



⊠Virtual Inspection □In-person Inspection	Maryland State Department of Education/Office of Child Car Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST			Child Care	Return to: ccs.informalproviders@maryland.g ov
Inspection Date: 04/13/2023	Time	e In: 3:30PM	Time Out: 4:45PM R		PASSED
Informal Care	<u> </u>			-	
Type of Care (check one):	Non-relative Inf	ormal Provider C	are Relative	Informal Pro	vider Care
Provider Information				moniari	
First Name: Cheryl Provider ID #:	Last	Last Name: Birdow		Provid Email:	er ID: <u>357957</u>
Care Location Inspected					
Street Address: Address Verified? Yes .	C	ity:	County:	Stat	e Zip Code:
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
			(02/28/2018)	11yr./Y	A LANGER IN MY
			(02/28/2012)	11yr./Y	
			(09/15/2016)	6yr. / Y	
Safety of the Home					
Directions: Review and determ bages may be used for comme Health and Safety Training:	nts.		Y - Yes, N - No, Standard Met	D – Discusse Comments	d, n/a – Not Applicable //Notes
			Y/N		Action /Timeframe if needed
asic Health and Safety Training Completed?		Y Standard Met	Relative In Comments	nformal Care – Certificate Submittee	
lome is free of health and safety hazards:		Y/N		Action /Timeframe if needed	
Is in good repair	Is in good repair		Y	All areas were clean	
 Is free of insect or ro 	dent infestation		Y	No evidence of infestation	
Is well-lit and well-ve	entilated		Y	All lights were turned on and natural winde lighting	
 Has hot and cold run 	nning water		Y	Tested by provider and steam observed or camera	
 Has a working inside 	e toilet		Y	Flushed by provider and observed	
 Has utilities for cook 	ing, lighting and heatin	ng	Y		
Has a working and s	afe heating system		Y	Thermostat tested by provider for cooling heating	
 Has a working refrig 	erator and stove		Y	Tested by provider and observed	
 Has a working telept 			Y	Outbound call made to provider's photo	
 Has operational smoother 	oke detector(s)		Y	Tested by provider and observed	
Has first aid kit/supp	Has first aid kit/supplies		Y	Medical Supplies: Band-Aids, Gauze, Alco Peroxide, Ointment moved to high level she hallway closet	
	Has protective coverings on any electrical outlet that is accessible to children		Y	All outlets were occupied or covered	
Harmful items are stored ap children:	propriately and away	y from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Sharp or pointed iter	ns		Y	Stored in high kitchen cabinet above the sto sink	
 Medications of any k 	ind	_	Y	Sto	pred in high cabinet in kitchen
	d flammable products		Y	Does not own	
 Alcoholic beverages 			Y		Does not own
• Guns		Y	Does not own		

Cleaning agents	Y	All cleaning agents stored at top shelf of kitchen and hallway closet
Poisonous substances	Y	Does not own
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	No diaper age children in care
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	No diaper age children in care
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	

Emergency Ready-to-Go Pack

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also the items are clean, organized, and usable. Comment and note below if needed.

⊠ Flashlight

Batteries for Flashlight

Portable First Aid Kit

⊠Bottled water ⊠Non-perishable food ⊠Diapers (N/A) ☑ Folder or binder for EPP documents
 ☑ Backpack(s) or carrying case(s)

Consider special toys or games

⊠Thermometer	⊠Change of clothes	⊠ Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
⊠Medications (N/A)	⊠Blanket(s)	
Items in the Disaster Supply Kit are clean	, organized, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is available	e and easily accessible in the event of an e	emergency (Y/N)? Y
Item Specification (if needed): - <u>1 flashlight, 3 extra D batteries, ro</u>	3 canned foods, 6 bottled waters, 1pk of	er <u>case), 3 blankets, 1 thermometer, balls/card games, 1</u> of wipes, folder w/ EPP and ECMA per child, no spec
Items to be reviewed on xx/xx/xxxx: N/	A	
Emergency Documents		
SInformal Provider Emergency Pr	reparedness Plan (this completed form)	
Authorization for emergency me	dical care	
Planning and Maintenance		
Person responsible for updating the Disa		uments regularly:
First Name Cheryl	Last Name Birdow	
	y-to-Go Pack will be transported to an ev	vacuation location: carried by the provider.
door. She would then call the parent again Evacuation Location(s) Procedures: Primary: The provider will account for the either walk there or drive. If they drive the seat belts. Upon arrival, the provider will a room (1 door 1 window) and stay there up Alternate: If they could not access the p The provider will call the	s). If the need should arise the provider win once the emergency has ended. e children and ERTG call the parent, and a provider will secure the youngest child i call the parent is safe to leave. Provider will call the parent and inform the merger the parent and inform them of the emerger	would use the sealing plastic and tape to secure the d head to the sealing plastic provider and children will in their booster seat and the older children in their car on the way. Provider and children will shelter in the living the parent once the emergency has ended.
Signatures & Date		
Acknowledgement: By signing below the p been discussed. The parties also acknow pop up visit which will be conducted virtual	ledge that, if approved, the home in which	ave been reviewed, and any corrections if needed have th care is provided is subject to random, unannounced
PROVIDER		INSPECTOR
Printed Name: Cherril L Bi	rdow Printed Nar	me:
Signature:	Signature:	
Date: 4/18/23 Phone	Date: 04/13	3/2023 Phone: 1-877-227-0125

ØVirtual Inspection □In-person Inspection	Maryland S	Child	partment of Ed d Care Scholar INFORMAL SPECTION CI	Child Care	Return to: ccs.informalproviders@maryland.g ov	
Inspection Date: 04/13/20	n Date: 04/13/2022 Time In: 1:50PM			Time Out: 2:51PM Resul 04/13		t: PASSED if returned by 5:00PM on /2022
Informal Care	1		ST. SP. LAN	Castlere Conta		Constant States
Type of Care (check one):	□ Non-rela	ative Info	rmal Provider C	are ØRelative	Informal Pro	vider Care
Provider Information						and the second
First Name: Cheryl Last Name: Birdow			Name: Birdow	Provider ID: 357957 Email:		
Care Location Inspected	1	12				
Street Address: Address Verified? Yes		City		county State	Z	ip Code
Name of Children in Car	e (add pages if nee	ded)	Scholarship	Date of Birth	Age	/ Present (Y/N)
	1 1 0			02/28/2012	10 / Ye	
			-			
			-	02/28/2012	10 / Ye	
	trans and		1	09/15/2016	5 / Ye	5
		_				
		_				
	the second s					the second second second second
Safety of the Home						
	Care Contra	1		<u> </u>		
Safety of the Home Directions: Review and detu pages may be used for com	ermine compliance	with eac	h standard. Note			
	nments.	with eac	h standard. Note		D – Discusse Comments	d, n/a – Not Applicable
Directions: Review and dete pages may be used for com	nments. ng:		h standard. Note	Y – Yes, N – No, Standard Met	D – Discusse Comments	d, n/a – Not Applicable s/Notes
Directions: Review and dete pages may be used for com Health and Safety Trainin	nments. ng: raining Completed	1?	h standard. Note	Y – Yes, N – No, Standard Met Y/N	D – Discusse Comments Corrective Comments	ed, n/a – Not Applicable s/Notes Action /Timeframe if needed
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T	nments. ng: raining Completed	1?	h standard. Note	Y – Yes, N – No, Standard Met Y/N N/A Standard Met	D – Discusse Comments Corrective Comments	ed, n/a – Not Applicable s/Notes Action /Timeframe if needed
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar • Is in good repair	nments. ng: raining Completed	1?	h standard. Note	Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N	D – Discusse Comments Corrective Comments	ed, n/a – Not Applicable s/Notes Action /Timeframe if needed
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar • Is in good repair	nments. ng: raining Completed nd safety hazards or rodent infestation	1?	h standard. Note	Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N Y	D – Discusse Comments Corrective Comments	ed, n/a – Not Applicable s/Notes Action /Timeframe if needed
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o	nments. ng: raining Completed nd safety hazards or rodent infestation I-ventilated	1?	h standard. Note	Y – Yes, N – No, Standard Met Y/N N/A Standard Met Y/N Y Y	D – Discusse Comments Corrective Comments	ed, n/a – Not Applicable s/Notes Action /Timeframe if needed s/Notes Action /Timeframe if needed
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and wel Has hot and cold Has a working ins	nments. ng: raining Completed nd safety hazards or rodent infestation I-ventilated running water side toilet	1? 3: n		Y - Yes, N - No, Standard Met Y/N N/A Standard Met Y/N Y Y Y	D - Discusse Comments Corrective Comments Corrective	ed, n/a – Not Applicable s/Notes Action /Timeframe if needed s/Notes Action /Timeframe if needed
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and wel Has hot and cold Has a working ins Has utilities for co	ments. ng: raining Completed nd safety hazards or rodent infestation I-ventilated running water side toilet poking, lighting and	l? s: n d heating		Y - Yes, N - No, Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y	D - Discusse Comments Corrective Comments Corrective Steam Obs	erved
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and wel Has hot and cold Has a working ins Has utilities for co Has a working an	ng: raining Completed nd safety hazards or rodent infestation I-ventilated running water side toilet poking, lighting and nd safe heating sys	I? s: n d heating stem		Y - Yes, N - No, Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y	D - Discusse Comments Corrective Corrective Steam Obs Flush Obse Burners op Observed	erved erved erved erved
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and wel Has hot and cold Has a working ins Has utilities for co Has a working an Has a working ref	ments. ng: raining Completed nd safety hazards or rodent infestation I-ventilated running water side toilet ooking, lighting and ad safe heating sys frigerator and stov	I? s: n d heating stem		Y - Yes, N - No, I Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y	D - Discusse Comments Corrective Corrective Steam Obs Flush Obse Burners op	erved erved erved erved
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Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and wel Has hot and cold Has a working ins Has utilities for co Has a working an Has a working ref Has a working ref Has a working tel Has operational s	aments. ng: raining Completed nd safety hazards or rodent infestation I-ventilated running water side toilet ooking, lighting and nd safe heating sys frigerator and stov lephone smoke detector(s)	l? s: d heating stem e		Y - Yes, N - No, I Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y	D - Discusse Comments Corrective Corrective Steam Obs Flush Obse Burners op Observed Light turner	ed, n/a – Not Applicable s/Notes Action /Timeframe if needed s/Notes Action /Timeframe if needed erved erved erational d on red
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and wel Has hot and cold Has a working ins Has utilities for co Has a working an Has a working ref Has a working ref Has a working tel Has operational s Has first aid kit/su	ments. ng: raining Completed nd safety hazards or rodent infestation I-ventilated running water side toilet poking, lighting and a safe heating sys frigerator and stov lephone smoke detector(s) upplies	l? s: d heating stem e	9	Y - Yes, N - No, I Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y Y	D - Discusse Comments Corrective Corrective Steam Obs Flush Obse Burners op Observed Light turner Call observ	ed, n/a – Not Applicable s/Notes Action /Timeframe if needed s/Notes Action /Timeframe if needed erved erved erational d on red
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and wel Has hot and cold Has a working ins Has utilities for co Has a working an Has a working ref Has a working ref Has a working tel Has operational s Has first aid kit/su	ments. ng: raining Completed nd safety hazards or rodent infestation I-ventilated running water side toilet booking, lighting and ad safe heating syst frigerator and stov lephone smoke detector(s) upplies overings on any ele	l? s: d heating stem e	9	Y - Yes, N - No, I Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y	D - Discusse Comments Corrective Corrective Steam Obs Flush Obset Burners op Observed Light turned Call observ	ed, n/a – Not Applicable s/Notes Action /Timeframe if needed s/Notes Action /Timeframe if needed erved erved erational d on red
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Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and well Has hot and cold Has a working ins Has utilities for co Has a working an Has a working ref Has a working ref Has a working tel Has protective co	ments. ng: raining Completed nd safety hazards or rodent infestation I-ventilated running water side toilet boking, lighting and nd safe heating sys frigerator and stov lephone smoke detector(s) upplies overings on any ele- dren	I? a: n d heating stem e ectrical o	9 putlet that is	Y - Yes, N - No, I Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	D - Discusse Corrective Corrective Corrective Steam Obs Flush Obset Burners op Observed Light turned Call observ Alarm soun Covered if fu	ed, n/a - Not Applicable s/Notes Action /Timeframe if needed s/Notes Action /Timeframe if needed erved erved erved erational d on red ided not in use or behind furniture Notes
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and wel Has hot and cold Has a working ins Has utilities for co Has a working ref Has a working ref Has a working ref Has a working tel Has operational s Has first aid kit/su Has protective co accessible to chill	iraining Completed iraining Completed ind safety hazards or rodent infestation I-ventilated running water side toilet poking, lighting and id safe heating sys frigerator and stov lephone smoke detector(s) upplies poverings on any ele dren	I? a: n d heating stem e ectrical o	9 putlet that is	Y - Yes, N - No, I Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	D - Discusse Corrective Corrective Corrective Steam Obs Flush Obset Burners op Observed Light turned Call observ Alarm soun Covered if fu	ed, n/a – Not Applicable s/Notes Action /Timeframe if needed s/Notes Action /Timeframe if needed erved erved erational d on red id on in use or behind furniture Notes Action /Timeframe if needed ren cannot reach
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and well Has hot and cold Has a working ins Has utilities for co Has a working an Has a working ref Has a working ref Has a working ref Has a working tel Has operational s Has first aid kit/su Has protective co accessible to child Harmful items are stored children: Sharp or pointed Medications of ar	iraining Completed iraining Completed ind safety hazards or rodent infestation I-ventilated running water side toilet poking, lighting and id safe heating sys frigerator and stov lephone smoke detector(s) upplies poverings on any ele dren	I? a: a d heating stem e ectrical o ad away	9 putlet that is	Y - Yes, N - No, I Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	D - Discusse Corrective Corrective Corrective Steam Obs Flush Obse Burners op Observed Light turner Call observ Alarm soun Covered if Corrective Where childr	ed, n/a – Not Applicable s/Notes Action /Timeframe if needed s/Notes Action /Timeframe if needed erved erved erved erational d on red id on red id ed Notes Action /Timeframe if needed ren cannot reach in Kitchen
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and wel Has hot and cold Has a working ins Has utilities for co Has a working an Has a working ref Has a working ref Has a working ref Has a working tel Has operational s Has first aid kit/su Has protective co accessible to chill Harmful items are stored children: Sharp or pointed Medications of ar	aments. ng: raining Completed nd safety hazards or rodent infestation I-ventilated running water side toilet ooking, lighting and d safe heating sys frigerator and stov lephone smoke detector(s) upplies overings on any ele dren I appropriately ar items hy kind and flammable pr	I? a: a d heating stem e ectrical o ad away	9 putlet that is	Y - Yes, N - No, I Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	D - Discusse Corrective Corrective Corrective Steam Obs Flush Obset Burners op Observed Light turned Call observ Alarm soun Covered if Corrective Mhere childr	ad, n/a - Not Applicable s/Notes Action /Timeframe if needed s/Notes Action /Timeframe if needed erved erved erved erved arved erational d on red id on red in use or behind furniture Notes Action /Timeframe if needed ren cannot reach in Kitchen
Directions: Review and deter pages may be used for com Health and Safety Trainin Basic Health and Safety T Home is free of health ar Is in good repair Is free of insect o Is well-lit and well Has hot and cold Has a working ins Has utilities for co Has a working ref Has protective co accessible to child Harmful items are stored children: Sharp or pointed Medications of ar Matches, lighters	aments. ng: raining Completed nd safety hazards or rodent infestation I-ventilated running water side toilet ooking, lighting and d safe heating sys frigerator and stov lephone smoke detector(s) upplies overings on any ele dren I appropriately ar items hy kind and flammable pr	I? a: a d heating stem e ectrical o ad away	g putlet that is from	Y - Yes, N - No, I Standard Met Y/N N/A Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	D - Discusse Corrective Corrective Corrective Steam Obs Flush Obse Burners op Observed Light turned Call observ Alarm soun Covered if i Corrective Mhere childr High cabinet Matched up	ad, n/a – Not Applicable s/Notes Action /Timeframe if needed s/Notes Action /Timeframe if needed erved erved erved erved arved erational d on red id on red in use or behind furniture Notes Action /Timeframe if needed ren cannot reach in Kitchen

Revised 10/2021

Poisonous substances	Y	Other than medications and cleaning solutions
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> <u>Department of Social Services Child Protective Services Unit</u> .	Y	
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily accessible in needed medications) and Emergency Documents.	n the event of an em	ergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit		
	A S A S A S A S A S A S A S A S A S A S	

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also the items are clean, organized, and usable. Comment and note below if needed.

⊠ Flashlight
Batteries for Flashlight
Portable First Aid Kit

⊠Bottled water ⊠Non-perishable food ⊠Diapers N/A Solder or binder for EPP documents Backpack(s) or carrying case(s)

Consider special toys or games

Thermometer	Change of clothes	Meavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
Medications N/A	⊠Blanket(s)	
Items in the Disaster Supply Kit are clean,	organized, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is available	and easily accessible in the event of an emerge	ncy (Y/N)? Y
Location of The Emergency Ready to go	Pack: Living room by the front door	
Item Specification (if needed):		
2 D Batteries Bandalds, Tape Gauze, wipes, wipes 6 Shirts, 3 pants, 4 pairs of pants, 3 blanke 4 water bottles, 6 cans Chef Boyardee Card games, balls,	ats	
Items to review on xx/xx/xxxx if needed:	_ N/A	
Emergency Documents		
	paredness Plan (this completed form)	
Authorization for emergency medi		
Planning and Maintenance		
Person responsible for updating the Disast First Name	er Supply Kit and the Emergency Documents	regularly:
Description of how the Emergency Ready-	to-Go Pack will be transported to an evacuation	on location: Carried.
Shelter in Place Procedure:		
The provider will grab the children and error call the parent when once secure.	ergency go back and walk back to the large wa	alk in closet in the master bedroom. Provider will
Evacuation Procedures:		
The provider will gather the children and gr	all parents right away to let parent know before over to the alternate evacu	house which is the primary emergency e and after the emergency. If they cannot go to pation location, which is down the street from
Signatures & Date		
Acknowledgement: By signing below the pa been discussed. The parties also acknowled pop up visit which will be conducted virtually	dge that, if approved, the homa in which care is	n reviawed, and any corrections if needed have s provided is subject to random, unannounced
PROVIDER		INSPECTOR
Printed Name: Chery 1 6	Birdow Printed Nama:	
Signature:	Signature:	
Date: 4/(3/ 22 Phone:	Date: 04/13/2022	Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection	Maryland S	Child (rtment of Ed Care Scholar INFORMAL PECTION C		Child Care	Return to: ccs.informalproviders@maryland. ov
Inspection Date: 03/16/2023 Time In: 1:38PM				Time Out 2:48	PM Result	PASSED
Informal Care						
Type of Care (check one):	D Non-rela	tive Inform	al Provider C	are ⊠Relativ	e Informal Pro	vider Care
Provider Information						
First Name: Leilani Provider ID #:				Provider ID: <u>502564</u> Email:		
Care Location Inspected		1			Bart Control	
Street Address: Address Verified? Yes.	С	lity:	County:	S	itate Z	Tip Code:
Name of Children in Care (add pages if need	ded)	Scholarship	Date of Birth	Age	/ Present (Y/N)
				(08/12/2010)	12yr. / N	
				(10/29/2018)	4yr. / N	
Safety of the Home						
						InnerithA habeen ee
Directions: Review and deterr pages may be used for comme		with each s	tandard. Note	Y-Yes, N-No,	D – Discusse	d, n/a – Not Applicable
Health and Safety Training	:			Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed
Basic Health and Safety Trai	ning Completed	?		Y	Relative Informal Care – Certificate Subm	
Home is free of health and	safety hazards	:		Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe If needed
 Is in good repair 				Y		All areas were clean
 Is free of insect or r 	odent infestation	۱		Y		No evidence of infestation
Is well-lit and well-ventilated			Y	All lights were turned on and lots of natural window lighting		
 Has hot and cold running water 				Y		by provider and stearn observed on camera
Has a working inside toilet			Y	Flushed b	by provider and observed, lock on the bathroom door	
 Has utilities for cool 	king, lighting and	d heating		Y		
 Has a working and safe heating system 				Y	Tested by provider and observed	
 Has a working refrigerator and stove 				Y	Tested by provider and observed	
Has a working telephone			Y	Outbound call made to provider's phone		
 Has operational smoke detector(s) 			Y	Observed and tested by provider		
Has first aid kit/supplies			Y	Firs	t aid kit stored in laundry room	
 Has protective coverings on any electrical outlet that is accessible to children 			Y	All outlets	were covered with coverings and/or occupied	
Harmful items are stored appropriately and away from children:			Standard Met Y/N	Comments/N Corrective A	lotes ction /Timeframe if needed	
 Sharp or pointed its 	ems			Y	Stored in upp	er level kitchen cabinet in knife holde
Medications of any kind			Y	Stored in cabinet in laundry room		
Matches, lighters and flammable products			Y	Does not own		
 Alcoholic beverage 				Y	Does not own	
Guns				Y		Does not own
Cleaning agents				Y	Cleaning agents stored under the bathroom & kitchen sink cabinet with lock	
 Poisonous substan 	ces			Y	St	ored outside in the garage
GENERAL CLEANLINESS STANDARDS				Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	

Revised 10/2021

All areas of the home are kept clean, including diapering area.	Y	No diaper age children in care
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	No diaper age children in care
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 Achild in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
he provider immediately reports any suspected child abuse, eglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	
mergency Ready-to-Go Pack		
he Emergency Ready-to-Go Pack must be available and easily accessible eeded medications) and Emergency Documents.	in the event of an em	ergency, This contains a Disaster Supply Kit (including
isaster Supply Kit		
irections: Review and determine that each item is adequately included in t nough supplies for each child in care. Also the items are clean, organized,	he Disaster Supply Ki and usable. Commen	it. Be certain that the Disaster Supply Kit contains t and note below if needed.
⊠ Flashlight ⊠ Bottled water		☑ Folder or binder for EPP documents
⊠Batteries for Flashlight ⊠Non-perishab	le food	Backpack(s) or carrying case(s)
ØPortable First Aid Kit ØDiapers (N/A)		Consider special toys or games
⊠Thermometer ⊠Change of clo	othes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
⊠Medications ⊠Blanket(s)		

Location of The Emergency Ready to go	Pack: Stored on the to	op shelf of laundry room	
 <u>1 flashlight, 3 extra D batteries, 1 the</u> <u>box of crackers</u> 	rmometer, no specific	medications, 12 pk of mini	waters, 6 canned foods, 5pks of tuna and mes, 1 pair of scissors, 2 rolls of duct tap
terns to be reviewed on xx/xx/xxxx: N/A	P and ECMA, 1 outfit p	per child w/ underwear	
Emergency Documents			
SInformal Provider Emergency Pres	aredness Plan (this co	ompleted form)	
Authorization for emergency medic Planning and Maintenance Pore	al care		
Person responsible			arty:
Person responsible for updating the Disaste First Name	er Supply Kit and the E	mergency Documents regul	any.
Leilani	Last Name		
Description of how the Emergency Ready-to	Biscoe	sported to an evacuation loc	ation: carried by the provider.
Shelter In Place Procedure:	0-GO Pack will be train	sponeo is a	e i deve) on first floor
The provider will account for the children in adjunct to the kitchen. The provider will use provider will call the parent once they are se Evacuation Procedures:			bedroom (2 door 2 windows) on arise. Th and windows if the need should arise. Th
Primary: The provider will call and text the evacuation location. The provider will then p The smaller child will be secured in a car se since the provider only has a permit. (1 door 1 window).	perform a head count f	for each child and gatter the	alt They will also be accompanied by
Alternate: If they could not access the prin and head into the vehicle. Smaller child will also accompany them to the location. The p head count and she and the children will go	be secured in the car provider will call	ider will call and text the part seat and older child in car se to gain access 1 door 2 windows).	ent and gather the children and ERTG bag eat belt both by the provider. will The provider will perform a
Signatures & Date			
Acknowledgement: By signing below the part been discussed. The parties also acknowled pop up visit which will be conducted virtually	ige that, if approved, the	all standards have been revi ne home in which care is pro	iewed, and any corrections if needed have vided is subject to random, unannounced
PROVIDER			INSPECTOR
Printed Name: Irilani Bisch	t.	Printed Name:	
Signature		Signature:	
Date: 03 17 2023 Phone:		Date: 03/16/2023	Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection	Maryland S	Child	artment of Edu d Care Scholars INFORMAL SPECTION CI	Child Care	Return to: ccs.informalproviders@maryland.g ov	
Inspection Date: 10/10/2023 Time In: 10:30AM Follow-up Inspection Date: 10/11/2023 Time In: 3:00PM			Time Out: 11:47AM Rest Time Out: 3:15PM Follo		tesult: Follow-up Required. ollow-up Result: PASSED	
Informal Care						
Type of Care (check one):	Non-rel	ative Info	ormal Provider C	are Relative	Informal Pro	ovider Care
Provider Information						
First Name: Tyshere Provider ID #:		Last	Name: Bland		Provid Email	der ID: <u>528498</u> :
Care Location Inspected						
Street Address: Address Verified? Yes.		City:	Coun	ty:	State	Zip Code:
Name of Children in Care	(add pages if ne	eded)	Scholarship	Date of Birth	Age	/ Present (Y/N)
	(and began in	,		(11/03/2021)	1yr. / N	
Health and Safety Training: Basic Health and Safety Training Completed?		Y/N Y		e Action /Timeframe if needed Informal Care – Certificate Submitted		
Home is free of health an	Contesting of the second	1	a hand a	Standard Met Y/N	Comment	ts/Notes e Action /Timeframe if needed
 Is in good repair 	1	19.366	1000 100 000	Y		All areas were clean
 Is free of insect or 	rodent infestation	on		Y	No evidence of infestation All lights were turned on and natural window	
 Is well-lit and well 	-ventilated	1.000	in	Y		lighting by provider and steam observed via the
 Has hot and cold 	running water			Y		kitchen faucet
 Has a working ins 				Y	F	lushed by provider and observed
 Has utilities for co 			ng	Y	Therm	nostat tested by provider for cooling &
 Has a working and 	d safe heating s	ystem		Y	heat	ting - utility bill previously submitted
 Has a working ref 	rigerator and sto	ove		Y		Tested by provider and observed
 Has a working tele 	ephone			Y	Outbound	call made by informal team to provider phone
 Has operational s 		;)		Y		Fested by provider and observed
 Has first aid kit/su 				Y	Fi	rst aid kit stored in kitchen drawer
 Has protective con accessible to child 		electrical	outlet that is	Y	1200	All outlets covered or occupied
Harmful items are stored children:	appropriately a	and away	y from	Standard Met Y/N	Comment Corrective	s/Notes a Action /Timeframe if needed
 Sharp or pointed i 	tems			Y	Move	ed to knife holder on back of counter
Medications of an	y kind		M. B. San American			n container on high shelf of the kitchen cabinet
Matches lighters						
Matches, lighters and flammable products				Y		Does not own
Alcoholic beverag		products		Y Y Y		Does not own Does not own

Cleaning agents	Y	Bathroom cleaning products moved to top shelf i hallway closet Corrective Action Completed: Loc added to kitchen cabinet with cleaning products
Poisonous substances	Y	Does not own
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	Changing station in the living, parent brings changing bag when child is dropped off
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Taken out daily via trash can
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily accessible in needed medications) and Emergency Documents.	n the event of an em	ergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit		
Directions: Review and determine that each item is adequately included in the enough supplies for each child in care. Also the items are clean, organized, ar	e Disaster Supply K nd usable. Commen	it, Be certain that the Disaster Supply Kit contains t and note below if needed.
☑ Flashlight		Section 2012 Folder or binder for EPP documents
⊠Batteries for Flashlight ⊠Non-perishable	e food	Backpack(s) or carrying case(s)

Page 2 of 3

⊠ Thermometer	⊠ Change of clothes	⊠ Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
Medications (N/A)	⊠Blanket(s)	
Items in the Disaster Supply Kit are cle	an, organized, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is avail	able and easily accessible in the event of	an emergency (Y/N)? Y
Item Specification (if needed): <u>1 flashlight, 1 first aid kit, 2 ther</u> <u>large blanket, 1 roll of duct tape</u> toy book, folder w/ EPP and EC Items to be reviewed on 10/11/2 Lock for kitchen cabinet with classical data and the second sec	 A heavy duty trash bags, no specific r MA docs 023:Corrected & Reviewed on 10/11/20 eaning products 	waters, 2 canned foods, 2 diapers and 1 pk of wipes, 1 nedications, 1 pk of AA batteries, 1 outfit (top/bottom), 1
Emergency Documents		
	Preparedness Plan (this completed for	nj
Authorization for emergency	medical care	
Planning and Maintenance		
Person responsible for updating the D	isaster Supply Kit and the Emergency D	ocuments regularly:
First Name	Last Name	
Description of how the Emergency Re	Bland ady-to-Go Pack will be transported to an	n evacuation location: carried by the provider.
Description of how the Emergency Re <u>Shelter In Place Procedure:</u> The provider will grab the child and Ef- plastic and tape to seal the door if the parent with emergency updates. <u>Evacuation Procedures</u> <u>Primary: The provider will grab the ch</u> will reach out to	ady-to-Go Pack will be transported to an RTG and carry them into the kitchen are need arises. There are no windows or v ild and ERTG and who will escort the provider and c	a (1 door 0 window). The provider will use the sealing ents to be sealed. Once secured the provider will call the with child in arms. Upon arrival the provider
Shelter In Place Procedure: The provider will grab the child and Ef- plastic and tape to seal the door if the parent with emergency updates. Evacuation Procedures Primary: The provider will grab the ch- will reach out to the provider will call the parent with en- Alternate: If they could not access the provider will exercise the child is secure	ady-to-Go Pack will be transported to an RTG and carry them into the kitchen are need arises. There are no windows or v ild and ERTG and who will escort the provider and c nergency updates. e primary location, the provider will grate d in their forward-facing car seat. Upon	a (1 door 0 window). The provider will use the sealing ents to be sealed. Once secured the provider will call the with child in arms. Upon arrival the provider hild to 1
Description of how the Emergency Re <u>Shelter In Place Procedure:</u> The provider will grab the child and Ef- plastic and tape to seal the door if the parent with emergency updates. <u>Evacuation Procedures</u> Primary: The provider will grab the ch will reach out to the provider will call the parent with en Alternate: If they could not access th provider will ensure the child is secure out where to shelter specificall Care Hours: Signatures & Date	ady-to-Go Pack will be transported to an RTG and carry them into the kitchen are need arises. There are no windows or v ild and ERTG and who will escort the provider and c nergency updates. e primary location, the provider will grab d in their forward-facing car seat. Upon y. Once secured the provider will call an	a (1 door 0 window). The provider will use the sealing ents to be sealed. Once secured the provider will call the with child in arms. Upon arrival the provider hild to the child and ERTG and drive to the the the provider will receive instruction from the arrival the provider will receive instruction from the d text the parent with emergency updates.
Description of how the Emergency Re <u>Shelter In Place Procedure:</u> The provider will grab the child and Ef- plastic and tape to seal the door if the parent with emergency updates. <u>Evacuation Procedures</u> Primary: The provider will grab the ch- will reach out to the provider will call the parent with en- Alternate: If they could not access th provider will ensure the child is secure out where to shelter specificall Care Hours: Signatures & Date Acknowledgement: By signing below th been discussed. The parties also ackn	ady-to-Go Pack will be transported to an RTG and carry them into the kitchen are need arises. There are no windows or v ild and ERTG and who will escort the provider and c nergency updates. e primary location, the provider will grat d in their forward-facing car seat. Upon y. Once secured the provider will call an e parties acknowledge that all standard owledge that, if approved, the home in v	a (1 door 0 window). The provider will use the sealing ents to be sealed. Once secured the provider will call the with child in arms. Upon arrival the provider hild to the child and ERTG and drive to the
Description of how the Emergency Re <u>Shelter In Place Procedure:</u> The provider will grab the child and Ef- plastic and tape to seal the door if the parent with emergency updates. <u>Evacuation Procedures</u> Primary: The provider will grab the ch will reach out to the provider will call the parent with en Alternate: If they could not access th provider will ensure the child is secure out where to shelter specificall Care Hours: Signatures & Date	ady-to-Go Pack will be transported to an RTG and carry them into the kitchen are need arises. There are no windows or v ild and ERTG and who will escort the provider and c mergency updates. e primary location, the provider will grate d in their forward-facing car seat. Upon y. Once secured the provider will call an e parties acknowledge that all standard owledge that, if approved, the home in v tually or in-person.	a (1 door 0 window). The provider will use the sealing ents to be sealed. Once secured the provider will call the with child in arms. Upon arrival the provider hild to 1 2 doors 0 window). Once secured the child and ERTG and drive to the The arrival the provider will receive instruction from t d text the parent with emergency updates.
Description of how the Emergency Re <u>Shelter In Place Procedure:</u> The provider will grab the child and Ef- plastic and tape to seal the door if the parent with emergency updates. <u>Evacuation Procedures</u> Primary: The provider will grab the ch- will reach out to the provider will call the parent with er Alternate: If they could not access the provider will ensure the child is secured out where to shelter specifically Care Hours: Signatures & Date Acknowledgement: By signing below the been discussed. The parties also acknowledgement: pop up visit which will be conducted via PROVIDE Printed Name:	ady-to-Go Pack will be transported to an RTG and carry them into the kitchen are need arises. There are no windows or v ild and ERTG and who will escort the provider and c mergency updates. e primary location, the provider will grate d in their forward-facing car seat. Upon y. Once secured the provider will call an the parties acknowledge that all standard owledge that, if approved, the home in v tually or in-person. R Printed	a (1 door 0 window). The provider will use the sealing ents to be sealed. Once secured the provider will call the with child in arms. Upon arrival the provider hild to the child and ERTG and drive to the the the child and ERTG and drive to the the the provider will receive instruction from the arrival the provider will receive instruction from the direct the parent with emergency updates.
Description of how the Emergency Re <u>Shelter In Place Procedure:</u> The provider will grab the child and Ef- plastic and tape to seal the door if the parent with emergency updates. <u>Evacuation Procedures</u> Primary: The provider will grab the ch- will reach out to the provider will call the parent with en Alternate: If they could not access the provider will ensure the child is secured out where to shelter specifically Care Hours: Signatures & Date Acknowledgement: By signing below the been discussed. The parties also acknowledgement: provider will be conducted via PROVIDE Printed Name:	ady-to-Go Pack will be transported to an RTG and carry them into the kitchen are need arises. There are no windows or v ild and ERTG and who will escort the provider and c mergency updates. e primary location, the provider will grate d in their forward-facing car seat. Upon y. Once secured the provider will call an the parties acknowledge that all standard owledge that, if approved, the home in v tually or in-person. R Printed	a (1 door 0 window). The provider will use the sealing ents to be sealed. Once secured the provider will call the with child in arms. Upon arrival the provider hild to 1 2 doors 0 window). Once secured the child and ERTG and drive to the The arrival the provider will receive instruction from 1 d text the parent with emergency updates.

⊠Virtual Inspection □In-person Inspection	Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST				Return ccs.info	to: ormalproviders@maryland.gov
Inspection Date: 04.08/2022	Time	e In: 3:30 pm	Time Out: 4:43 pm	Resu	It: App	roved
Informal Care				-		
Type of Care (check one):	Non-relative Inf	ormal Provider Ca	are Relative Inf	ormal Pr	ovider	Care
Provider Information						
First Name: Regina	Last	Name: Blount		Provider ID: 419825		
Drovidor ID #			Enne	Email:		
Provider ID #:				Ema	l	
Care Location Inspected				Ema		
	City	County:	_		State:	Zip Code:
Care Location Inspected Street Address:		County: Scholarship	Date of Birth	Age		Zip Code:
Care Location Inspected Street Address: Address Verified?: Yes			Date of Birth 9/29/12		State:	
Care Location Inspected Street Address: Address Verified?: Yes				Age	State:	
Care Location Inspected Street Address: Address Verified?: Yes			9/29/12	Age 9 y/o	State: / /Y	
Care Location Inspected Street Address: Address Verified?: Yes			9/29/12 6/30/17	Age 9 y/o 4 y/o	State: / /Y /Y /Y	
Care Location Inspected Street Address: Address Verified?: Yes			9/29/12 6/30/17 12/14/19	Age 9 y/o 4 y/o 2 y/o	State: / /Y /Y /Y	

Directions: Review and determine compliance with each standard. Note any comments or corrective actions needed. Additional pages may be used for comments. Y – Yes, N – No, D – Discussed, n/a – Not Applicable

Health and Safety Training:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Basic Health and Safety Training Completed?	N/A	
Home is free of health and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Is in good repair	Y	
Is free of insect or rodent infestation	Y	
Is well-lit and well-ventilated	Y	
 Has hot and cold running water 	Y	Temp. tested with thermometer 105.7 degrees
Has a working inside toilet	Y	Flush observed
 Has utilities for cooking, lighting and heating 	Y	
 Has a working and safe heating system 	Y	Temp turned up
 Has a working refrigerator and stove 	Y	All burners and refrigerator operational
Has a working telephone	Y	Outbound call made
 Has operational smoke detector(s) 	Y	Test button pressed
Has first aid kit/supplies	Y	Gauze, Bandages, Alcohol pads
 Has protective coverings on any electrical outlet that is accessible to children 	Y	6 outlet covers
Harmful items are stored appropriately and away from children:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Sharp or pointed items	Y	On the wall high up
Medications of any kind	Y	In a cabinet on a high shelf
 Matches, lighters and flammable products 	Y	Not kept in the home.
Alcoholic beverages	Y	Not kept in the home.
• Guns	Y	Not kept in the home.
Cleaning agents	Y	Under a locked cabinet in the bathroom

Poisonous substances	Y	Not kept in the home.
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	Diapers kept clean and
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, ncluding: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	

Emergency Ready-to-Go Pack

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also that the items are clean, organized, and usable. Comment and note below if needed.

⊠Flashlight

⊠Batteries

⊠Thermometer

Bottled water

⊠Non-perishable food

Portable First Aid Kit

⊠Diapers ⊠Change of clothes Second Se

Backpack(s) or carrying case(s)

Consider special toys or games

Heavy Duty Scissors, Duct Tape/

⊠Virtual Inspection □In-person Inspection	Maryland State Department of Education/Office of Chi Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST				Return to: ccs.informalproviders@maryland.g ov	
Inspection Date: 2/24/2022 Follow up 02/28/2022				m Result	:: Failed	
Informal Care						
Type of Care (check one):	Non-relative Info	ormal Provider Ca	are Relative	Informal Pro	vider Care	
Provider Information	and the second second					
First Name: Regina Last Name: Blount Provider ID #:				Provid Email:	er ID: 419825	
Care Location Inspected						
Street Address: Address Verified? Yes	City	0	County State	Zi	p Code	
Name of Children in Care (ad	ld pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)	
			9/29/2012	9 / N		
			6/30/2017	4 / Y		
			12/14/2019	2 / Y		
			10/29/2021	5 months	/ Y	
		1	Constantion of C			
		ć				
Safety of the Home						
Directions: Review and determi	ne compliance with ear	ch standard Note	any comments or c	orrective actio	ons needed Additional	
pages may be used for commen		Sir Standard. Hoto			d, n/a – Not Applicable	
Health and Safety Training:			Standard Met Y/N	Comments	s/Notes Action /Timeframe if needed	
Basic Health and Safety Traini	ing Completed?		N/A			
Home is free of health and s	afety hazards:		Standard Met Y/N	Comments Corrective	s/Notes Action /Timeframe if needed	
 Is in good repair 			Y			
Is free of insect or roo	lent infestation		Y	No insects or rodents observed.		
 Is well-lit and well-ver 	ntilated		Y	Well lit with natural light and indoor lighting.		
Has hot and cold run	ning water		Y	Observed thermometer reading on high		
Has a working inside	toilet under sink		Y	Cabinet under sink child lock observed		
Has utilities for cooking	ng, lighting and heatin	g	Y	Stove burners observed		
Has a working and sa	afe heating system		Y	Turned up from 78 to 79 degrees		
 Has a working refrigerator and stove 			Y	Refrigerator light and frozen food observed		
 Has a working teleph 	one		Y	House phone. Outbound call observed.		
 Has operational smol 	ke detector(s)		Y	Test button pressed. The alarm sounded.		
Has first aid kit/suppli	es		Y	Gauze, bar	nd aids, alcohol wipes	
 Has protective coveri accessible to children 		outlet that is	Y	14 outlets v	with covers.	
Harmful items are stored ap children:	propriately and away	y from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Sharp or pointed item	IS		Y	Up high on t	he wall	
 Medications of any ki 			Y	Upper cabin		
 Matches, lighters and 	COLUMN TRANSFORMED AND ADDRESS OF ADDRESS ADDRE		Y	None in the		
Alcoholic beverages	A REAL PROPERTY OF THE REAL PR	1	Y	None in the	house	
Guns			Y	None in the	house	
Cleaning agents	Cleaning agents		Y	Locked unde	er bathroom sink	

Poisonous substances	Y	Other than medications and cleaning solutions
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	Diaper changed on bed
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	

Emergency Ready-to-Go Pack

The Emergency Ready-to-Go Pack must be available and easily access ble in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also the items are clean, organized, and usable. Comment and note below if needed.

Flashlight

Bottled water

□Batteries for Flashlight ⊠Portable First Aid Kit ⊠Non-perishable food

Solder or binder for EPP documents

Backpack(s) or carrying case(s)

⊠Diapers

⊠Thermometer

Change of clothes

Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags

Medications N/A

Blanket(s)

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y

Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y

Location of The Emergency Ready to go Pack: In a closet off the family room.

Item Specification (if needed):

Band-Aids, aspirin, ointment, alcohol wipes cold compress, gauze tweezers, safety pins, adhesive tape, tongue depressors, 10 diapers, 3 under wares, 4 onesies for the baby, 3 tops, 3 pants

3 large blankets,

Crackers, 6 8oz. waters bottles, goldfish, granola bars, 4 chef Boyardee spaghettios

Dice game, drawing pad, word games, crayons

Emergency medication form she had

Items to review on Monday 02/28/2022 if needed:

Flash light did not turn on and there were no extra batteries

Emergency Documents

Sinformal Provider Emergency Preparedness Plan (this completed form)

⊠Authorization for emergency medical care

Planning and Maintenance

Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly:

First Name

Last Name

Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location:

Shelter In Place Procedure:

The provider will Call mom firs then gather the children and place them in a large closet .Make sure the windows and doors are locked. Tape the windows with duct tape and trash bag. The emergency bag will already be in the closet.

Evacuation Procedures:

The provider will gather the children, grab the stroller and secure the 2 children in the stroller and go Call the parent before leaving the house.

Alternate Location:

The provider will call. The provider will house and where the children will be secured in their car seats and seat belt before heading to

Signatures & Date Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. The parties also acknowledge that, if approved, the home in which care is provided is subject to random, unannounced pop up visit which will be conducted virtually or in-person. PROVIDER INSPECTOR Printed Name: Printed Name: Signature: Signature:

Date: Phone:	Date:	Phone: 1-877-227-0125
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⊠Virtual Inspection □In-person Inspection		Department of Ed Care Care Scholarsh INFORMAL C SPECTION CH	Return to: ccs.informalproviders@maryland.gov		
Inspection Date: 11/26/2024	spection Date: 11/26/2024 Time In: 1:30 pm			m Re:	sult: Passed
Informal Care	I.,		1	1	
Type of Care (check one):	Non-relative Inf	ormal Provider C	are Relative	Informal	Provider Care
Provider Information		official Provider O		mornari	
	Nerse: Diume		Dro	vider 1D: 564496	
First Name: Cassandra Last Name: Blume Provider ID #: B-450-108-139-042					ail: cassieblume@yahoo.com
Care Location Inspected					
<u>Street Address:</u> 608 N Fourth <u>Address Verified?</u> : Yes	n St <u>City</u> : LaVal	e <u>County</u> : A	llegany <u>State</u>	: MD	Zip Code: 21502
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
Gray Hargens	ana ang manangkang kang kang kang kang kang kang	an and the produce of the last of the state	1/31/2023	1 year o	old/ N
Wrenley Hargens			1/31/2023	1 year o	old/ N
Presley Hargens			1/31/2023	1 year (
	nd determine compliand be used for comments				rrective actions needed. ssed, n/a – Not Applicable
Health and Safety Training			Standard Met Y/N	The six X & X & X 1	ents/Notes live Action /Timeframe if needed
Basic Health and Safety Training Completed?			Y		
Home is free of health and	safety hazards:		Standard Met Y/N	1	ents/Notes tive Action /Timeframe if needed
			Y	Correct	ave Action / Imerrane / needed
Is in good repair Is free of insect or re	adapt infactation		Y		
 Is well-lit and well-vell 			Y		
Has hot and cold ru	REAL REPORTED FOR THE SECOND STREET, ST	and a car in car in a car in a car	Y		
Has a working insid			Y		
	ting, lighting and heati	20	Y		
	safe heating system	ig	Y		
Has a working and s Has a working refrig			Y		
Has a working telep			Y		
Has operational sm	and the second		Y		
Has first aid kit/supp			Y		
and an owner water and the second part of the second second second second second second second second second s	rings on any electrical	outlet that is	Ŷ		
Harmful items are stored appropriately and away from children:			Standard Met Y/N		nts/Notes ve Action /Timeframe if needed
			Y		
 Sharp or pointed ite 					
Sharp or pointed ite Medications of any	kind				
Medications of any			Y		
Medications of any	d flammable products		Y Y		
Medications of anyMatches, lighters ar	d flammable products				
 Medications of any Matches, lighters ar Alcoholic beverages 	d flammable products		Y		
Medications of any Matches, lighters ar Alcoholic beverages Guns	nd flammable products		Y Y		
 Medications of any Matches, lighters ar Alcoholic beverages Guns Cleaning agents 	nd flammable products		Y Y Y	Part Party is a subject of	nts/Notes ve Action /Timeframe if needed

	[
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	

The Emergency Ready-to-Go Pack (including needed medications) and		of an emergency. This contains a Disaster Supply Kit
isaster Supply Kit		
	hat each item is adequately included in the Disaster shild in care. Also that the items are clean, organized	
⊠Flashlight	Bottled water	Section 2012 Folder or binder for EPP documents
⊠Batteries	⊠Non-perishable food	Backpack(s) or carrying case(s)
Portable First Aid Kit	⊠Diapers	Consider special toys or games
⊠Thermometer	⊠Change of clothes	 Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trasl Bags
Medications- n/a	⊠Blanket(s)	

Items in the Disaster Supply Kit are clean, organized, and usable ((/N)? Yes	
Emergency Ready-to-Go Pack is available and easily accessible in	the event of an emergency (Y	//N)? Yes
Location of Emergency Ready to go Pack: In the fover		
Emergency Documents		
⊠Informal Provider Emergency Preparedness Plan (this co	mpleted form)	
⊠Authorization for emergency medical care		
Planning and Maintenance		
Person responsible for updating the Disaster Supply Kit and the E	mergency Documents regul	arly:
First Name Last Name Blume		
Description of how the Emergency Ready-to-Go Pack will be trans	sported to an evacuation loc	ation:
Shelter In Place Procedures:		
The Provider will gather the ready to go bag and the children, taki the parent before, during and after sheltering.	ng them to the basement <u>(2 (</u>	doors, 3 window(s)). The provider will <u>call</u>
The Provider will gather the ready to go bag and the children, taki the parent before, during and after sheltering. Evacuation Procedures: The Provider will gather the children and the ready to go bag, taki car seats. The provider will drive to the children's great-grander basement(1 doors, 2 window(s)). The provider will call the pare The Provider will gather the children and the ready to go bag, taki car seats. The provider will drive to the children's great-grander basement(1 doors, 2 window(s)). The provider will call the pare The Provider will gather the children and the ready to go bag, taki car seats. The provider will drive to the fire station waiting for provider will call the parent before, during and after sheltering CARE HOURS: - M-F 6:00AM- 2:30PM	ing them to the car, the trij nother's house using her ent before, during and afte ing them to the car, the trij further instruction from th	olets will be secured in forward facing spare key to enter and shelter in the r sheltering. olets will be secured in forward facing
The Provider will gather the ready to go bag and the children, taki the parent before, during and after sheltering. Evacuation Procedures: The Provider will gather the children and the ready to go bag, taki car seats. The provider will drive to the children's great-grand basement(1 doors, 2 window(s)). The provider will call the pare The Provider will gather the children and the ready to go bag, taki car seats. The provider will drive to the fire station waiting for provider will call the parent before, during and after sheltering CARE HOURS: - M-F 6:00AM- 2:30PM Signatures & Date	ing them to the car, the trip nother's house using her ent before, during and afte ing them to the car, the trip further instruction from th	olets will be secured in forward facing spare key to enter and shelter in the r sheltering. olets will be secured in forward facing e staff(# of doors, # of window(s)). The
The Provider will gather the ready to go bag and the children, taki the parent before, during and after sheltering. Evacuation Procedures: The Provider will gather the children and the ready to go bag, taki car seats. The provider will drive to the children's great-grandher basement(1 doors, 2 window(s)). The provider will call the parent The Provider will gather the children and the ready to go bag, taki car seats. The provider will drive to the fire station waiting for provider will call the parent before, during and after sheltering CARE HOURS: - M-F 6:00AM- 2:30PM Signatures & Date Acknowledgement: By signing below the parties acknowledge that all been discussed. The parties also acknowledge that, if approved, the f	ing them to the car, the trip nother's house using her ent before, during and afte ing them to the car, the trip further instruction from th standards have been reviewe	olets will be secured in forward facing spare key to enter and shelter in the r sheltering. olets will be secured in forward facing e staff(# of doors, # of window(s)). The d, and any corrections if needed have
The Provider will gather the ready to go bag and the children, taki the parent before, during and after sheltering. Evacuation Procedures: The Provider will gather the children and the ready to go bag, taki car seats. The provider will drive to the children's great-grandher basement(1 doors, 2 window(s)). The provider will call the parent The Provider will gather the children and the ready to go bag, taki car seats. The provider will drive to the fire station waiting for provider will call the parent before, during and after sheltering CARE HOURS: - M-F 6:00AM- 2:30PM Signatures & Date Acknowledgement: By signing below the parties acknowledge that all been discussed. The parties also acknowledge that, if approved, the f	ing them to the car, the trip nother's house using her ent before, during and afte ing them to the car, the trip further instruction from th standards have been reviewe	olets will be secured in forward facing spare key to enter and shelter in the r sheltering. olets will be secured in forward facing e staff(# of doors, # of window(s)). The d, and any corrections if needed have
The Provider will gather the ready to go bag and the children, taking the parent before, during and after sheltering. Evacuation Procedures: The Provider will gather the children and the ready to go bag, taking car seats. The provider will drive to the children's great-grander basement(1 doors, 2 window(s)). The provider will call the parent basement(1 doors, 2 window(s)). The provider will call the parent basement(1 doors, 2 window(s)). The provider will call the parent basement(1 doors, 2 window(s)). The provider will call the parent basement(1 doors, 2 window(s)). The provider will call the parent basement(1 doors, 2 window(s)). The provider will call the parent basement(1 doors, 2 window(s)). The provider will call the parent basement basement(1 doors, 2 window(s)). The provider will call the parent basement basement(1 doors, 2 window(s)). The provider will call the parent basement basement will be parent basement basement will call the parent basement basement will call the parent basement basement will call the parent basement basement will basement b	ing them to the car, the trip nother's house using her ent before, during and afte ing them to the car, the trip further instruction from th standards have been reviewe	blets will be secured in forward facing spare key to enter and shelter in the r sheltering. blets will be secured in forward facing e staff(# of doors, # of window(s)). The d, and any corrections if needed have d is subject to random, unannounced INSPECTOR
The Provider will gather the ready to go bag and the children, taki the parent before, during and after sheltering. Evacuation Procedures: The Provider will gather the children and the ready to go bag, taki car seats. The provider will drive to the children's great-grander basement(1 doors, 2 window(s)). The provider will call the pare The Provider will gather the children and the ready to go bag, taki car seats. The provider will drive to the fire station waiting for provider will call the parent before, during and after sheltering CARE HOURS: - M-F 6:00AM- 2:30PM Signatures & Date Acknowledgement: By signing below the parties acknowledge that all been discussed. The parties also acknowledge that, if approved, the f pop up visit which will be conducted virtually or in-person.	ing them to the car, the trip nother's house using her ent before, during and afte ing them to the car, the trip further instruction from the standards have been reviewe nome in which care is provided	blets will be secured in forward facing spare key to enter and shelter in the r sheltering. blets will be secured in forward facing e staff(# of doors, # of window(s)). The d, and any corrections if needed have d is subject to random, unannounced INSPECTOR Harris

⊠Virtual Inspection □In-person Inspection	ucation/Office of (ship Program CARE HECKLIST	Child Care Return to: ccs.informalproviders@maryland.g ov			
Inspection Date: 06/08/2023	Time In: 1:30PM	Time Out: 2:45P	M Result: PASSED		
Informal Care					
Type of Care (check one):	ive Informal Provider C	are ⊠Relative	Informal Provider Care		
Provider Information					
First Name : Emiko Provider ID #:	Last Name: Bowens	1	Provider ID: 516800 Email:		
Care Location Inspected					
Street Address: City: Address Verified? Yes.	County:	JSt	ate Zip Code:		
Name of Children in Care (add pages if need	led) Scholarship	Date of Birth	Age / Present (Y/N)		
		(12/11/2021)	1yr. / Y		
Colety of the Upper					
Safety of the Home					
Directions: Review and determine compliance pages may be used for comments.	with each standard. Note		orrective actions needed. Additional D – Discussed, n/a – Not Applicable		
Health and Safety Training:		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Basic Health and Safety Training Completed	?	Y	Relative Informal Care – Certificate Submitted		
Home is free of health and safety hazards		Standard Met	Comments/Notes Corrective Action /Timeframe if needed		
 Is in good repair 		Y	All areas were clean		
 Is free of insect or rodent infestation 		Y	No evidence of infestation		
Is well-lit and well-ventilated		Y	All lights were turned on and natural window lighting		
Has hot and cold running water		Y	Tested by provider and steam observed on camera		
Has a working inside toilet		Y	Flushed by provider and observed		
 Has utilities for cooking, lighting and 	heating	Y			
 Has a working and safe heating sys 	tem	Y	Thermostat tested by provider for cooling & heating		
 Has a working refrigerator and stove 	9	Y	Tested by provider and observed		
 Has a working telephone 		Y	Outbound call made to provider's phone		
Has operational smoke detector(s)		Y	Tested by provider and observed		
Has first aid kit/supplies		Y	Medical Supplies in hallway closet (Band-aids, gauze, alcohol wipes, and ointment) and first aid kit stored in hallway closet		
 Has protective coverings on any ele accessible to children 	ctrical outlet that is	Y	All outlets were occupied or covered		
Harmful items are stored appropriately an children:	d away from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Sharp or pointed items		Y	Stored in knife holder on back of kitchen counter		
Medications of any kind		Y	Stored in locked bathroom drawer and high shelf hallway closet		
 Matches, lighters and flammable pro 	oducts	Y	Does not own		
Alcoholic beverages		Y	Moved to locked kitchen cabinet and high level kitchen shelf		
Guns		Y	Does not own		
Cleaning agents		Y	Cleaning agents in locked kitchen cabinet and higher shelf in hallway closet		
 Poisonous substances 		Y	Does not own		
MSDE OCC Informal Care Inspection Checklist		Page 1 of 3	Revised 10/2021		

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
All areas of the home are kept clean, including diapering area.	Y	Changing station in provider's bedroom		
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Diapers taken out daily using a small trash ca		
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y			
Diapering procedures are followed.	Y	All diapering supplies available with changing pad		
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y			
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y			
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y			
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y			
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y			
Emergency Ready-to-Go Pack				
The Emergency Ready-to-Go Pack must be available and easily accessible in needed medications) and Emergency Documents.	n the event of an em	ergency. This contains a Disaster Supply Kit (including		
Disaster Supply Kit				
Directions: Review and determine that each item is adequately included in the enough supplies for each child in care. Also the items are clean, organized, a	ne Disaster Supply K and usable. Commer	it. Be certain that the Disaster Supply Kit contains and note below if needed.		
⊠Flaśhlight ⊠Bottled water		Solder or binder for EPP documents		
⊠Batteries for Flashlight ⊠Non-perishabl	e food	Backpack(s) or carrying case(s)		
☑ Portable First Aid Kit	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Consider special toys or games		
		⊠Heavy Duty Scissors, duct tape/		
⊠Thermometer ⊠Change of close	thes	packing tape & sealing plastic/trash bags		

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y

Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y

Location of The Emergency Ready to go Pack: Stored in the back office Item Specification (if needed):

<u>2 flashlights, 6 extra AAA batteries, 1 first aid kit, 1 thermometer, no spec meds, 4 bottled waters, 2 canned foods, 3 dried foods, 1 duffle bag (carrying case), 1 pk of wipes, 6 diapers, 2 outfits(top/bottom), wash cloths & baby supplies, 1 blanket, a few toys, 1 roll of duct tape, 4 trash bags, and folder w/ EPP and ECMA docs</u>

- Items to be reviewed on xx/xx/xxxx: N/A

Emergency Documents

Sinformal Provider Emergency Preparedness Plan (this completed form)

Authorization for emergency medical care

Planning and Maintenance

Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly:

First Name

Emiko

Last Name Bowens

Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: carried by the provider.

Shelter In Place Procedure:

The provider will gather the child, lock front and back doors and/or windows. The provider will grab the ERTG bag and head to the living room area (1 door 3 windows). If the need should arise the provider will use the sealing plastic and tape to secure the doors and windows. Once everything is secured the provider will call or text the parent.

Evacuation Procedures

Primary: The provider will account for the child and grab the ETRG and car seat. The provider and child will go to the vehicle of the pickup relative and secure the child in their rear-facing car seat and be driven to the evacuation location. Upon arrival the provider has key access to the parent's home. Upon entry they would shelter in living room (1 door 1 window). The provider will call or text the parent before and after they are settled at the location.

Alternate: If they could not access the primary location, the provider will gather the child and ERTG and car seat. The provider and child will go to the vehicle of the pickup relative and secure the child in rear-facing car seat and be driven to the location. Upon arrival the provider has key access to **Example 1** Upon entry they would go into the living room (1 door 0 windows). The provider will call or text the parent before and after the emergency is over.

Care Hours:

Signatures & Date	
	ledge that all standards have been reviewed, and any corrections if needed have pproved, the home in which care is provided is subject to random, unannounced n.
PROVIDER	INSPECTOR
Printed Name: EMIKO BOWENS	Printed Name:
Signature:	Signature:
Date: 8 JUNE 2023 Phone:	Date: 06/08/2023 Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection	nd State Department of Ed Child Care Scholar INFORMAL INSPECTION C	ship Program CARE	Child Care Return to: ccs.informalproviders@maryland.g ov		
Inspection Date: 04/06/2023	Time In: 10:30AM	Time Out: 11:39/	AM Result: PASSED		
Informal Care	<u> </u>				
Type of Care (check one):	n-relative Informal Provider C	are Relative	Informal Provider Care		
Provider Information					
First Name: Kathy Provider ID #:	Last Name: Bowen		Provider ID: 511502 Email:		
Care Location Inspected					
Street Address: Address Verified? Yes.	City:	County:	State Zip Code:		
Name of Children in Care (add pages i	f needed) Scholarship	Date of Birth	Age / Present (Y/N)		
		(07/19/2022)	8mos./Y		
Safety of the Home					
Directions: Review and determine compli- pages may be used for comments.	ance with each standard. Note	any comments or co Y – Yes, N – No, I	prrective actions needed. Additional D – Discussed, n/a – Not Applicable		
Health and Safety Training:		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Basic Health and Safety Training Comp	leted?	Y	Relative Informal Care – Certificate Submitted		
Home is free of health and safety haz	cards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Is in good repair		Y	All areas were clean		
Is free of insect or rodent infes	tation	Y	No evidence of infestation		
Is well-lit and well-ventilated		Y	All lights were turned on and natural window lighting		
Has hot and cold running wate	r	Y	Tested by provider and steam observed on camera		
Has a working inside toilet		Y	Flushed by provider and observed		
 Has utilities for cooking, lightin 	g and heating	Y			
Has a working and safe heatin		Y	Thermostat tested by provider for cooling & heating		
Has a working refrigerator and	stove	Y	Tested by provider and observed		
Has a working telephone		Y	Outbound call made to provider's phone		
 Has operational smoke detector Has first aid kit/supplies 	Dr(s)	Y Y	Tested by provider and observed Medical Supplies: Band-Aids, Gauze, Alcohol,		
Has protective coverings on an accessible to children	ny electrical outlet that is	Y	Peroxide All outlets were occupied or covered		
Harmful items are stored appropriate children:	ly and away from	Standard Met	Comments/Notes Corrective Action /Timeframe if needed		
Sharp or pointed items		Y	Stored in knife holder on the back of kitchen counter		
Medications of any kind	, <u></u>	Y	Stored in high cabinet in bathroom		
 Matches, lighters and flammab 	le products	Y	Does not own		
Alcoholic beverages		Y	Does not own		
Guns		Y	Does not own		
Cleaning agents		Y	All cleaning agents stored under kitchen with lock		
Poisonous substances	·	Y	Does not own		
GENERAL CLEANLINESS STANDAR	DS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		

All areas of the home are kept clean, including diapering	in the second	Diapering area in child's bedroom
Trash, garbage and wet and soiled diapers are disposed sanitary manner.	dofina Y	Diapers are thrown away daily in diaper genie
Child is changed immediately when s/he has a soiled or diaper, clothing or bedding.	wet Y	
Diapering procedures are followed.	Y	All additional diapering needs in storage holde in child's bedroom
 Handwashing procedures are followed. Provider and ch washed thoroughly with soap and warm running water a Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the s disease. 	ifter:	
CHILD ABUSE, NEGLECT AND MISTREATMENT ST	ANDARDS Standard Met	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including Physical injury Any sexual abuse Mental injury 	y: Y	
 A child in care is not subjected to any form of negle including: The failure to give proper care and attention to including leaving a child unattended under circl that indicate that the child's health or welfare is placed at substantial risk of harm; Mental injury to a child, or a substantial risk of i injury that is caused by the failure to give proper attention to a child. 	a child umstances harmed or Y mental er care and	
 A child in care is not subjected to mistreatment, inclusion of the second sec	or Y ns in a	
The provider immediately reports any suspected chil neglect or mistreatment by calling 911 and your loca Department of Social Services Child Protective Serv	1 Y	
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easi needed medications) and Emergency Documents.	ly accessible in the event of an er	nergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit		energia cantalezzaren beren 20 eta ertia (200 eta ertia) Regeneratuaren eta ertia eta eta
Directions: Review and determine that each item is adequately enough supplies for each child in care. Also the items are clear	/ included in the Disaster Supply I n, organized, and usable. Comme	Kit. Be certain that the Disaster Supply Kit contains nt and note below if needed.
	Bottled water	Sector of binder for EPP documents
⊠Batteries for Flashlight ⊠N	Ion-perishable food	Backpack(s) or carrying case(s)
	Diapers	⊠Consider special toys or games
	Change of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
Medications (N/A)	Blanket(s)	4499 1
Medications (N/A)	Blanket(s)	

Emergency Ready-to-Go Pack is available and e	easily accessible in th	e event of an emergency (Y/N)	? Y
Location of The Emergency Ready to go Pac	k: Stored in the corr	ner of the dining room	
Item Specification (if needed):			
 <u>1 duffle bag (carrying case)</u>, 3 bottled wa 	ters, 6 canned food	s, 3 baby foods, 1 first aid kit	, 1 pair of scissors, 1 roll of trash bags,
roll of duct tape, no spec meds, 4 diaper	s/1pk of wipes, 2 to	ys, 1 outfit (top/bottom/socks), 1 med blanket, folder w/ EPP & ECMA,
<u>1 flashlight, 1 thermometer,</u> Items to be reviewed on xx/xx/xxxx: N/A			
items to be reviewed on xXXXXXXXXX N/A			
Emergency Documents			
⊠Informal Provider Emergency Prepared	iness Plan (this com	pleted form)	
⊠Authorization for emergency medical ca	are		
Planning and Maintenance		and some the sharest.	
Person responsible for updating the Disaster Su	pply Kit and the Em	ergency Documents regularly	:
First Name	Last Name		
Kathy	Bowen		
Description of how the Emergency Ready-to-Go	Pack will be transp	orted to an evacuation locatio	n: carried by the provider.
Shelter In Place Procedure:			
The provider will gather the child and grab the e the door is sealed with sealing plastic and tape.			r 0 windows). The provider will ensure f the emergency.
Evacuation Location(s) Procedures:			
Primary: The provider will account for the child	and ERTG and carr	y them to her vehicle. She wil	ensure the child is secured in her rear-
facing car seat and then call or text the parent to	o inform them an em	ergency has occurred and wh	nere they are going. She will drive to the
and upon entry be instructed by the	e staff of where to lo	ocate for shelter. Provider will	call or text the parent with updates once
they are secured.			
Alternate: If they could not access the primary	location the provide	ar will gother the shild and ED	TC and corrections into how which Cha
would secure the child in her rear-facing car sea	at. The provider wou	Id drive to	nd call the parent to inform them of the
change. The provider has a spare key to the hor	me, upon entry they	would go into the bathroom (1 door 0 windows), She will call or text
the parent once they are secured.			
Signatures & Date			
Acknowledgement: By signing below the parties	acknowledge that al	I standarde have been review	and any corrections if peeded have
been discussed. The parties also acknowledge t	hat, if approved, the	home in which care is provide	ed is subject to random, unannounced
pop up visit which will be conducted virtually or in	n-person.		
PROVIDER			INSPECTOR
Printed Name: Kathu Bower		Printed Name:	
Signature		Signature:	
Date: 4 8 202 3 Phone:		Date: 04/06/2023	Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection		partment of E Care Care Scholars NFORMAL (ECTION CH	hip Program CARE	Child Return to: ccs.informalproviders@maryland.gov
Inspection Date: 4/16/2024	Time I	n: 10:30am	Time Out: 11:30	am Result: Passed
Informal Care			l Trees	
Type of Care (check one):	Non-relative Infor	mal Provider C	Care ⊠Relative	Informal Provider Care
Provider Information				
First Name: Michelle Provider ID #:	Last N	ame: Bowens	<u>Na na mangang kang kang kang kang kang kang kan</u>	Provider ID: 537288 Email:
Care Location Inspected				
Street Address:		City City	County	State Zip Code
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age / Present (Y/N)
	<u>an ang baha di sinang Ali sinang si sa si sa si sa si </u>		8/13/2022	17 mos. /N
			7/13/2013	10 /N
			9/18/2011	12 /N
Safety of the Home		part and a second second		
Directions: Review a	nd determine compliance be used for comments.	with each stand	Y-Yes, N-No,	nents or corrective actions needed. D – Discussed, n/a – Not Applicable
Health and Safety Training			Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Basic Health and Sa	afety Training Completed	1?	Y	
Home is free of health and	safety hazards:		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 Is in good repair 			Y	
Is free of insect or re		<u></u>	Y	
Is well-lit and well-ve			Y	
Has hot and cold ru			Y	
Has a working insid	king, lighting and heating		Y Y	
Has utilities for cook Has a working and s			Y	
Has a working and s Has a working refrig			Y	
Has a working telep			Y	······································
Has operational smoothing target			Y	
 Has first aid kit/supp 			. Y	
	rings on any electrical or	utlet that is	Y .	
Harmful items are stored a children:	ppropriately and away	from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe If needed
 Sharp or pointed ite 	ms		Y	
Medications of any			Y	
	nd flammable products		Y	
Alcoholic beverages	3		Y	
Guns			Y	
Cleaning agents			Y	NON IN THE CARE LOCATION AT THE MOMENT
 Poisonous substance 	Ces		Y	
GENERAL CLEANLINESS	STANDARDS		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed

All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Dlapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Ŷ	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Ŷ	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	*
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	

Emergency Ready-to-Go Pack The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents. **Disaster Supply Kit** Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also that the items are clean, organized, and usable. Comment and note below if needed. ⊠Flashlight Bottled water SFolder or binder for EPP documents **⊠**Batteries XNon-perishable food Backpack(s) or carrying case(s) Portable First Aid Kit ⊠Diapers Consider special toys or games X Heavy Duty Scissors, Duct Tape/ **M**Thermometer Change of clothes

Blanket(s)

Packing Tape & Sealing Plastic/ Trash Bags

MSDE OCC Informal Care Inspection Checklist 2020-03-26

DMedicationsN/A

Items in the Disaster Supply Kit are clean, organized, and usable (Y/	N)? YES
Emergency Ready-to-Go Pack is available and easily accessible in the	ne event of an emergency (Y/N)? YES
Location of Emergency Ready to go Pack: KEPT IN A LOCKED C	LOSET NEAR THE FRONT DOOR
Item Specification (if needed): LARGE BACKPACK 3 LARGE BOTTLES CANNED SOUP AND APPLE SAUCE 4 DIAPERS 	
LARGE BLANKET STUUFED ANIMAL AND COCOMELON TOY PHONE SIPPY CUP	
<u>To be observed for compliance on</u> :	
Emergency Documents	
⊠Informal Provider Emergency Preparedness Plan (this con ⊠Authorization for emergency medical care	npleted form)
Planning and Maintenance	
Person responsible for updating the Disaster Supply Kit and the En	nergency Documents regularly:
First Name Michelle Last Name Bowe	ns
inform them of the emergency. The Provider would ensure to keep <u>Evacuation Procedures:</u> The Provider will gather the children and do a headcount to verify the children hold hands walking to the car. The youngest child would be being secured in the seat belts. Prior to relocation the Provider will the provider will seal the seat belts. The Provider will the (2 doors 1 window). The Provider will seal the emergency to keep them updated. The Provider would ensure the	windows and doors from the air outside and contact the parents to the children calm and away from all windows. The children calm and away from all windows. The Provider contact the Parents to keep them informed. The Provider will drive to contact the Parents to keep them informed. The Provider will drive to the children calm and away from all windows. The provider calm and away from all windows. The they are all there. She would grab the ERTGB and ensure that the e in a rear facing car seat with the oldest children and the Provider to keep the children calm and away from all windows. The they are all there. She would grab the ERTGB and ensure that the e in a rear facing car seat with the oldest children and the Provider contact the Parents to keep them informed. The Provider will the parents to keep them informed the parents (1 door 1 to m the air outside and contact the parents during and after the parents during af
Signatures & Date	
Acknowledgement: By signing below the parties acknowledge that all s been discussed. The parties also acknowledge that, if approved, the ho pop up visit which will be conducted virtually or in-person.	
PROVIDER	INSPECTOR
Printed Name: Michelle Bouens 9-18-2024	Printed Name:
Signatura	Signature:

2024 Phone: 1-877-227-0125	Date:				Phone:				Date:
							.0 0140.0		
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		a.							
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⊠Virtual Inspection □In-person Inspection	Child	epartment of E Care Care Scholars INFORMAL C PECTION CH	ARE	Child	Return to: ccs.informalproviders@maryland.gov		
Inspection Date: 8/27/2024	Time	In: 3:30 PM	Time Out: 4:21 F	M	Result: Follow Up Needed		
Inspection Date: 8/29/2024	Time	In: 3:20 PM	Time Out: 3:35 F	M	Result: Passed		
Informal Care			And the second second				
Type of Care (check one):	Non-relative Info	rmal Provider C	are DRelative	Inform	nal Provider Care		
Provider Information	the second second second				and the second s		
First Name: Temera Provider ID #:	Last	Name: Boyd		-	Provider ID: 543837 Email:		
Care Location Inspected			The state of the s				
<u>Street Address:</u> <u>Address Verified?</u> : Yes	<u>City</u> :	-	County: State	0	Zip Code:		
Name of Children in Care (a	dd pages if needed)	Scholarship	Date of Birth	1	Age / Present (Y/N)		
			4/5/2022	7 y	ears old/ N		
a principal de la constante de	217-0-0		2/27/2018	6 y	ears old/ Y		
Safety of the Home	-						
Directions: Review an	nd determine compliance be used for comments.	e with each stand	lard. Note any comm	ents c	r corrective actions needed. scussed, n/a – Not Applicable		
Health and Safety Training:	be used for comments.	-	Standard Met	Cor	Comments/Notes Corrective Action /Timeframe if needed		
Basic Health and Sa	d?	Y	00				
Home is free of health and s		Standard Met Y/N		nments/Notes rective Action /Timeframe if needed			
Is in good repair			Y				
 Is free of insect or ro 	dent infestation		Y				
 Is well-lit and well-ve 	entilated		Y				
 Has hot and cold run 	ning water		Y				
 Has a working inside 			Y				
	ing, lighting and heatin	9	Y	-			
Has a working and s		Y	-				
Has a working refrige			Y	-			
Has a working teleph Has operational smo			Y				
 Has operational smo Has first aid kit/suppl 			Y				
	ings on any electrical of	outlet that is	Y				
Harmful items are stored ap children:		from	Standard Met Y/N	Con	ments/Notes rective Action /Timeframe if needed		
Sharp or pointed item	ns		Y				
Medications of any ki	Medications of any kind						
Matches, lighters and		Y					
Alcoholic beverages			Y				
Guns			Y		and the second s		
Cleaning agents		-	Y		and the same same same		
Poisonous substance	15		Y		and the second s		
	TANDADDO		Standard Met		nments/Notes		
SENERAL CLEANLINESS ST	TANDARDS		Y/N	Cor	rective Action /Timeframe if needed		

and the second sec		
Trash, garbage and wet and solled diapers are disposed of in a anitary manner.		
Child is changed immediately when a	Y	
liaper, clothing or bedding. Diapering procedures are followed.	Y	
landwashing procedures are fall	Y	
 Iandwashing procedures are followed. Provider and child's hands vashed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
HILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met	Comments/Notes
child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	Y/N Y	Corrective Action /Timeframe if needed
child in care is not subjected to any form of neglect, cluding:		
 The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or amotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
e provider immediately reports any suspected child abuse, glect or mistreatment by calling 911 and your <u>local</u> partment of Social Services Child Protective Services <u>it</u> .	¥	
ergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily acc (including needed medications) and Emergency Documents.	essible in the event	of an emergency. This contains a Disaster Supply Kit
aster Supply Kit		and the second second second
Directions: Review and determine that each item is adequately inclu contains enough supplies for each child in care. Also that the items a	ded in the Disaster	Supply Kit. Be certain that the Disaster Supply Kit I, and usable. Comment and note below if needed
S Flashlight Southed water		Sector Folder or binder for EPP documents
Batteries ØNon-perishable	food	Backpack(s) or carrying case(s)
Portable First Aid Kit Diapers- N/A		Consider special toys or games
⊠Thermometer ⊠Change of cloth	es	⊠ Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags
DMedications- N/A ØBlanket(s)		

- Ordani	Zed, and usable number of	
Items in the Disaster Supply Kit are clean, organi Emergency Ready-to-Go Pack is available and en	asily accessible in the event of an error	
Location of Emergency Ready to go Pack: Ba	sement	ency (Y/N)? Yes
To be observed for compliance on 8/29/2024 (Safety locks on cabinet Safety door knobs Blankets	23:30 pm :	
Emergency Documents	Contraction of the	
⊠Informal Provider Emergency Preparedn ⊗Authorization for emergency and	and Dia wat	
energency medical can	ess Plan (this completed form)	
Planning and Maintenance		and the second se
Person responsible for updating the Disaster Sup First Name	oly Kit and the Emergency Documents	tan lad .
	Joiney Documents	regularly:
emera	Last Name	
Description of how the Emergency Ready-to-Go B	Last Name	n location:
emera Description of how the Emergency Ready-to-Go F shelter In Place Procedures:	Last Name Boyd ack will be transported to an evacuation	n location:
emera Description of how the Emergency Ready-to-Go F shelter In Place Procedures: The Provider will gather the module of the second	Last Name Boyd ack will be transported to an evacuation	
emera Description of how the Emergency Ready-to-Go P Shelter In Place Procedures: The Provider will gather the ready to go bag and the provider will text parent before, during and after st	Last Name Boyd ack will be transported to an evacuation	n location: (1 doors, 0 window(s)). The
emera Description of how the Emergency Ready-to-Go F shelter In Place Procedures: The Provider will gather the ready to go bag and the rovider will text parent before, during and after st Evacuation Procedures:	Last Name Boyd lack will be transported to an evacuation he children, heltering.	(1 doors, 0 window(s)). The
Temera Description of how the Emergency Ready-to-Go F Shelter In Place Procedures: The Provider will gather the ready to go bag and the provider will text parent before, during and after st Evacuation Procedures: The Provider will gather the children and the ready provider will	Last Name Boyd ack will be transported to an evacuation the children, meltering.	(1 doors, 0 window(s)). The
emera Description of how the Emergency Ready-to-Go F <u>inelter In Place Procedures:</u> The Provider will gather the ready to go bag and the rovider will <u>text</u> parent before, during and after st <u>ivacuation Procedures:</u> The Provider will gather the children and the ready rovider will uring and after sneltering	Last Name Boyd ack will be transported to an evacuation the children, heltering. to go bag taking them to the car secu (2 doors, 0 wind	(1 doors, 0 window(s)). The pring both children in their booster seat. The dow(s)). The provider will text parent before.
emera Description of how the Emergency Ready-to-Go F Shelter In Place Procedures: The Provider will gather the ready to go bag and the provider will text parent before, during and after st Evacuation Procedures: The Provider will gather the children and the ready rovider will uning and after sheltering	Last Name Boyd ack will be transported to an evacuation the children, heltering. to go bag taking them to the car secu (2 doors, 0 wind	(1 doors, 0 window(s)). The pring both children in their booster seat. The dow(s)). The provider will text parent before.
emera Description of how the Emergency Ready-to-Go F <u>inelter In Place Procedures:</u> The Provider will gather the ready to go bag and the rovider will <u>text</u> parent before, during and after sh <u>ivacuation Procedures:</u> The Provider will gather the children and the ready rovider will the Provider will gather the children and the ready rovider will gather the children and the ready rovider will gather the children and the ready	Last Name Boyd ack will be transported to an evacuation the children, to go bag taking them to the car secu (2 doors, 0 wind to go bag taking them to the car secu	(1 doors, 0 window(s)). The pring both children in their booster seat. The dow(s)). The provider will text parent before.
emera Description of how the Emergency Ready-to-Go F <u>shelter In Place Procedures:</u> The Provider will gather the ready to go bag and the rovider will <u>text</u> parent before, during and after st <u>swacuation Procedures:</u> The Provider will gather the children and the ready rovider will uring and after sheltering The Provider will gather the children and the ready rovider will uring and after sheltering	Last Name Boyd ack will be transported to an evacuation the children, to go bag taking them to the car secu (2 doors, 0 wind to go bag taking them to the car secu	(1 doors, 0 window(s)). The uring both children in their booster seat. The dow(s)). The provider will text parent before.
emera Description of how the Emergency Ready-to-Go F Shelter In Place Procedures: The Provider will gather the ready to go bag and th rovider will text parent before, during and after st Evacuation Procedures: The Provider will gather the children and the ready rovider will uning and after sheltering The Provider will the Provider wil	Last Name Boyd ack will be transported to an evacuation the children, to go bag taking them to the car secu (2 doors, 0 wind to go bag taking them to the car secu	(1 doors, 0 window(s)). The uring both children in their booster seat. The dow(s)). The provider will text parent before.
emera Description of how the Emergency Ready-to-Go F Shelter In Place Procedures: The Provider will gather the ready to go bag and it provider will text parent before, during and after st Evacuation Procedures: The Provider will gather the children and the ready rovider will uning and after sheltering The Provider will gather the children and the ready rovider will Evacuation Procedures: The Provider will gather the children and the ready rovider will uning and after sheltering The Provider will Evacuation Provider will text parent before, du Evacuation Charter Sector S	Last Name Boyd ack will be transported to an evacuation the children, heitering. to go bag taking them to the car secu (2 doors, 0 wind to go bag taking them to the car secu iring and and shellering	(1 doors, 0 window(s)). The uring both children in their booster seat. The dow(s)). The provider will text parent before, tring both children in their booster seat. The (1 doors, 2
emera escription of how the Emergency Ready-to-Go F helter In Place Procedures: the Provider will gather the ready to go bag and the rovider will text parent before, during and after st vacuation Procedures: the Provider will gather the children and the ready rovider will uning and after sheltering the Provider will gather the children and the ready rovider will after sheltering the Provider will gather the children and the ready rovider will after sheltering the Provider will after sheltering the Pro	Last Name Boyd ack will be transported to an evacuation the children, heitering. to go bag taking them to the car secu (2 doors, 0 wind to go bag taking them to the car secu iring and and shellering	(1 doors, 0 window(s)). The uring both children in their booster seat. The dow(s)). The provider will text parent before, tring both children in their booster seat. The (1 doors, 2
emera bescription of how the Emergency Ready-to-Go F thelter In Place Procedures: the Provider will gather the ready to go bag and the rovider will text parent before, during and after st vacuation Procedures: the Provider will gather the children and the ready rovider will and after sheltering the Provider will gather the children and the ready rovider will and after sheltering the Provider will a	Last Name Boyd ack will be transported to an evacuation the children, heitering. to go bag taking them to the car secu (2 doors, 0 wind to go bag taking them to the car secu iring and and shellering	(1 doors, 0 window(s)). The aring both children in their booster seat. The dow(s)). The provider will text parent before. ring both children in their booster seat. The (1 doors, 2 wed, and any corrections if needed have led is subject to random, unannounced
emera Description of how the Emergency Ready-to-Go F Shelter In Place Procedures: The Provider will gather the ready to go bag and th rovider will text parent before, during and after sh Evacuation Procedures: The Provider will gather the children and the ready rovider will uring and after sheltering The Provider will Evacuation Procedures: The provider will gather the children and the ready rovider will Findow(s). The provider will text parent before, du Evacuation Ev	Last Name Boyd lack will be transported to an evacuation the children, neiltering. to go bag taking them to the car secu- (2 doors, 0 wind to go bag taking them to the car secu- ining and and shere energy wiedge that all standards have been review approved, the home in which care is provid on.	(1 doors, 0 window(s)). The uring both children in their booster seat. The dow(s)). The provider will text parent before, tring both children in their booster seat. The (1 doors, 2
lemera Description of how the Emergency Ready-to-Go F Shelter In Place Procedures: The Provider will gather the ready to go bag and the provider will text parent before, during and after st Evacuation Procedures: The Provider will gather the children and the ready rovider will uning and after sheltering The Provider will gather the children and the ready rovider will provider will gather the children and the ready rovider will provider will gather the children and the ready rovider will provider will gather the children and the ready rovider will provider will gather the children and the ready rovider will provider will gather the children and the ready rovider will provider will text parent before, du CARE HOURS: Ganatures & Date Ccknowledgement: By signing below the parties acknowledge that, if a po up visit which will be conducted virtually or in-persected	Last Name Boyd lack will be transported to an evacuation the children, neitering. to go bag taking them to the car security to go bag taking them to the car security to go bag taking them to the car security whedge that all standards have been review approved, the home in which care is provid printed Name:	(1 doors, 0 window(s)). The aring both children in their booster seat. The dow(s)). The provider will text parent before. ring both children in their booster seat. The (1 doors, 2 wed, and any corrections if needed have led is subject to random, unannounced
emera Description of how the Emergency Ready-to-Go F Shelter In Place Procedures: The Provider will gather the ready to go bag and th rovider will text parent before, during and after sh stracuation Procedures: The Provider will gather the children and the ready rovider will uring and after sheltering The Provider will gather the children and the ready rovider will will tindow(s)). The provider will text parent before, du SARE HOURS: The parties also acknowledge that, if a pop up visit which will be conducted virtually or in-person PROVIDER Tinted Name: Temera Boy &	Last Name Boyd lack will be transported to an evacuation the children, neiltering. to go bag taking them to the car secu- (2 doors, 0 wind to go bag taking them to the car secu- ining and and shere energy windge that all standards have been review approved, the home in which care is provid on.	(1 doors, 0 window(s)). The aring both children in their booster seat. The dow(s)). The provider will text parent before. ring both children in their booster seat. The (1 doors, 2 wed, and any corrections if needed have led is subject to random, unannounced

⊠Virtual Inspection □In-person Inspection		te Departme nild Care Sc INFOR NSPECTIC	holars	hip Prog	Iram	f Child	Return to: ccs.informalproviders@marylar
Inspection Date: 3/19/2024	Tii	me In: 1:30p	m	Time C	Dut: 3:00pn	n Res	
Follow Up Inspection Date: 3/	20/2024 Tir	me In: 1:30p	m		Dut: 2:00pm		ult: Follow Up Scheduled I Result: Passed
Informal Care				1	11	1.0.1	Augurt, Passed
Type of Care (check one):	Non-relative In	nformal Prov	ider Ca	re D	Relative I	nformal Pr	rovider Care
Provider Information		N.S. Sand	615910				ovider Care
First Name: Duprena Provider ID #:	Las	t Name: Boy	/d			Provi Email	der ID: 540230
Care Location Inspected	Card Card Card				1	Email	2
Street Address: Address Verified?: Yes		City			County		State Zip Code
Name of Children in Care (add	pages if needed)	Scholars	hip	Date of	Birth	Age	1 2
				5/19/2	023	10 mos.	/ Present (Y/N)
Safety of the Home				-			/ 1
Directions: Review and de Additional pages may be un Health and Safety Training:	etermine compliance sed for comments.	with each sta		Standard	Met Co	omments/N	n/a Not Applicable
		0	Y/N		Co	orrective A	ction /Timeframe if needed
Basic Health and Safety	COLORIS PER CALIFY	7	0	Y tandard	Not 0		
Home is free of health and safety	hazards:		1 3	Y/N	00	mments/N	otes ction /Timeframe if needed
 Is in good repair 				Y			in the state
 Is free of insect or rodent in 	nfestation			Y			
 Is well-lit and well-ventilate 	d			Y			
 Has hot and cold running w 	ater			Y			
 Has a working inside toilet 			1	Y			
 Has utilities for cooking, light 	ting and heating			Y			
 Has a working and safe heat 	ting system	A. S. S. S. S.		Y			
 Has a working refrigerator and 	nd stove			Y			
Has a working telephone				Y			
 Has operational smoke detection 	tor(s)			Y			
Has first aid kit/supplies	State State			Y			
 Has protective coverings on a accessible to children 	ny electrical outlet t	that is		Y	4 cove	rs added	
nful items are stored appropriate ren:	ly and away from			ard Met 7N		ints/Notes ive Action	Timeframe if needed
Sharp or pointed items				Y			
Medications of any kind			1	(
Matches, lighters and flammable	e products	Mar and a second	١	1			
Alcoholic beverages			Y		A door at	nd look wa	s added to the alcohol cabinet.
Guns			Y		Does not	own.	
Cleaning agents			Y				
Poisonous substances			Ŷ				
AL CLEANLINESS STANDARDS		the fill	tandar Y/N	d Met	Comment Corrective	e Action /	Timeframe if needed
s of the home are kept clean, includ	ding diapering area		Y				

i and solled diapore are discussed of in a		
Trash, garbage and wet and soiled diapers are disposed of in a	Y	Diaper Genie in the kitchen ar
sanitary mediately when s/he has a soiled or wet Child is changed immediately when s/he has a soiled or wet	Y	a hichen ar
ha procedules are renewed.	Y	
Diapering procedures are followed. Provider and child's hands Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease.	s Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	needed
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or weifare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
e provider immediately reports any suspected child abuse, lect or mistreatment by calling 911 and your <u>local</u> partment of Social Services Child Protective Services Unit.	Y	
ergency Ready-to-Go Pack The Emergency Ready-to-Go Pack must be available and easily accessible (including needed medications) and Emergency Documents.	in the event of an eme	ergency. This contains a Disaster Supply Kit
ster Supply Kit		
Directions: Review and determine that each item is adequately included in the contains enough supplies for each child in care. Also that the items are clean	he Disaster Supply Kit, organized, and usab	Be certain that the Disaster Supply Kit le. Comment and note below if needed.
Section Sectio		Selder or binder for EPP documents
Batteries Non-perishable food		Backpack(s) or carrying case(s)
⊠Portable First Aid Kit ⊠Diapers		Consider special toys or games
		Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash
☑ Thermometer ☑ Change of clothes		Bags
 ☑ Inermometer ☑ Change of clothes ☑ Medications ☑ Blanket(s) 		Bags

Location of Emergency Ready to go Pack:

Item Specification (if needed):

- Large tote
- 3 Single use rescue blankets.
- 2 bottled water
- Cereal, Tuna, Canned Sardines
- One pack of diapers
- Plastic sheeting, large black scissors and packing tape.
- 2 spare batteries

To be observed for compliance on 3/20/2024 :Observed

- Operational Smoke Detector
- Outlet Covers on top floor and 1st level and basement.
- Cleaning Products moved or locked away in the kitchen
- Cleaning products in the basement
- Alcohol on the shelf in the dining area
- Medication in drawer in Providers room
- Emergency Care and Medication Authorization form

Emergency Documents

Sinformal Provider Emergency Preparedness Plan (this completed form)

Authorization for emergency medical care

Planning and Maintenance

Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly:

First Name Duprena

Last Name Boyd

Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: Inner Room in the Basement Shelter In Place Procedures:

The Provider will gather the child and head to the Parent when secured. (1 door 0 windows). The Provider will contact the

Evacuation Procedures:

The Provider will take the tote to the car and then secure the child in the car seat within the vehicle. The Provider would drive to the (1 door 1 door). The Provider will contact the parent on the way to the evacuation location.

The Provider will take the tote to the car and then secure the child in the car seat within the vehicle. The Provider would drive to the and receive assistance on where to shelter upon arrival. The Provider will contact the parent on the way to the evacuation location.

CARE HOURS:

Circular C. D. .

Signatures & Date representation of the Peddry The Provider Wildon ad the barent of the way to the e

Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. The parties also acknowledge that, if approved, the home in which care is provided is subject to random, unannounced pop up visit which will be conducted virtually or in-person.

PROVIDER		INSPECTOR	12
Printed Name: Darena Bard	Printed Name:		
Sig	Signature:		-
Date: 3 22/2024 Phone:	Date: 3/20/2024	Phone: 1-877-227-0125	104

⊠Virtual Inspection □In-person Inspection	CI	te Department of Care hild Care Scholar INFORMAL INSPECTION C	ship Program CARE	Return ccs.inf	n to: Iormalp	providers@maryland.go	
Inspection Date: 10/04/2024	T	ime In: 2:00 PM	Time Out: 3:0	DO PM	Result: Folle	ow Up	Needed
Inspection Date: 10/04/2024 Inspection Date: 10/09/2024		Time In: 4:00 PM	Time Out: 4:1	Result: Passed			
	Time Out: 4:13 PM Result. Passed						
Informal Care			- SIDalai	the leform	al Provider	Caro	
Type of Care (check one):	□ Non-relative	Informal Provider (Care SRelat	live informa	Il Provider	Care	
Provider Information		10	inter ID:	50106	0		
First Name: Kimberly Provider ID #:				-	rovider ID: mail: d	50126	
Care Location Inspected							
Street Address: Address Verified?: Yes	City		County: F		State:		Zip Code:
Name of Children in Care (a	dd pages if needed)	Scholarship	Date of Birth	Age	9 /	Prese	ent (Y/N)
	a p-a-		8/29/2022	2 year	s old/ N		
Safety of the Home							
Directions: Review and Additional pages may t	d determine complia be used for commen	nce with each stand ts.	dard. Note any com Y – Yes, N – No, Standard Met	, D – Discu	ents/Notes	- Not A	Applicable
Health and Safety Training:			Y/N	Correc	Corrective Action /Timeframe if needed		
Basic Health and Safe	ety Training Compl	eted?	Y				
Home is free of health and sa	afety hazards:	-	Standard Met Y/N	Comme	Comments/Notes Corrective Action /Timeframe if needed		
Is in good repair			Y				
Is free of insect or rod	lent infestation		Y				
Is well-lit and well-ven	ntilated		Y				
 Has hot and cold runn 			Y				
 Has a working inside to 	toilet		Y				
 Has utilities for cookin 		ing	Y				
Has a working and sat			Y				
 Has a working refriger 			Y				
Has a working telepho			Ŷ				
Has operational smoke			Y				
Has first aid kit/supplie		- dist that is	Y				
Has protective coverin accessible to children			Y				
Harmful items are stored appr children:		ly from	Standard Met Y/N	Corrective	A DE CONTRACTOR DE LA CONTRACTÓRIA	mefran	ne if needed
Sharp or pointed items			Y				
Medications of any kind			Y				
Matches, lighters and fl Alcobolic beverages	ammable products		Y				-
Alcoholic beverages Guns			Y				
Guns Cleaning agents			Y				
Poisonous substances			Y				
and the second second second second	and the second of the			Comments	Alatas		
SENERAL CLEANLINESS STA		ering area.				nefram	e if needed
	April 1. Constant of 1	Ang and a	Y				

Page 1 of 3

Trash, garbage and wet and solled diapers are dis sanitary manner,	posed of in a Y	
Child is changed immediately when s/he has a soi diaper, clothing or bedding.	led or wet Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider a washed thoroughly with soap and warm running washed thoroughly with soap and warm running washed thoroughly with soap and warm running washed thoroughly with soap and warm running; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent disease. 	the spread of	
CHILD ABUSE, NEGLECT AND MISTREATMEN	T STANDARDS Standard Me Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, inclu Physical injury Any sexual abuse Mental injury	uding: Y	
 A child in care is not subjected to any form of n including: The failure to give proper care and attention including leaving a child unattended under that indicate that the child's health or welfar placed at substantial risk of harm; Mental injury to a child, or a substantial risk injury that is caused by the failure to give prattention to a child. 	on to a child circumstances are is harmed or Y k of mental	
 A child in care is not subjected to mistreatment, Any deliberate act that hurts a child physical emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful child's mouth Requiring a child to stand on one foot as puter the second seco	items in a nishment	
The provider immediately reports any suspected in neglect or mistreatment by calling 911 and your Department of Social Services Child Protectiv Unit.	local	
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be availa (including needed medications) and Emergency D	able and easily accessible in the even occuments.	t of an emergency. This contains a Disaster Supply Kit
Disaster Supply Kit		
Directions: Review and determine that each item contains enough supplies for each child in care. Al	is adequately included in the Disaster so that the items are clean, organized	Supply Kit. Be certain that the Disaster Supply Kit d, and usable. Comment and note below if needed.
⊠Flashlight	Bottled water	Section 2012 Folder or binder for EPP documents
⊠Batteries	⊠Non-perishable food	Backpack(s) or carrying case(s)
⊠Portable First Aid Kit	Diapers	Consider special toys or games
⊠Thermometer 5	☑Change of clothes	Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags
-Medications- N/A	Rianket(s)	Days

□Medications- N/A ⊠Blanket(s)
Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Yes

	able and easily accessible in the	event of an emergency	
Location of Emergency Ready to go	Pack: By the front door		
	and the second		
Item Specification (if needed):			
To be observed for compliance on	0/09/2024:		
Door knob safety locks			
Outlet covers Baby gate			
Daby gate			
Emergency Documents			
Informal Provider Emergency	Preparedness Plan (this compl	eted form)	
Authorization for emergency	medical care		
Planning and Maintenance			
Person responsible for updating the D	saster Supply Kit and the Emer	gency Documents reg	jularly:
First Name	Last Name		
Terri Description of how the Emergency Re	Owens		40
The Provider will gather the ready to g will <u>call and text</u> parent before, during Evacuation Procedures:	and after sheltering.		
The Provider will gather the ready to g will <u>call and text</u> parent before, during <u>Evacuation Procedures:</u> The Provider will gather the child and t provider the provider will The Provider will gather the child and t provider <u>the provider will call a</u>	and after sheltering. he ready to go bag <u>, taking ther</u> call and text parent before, du	iring and after sheltering to the car securing	the child in a rear facing car seat. The
The Provider will gather the ready to g will <u>call and text</u> parent before, during <u>Evacuation Procedures:</u> The Provider will gather the child and to provider the provider will The Provider will gather the child and to provider the child and to provider the child and to provider the provider will <u>call a</u>	and after sheltering. he ready to go bag <u>, taking ther</u> call and text parent before, du he ready to go bag <u>, taking ther</u>	iring and after sheltering to the car securing	the child in a rear facing car seat. The ng.
provider f The provider will The Provider will gather the child and t provider	and after sheltering. he ready to go bag <u>, taking ther</u> call and text parent before, du he ready to go bag <u>, taking ther</u>	iring and after sheltering to the car securing	the child in a rear facing car seat. The ng.
The Provider will gather the ready to g will <u>call and text</u> parent before, during <u>Evacuation Procedures:</u> The Provider will gather the child and to provider the provider will The Provider will gather the child and to provider the provider will <u>call a</u> <u>CARE HOURS</u> : <u>Signatures & Date</u> Acknowledgement: By signing below the peen discussed. The parties also acknow	and after sheltering. he ready to go bag <u>, taking ther</u> <u>call and text</u> parent before, du he ready to go bag <u>, taking ther</u> <u>nd text</u> parent before, during ar parties acknowledge that all stand ledge that, if approved, the home	and after shelten	the child in a rear facing car seat. The ng. the child in a rear facing car seat. The red, and any corrections if needed have
The Provider will gather the ready to g will <u>call and text</u> parent before, during Evacuation Procedures: The Provider will gather the child and to provider the provider will The Provider will gather the child and to provider the provider will <u>call a</u> CARE HOURS: 	and after sheltering. he ready to go bag <u>, taking ther</u> <u>call and text</u> parent before, du he ready to go bag <u>, taking ther</u> <u>nd text</u> parent before, during ar parties acknowledge that all stand ledge that, if approved, the home ally or in-person.	and after shelten	the child in a rear facing car seat. The ng. the child in a rear facing car seat. The red, and any corrections if needed have
The Provider will gather the ready to g will <u>call and text</u> parent before, during Evacuation Procedures: The Provider will gather the child and to provider The provider will The Provider will gather the child and to provider The provider will <u>call a</u> CARE HOURS: Signatures & Date Acknowledgement: By signing below the peen discussed. The parties also acknow top up visit which will be conducted virtus PROVIDER	and after sheltering. he ready to go bag <u>, taking ther</u> <u>call and text</u> parent before, du he ready to go bag <u>, taking ther</u> <u>nd text</u> parent before, during ar <u>parties acknowledge that all stand</u> ledge that, if approved, the home ally or in-person.	and after shelten	the child in a rear facing car seat. The ng. the child in a rear facing car seat. The red, and any corrections if needed have ed is subject to random, unannounced
The Provider will gather the ready to g will <u>call and text</u> parent before, during <u>Evacuation Procedures:</u> The Provider will gather the child and the provider the provider will gather the child and the provider the provider will <u>call and the</u> provider the provider will <u>call and the</u> <u>CARE HOURS</u> : <u></u>	and after sheltering. he ready to go bag <u>, taking ther</u> <u>call and text</u> parent before, du he ready to go bag <u>, taking ther</u> <u>nd text</u> parent before, during ar parties acknowledge that all stand ledge that, if approved, the home ally or in-person.	and after shelten an to the car securing and after sheltening.	the child in a rear facing car seat. The ng. the child in a rear facing car seat. The red, and any corrections if needed have ed is subject to random, unannounced
The Provider will gather the ready to g will <u>call and text</u> parent before, during Evacuation Procedures: The Provider will gather the child and to provider the provider will gather the child and to provider the provider will <u>call a</u> The provider will <u>call a</u> CARE HOURS: 	and after sheltering. he ready to go bag <u>, taking ther</u> <u>call and text</u> parent before, du he ready to go bag <u>, taking ther</u> <u>nd text</u> parent before, during ar parties acknowledge that all stand ledge that, if approved, the home ally or in-person.	and after shelten n to the car securing nd after sheltering. dards have been review in which care is provide Printed Name:	ng. the child in a rear facing car seat. The red, and any corrections if needed have ed is subject to random, unannounced

⊠Virtual Inspection □In-person Inspection	Chil	Department of Ed Care Id Care Scholarsh INFORMAL C ISPECTION CH	Return to: ccs.informalproviders@maryland.gov				
Inspection Date: 6/25/2024	n Date: 6/25/2024 Time In: 10.30am				Dam Result Passed		
Informal Care							
Type of Care (check one):	Non-relative In	nformal Provider C	are SRelative	Informal	Provide	er Care	
Provider Information							
First Name: Chrystal Last Name: Boykins Provider ID #:				Pro		D: 510722	
Care Location Inspected							
Street Address Address Verified?: Yes	<u>City</u> :	County			State	<u>e</u> .	Zip Code:
Name of Children in Care (a	dd pages if needed)	Scholarship	Date of Birth	Age	1	Present	(Y/N)
			5/18/2022	2/Yes			
			11/22/2019-	4/Yes			
Coloby of the h							
Safety of the Home							de d
Directions. Review an Additional pages may	d determine complian	nce with each stand	Y - Yes, N - No,	D - Discu	ssed,	n/a - Not Ap	plicable
Health and Safety Training:			Standard Met Y/N	Comme	ents/No	otes	ame if needed
Basic Health and Sa	fety Training Comple	eted?	Y				
Home is free of health and s			Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed			ame if needed
Is in good repair			Y				
Is free of insect or ro	dent infestation		Y				
Is well-lit and well-ve	ntilated		Y				
 Has hot and cold run 	ning water		Y	-			
 Has a working inside 			Y	-			
 Has utilities for cooking 	and the second se	ting	Y	-			
Has a working and sa			Y	-			
 Has a working refrige 			Y	-			
Has a working teleph			Y	-			
Has operational smol			Y	-			
Has first aid kit/suppli			Ť				
 Has protective coveri accessible to children 		I outlet that is	Y				
larmful items are stored app hildren:	propriately and awa	ay from	Standard Met Y/N	Comme			me if needed
Sharp or pointed item	S		Y				
 Medications of any king 	nd		Y				
Matches, lighters and flammable products			Y				
Alcoholic beverages			Y				
Guns			Y				
Cleaning agents			Y	-		-	
Poisonous substance	s		Y				
ENERAL CLEANLINESS ST	ANDARDS		Standard Met Y/N	Comme Correct			me if needed
Il areas of the home are kept	clean, including dia	pering area.	Y				

Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> <u>Department of Social Services Child Protective Services Unit</u> .	Y	
Emergency Ready-to-Go Pack		-
The Emergency Ready-to-Go Pack must be available and easily ac (including needed medications) and Emergency Documents.	cessible in the even	t of an emergency. This contains a Disaster Supply

 Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also that the items are clean, organized, and usable. Comment and note below if needed.

 Image: State in the items are clean, organized, and usable. Comment and note below if needed.

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 Image: State in the items are clean, orga

 ■ Medications N/A
 ⊠ Blanket(s)

 Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)?
 Yes

Emergency Ready-to-Go Pack is available and east	sily accessible in the event of an emergency (Y/N)? Yes
Location of Emergency Ready to go Pack: In th	ne living room
Item Specification (if needed):	
To be observed for compliance on :	
Emergency Documents	
⊠Informal Provider Emergency Preparedn	less Plan (this completed form)
Authorization for emergency medical car	e
Planning and Maintenance	
Person responsible for updating the Disaster Sup	ply Kit and the Emergency Documents regularly:
First Name Chrystal	Last Name Boykins
youngest, grabbing the oldest child and carrying t and seal the windows and doors. The Provider wo Evacuation Procedures: The Provider would pick up the youngest child an The Provider would secure the youngest child in t drive to windows. The Provider would update the parent a The Provider would pick up the youngest child an The Provider would secure the youngest child in t	Pack will be transported to an evacuation location: form them of the emergency. She will then count the children before picking up the the emergency bag in the transport of the local state of the emergency is over. And the emergency back and hold the hand of the oldest child while walking to the vehicle their rear facing car seat while the oldest would be in her car seat. The Provider would after they are secured and after the emergency is over. And the emergency back and hold the hand of the oldest child while walking to the vehicle their rear facing car seat while the oldest would be in her car seat. The Provider would the emergency back and hold the hand of the oldest child while walking to the vehicle their rear facing car seat while the oldest would be in her booster seat. The Provider of the emergency back and hold the hand of the oldest child while walking to the vehicle their rear facing car seat while the oldest would be in her booster seat. The Provider before and sate while the oldest would be in her booster seat. The Provider before and sate while the oldest would be in her booster seat. The Provider before and sate while the oldest would be in her booster seat. The Provider before and sate while the oldest would be in her booster seat. The Provider before and sate while the oldest would be in her booster seat. The Provider before and sate while the vehicle and after the emergency is over.
Signatures & Date	
Acknowledgement: By signing below the parties ackr been discussed. The parties also acknowledge that, pop up visit which will be conducted virtually or in-pe	nowledge that all standards have been reviewed, and any corrections if needed have if approved, the home in which care is provided is subject to random, unannounced rson.
PROVIDER	INSPECTOR
Printed Name Chrustal Bouk	Printed Name:
Signature	Signature

2024

Phone:

Date:

6125

Date: 6/25/2024

Phone: 1-877-227-0125

SVirtual Inspection In-person Inspection	C	Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST					
Inspection Date: 04/04/2023	Tir	me In: 3:30PM	Time Out: 4:34	IPM Result	PASSED		
Informal Care							
Type of Care (check one)	Non-relative I	nformal Provider C	are ⊠Relativ	e Informal Prov	vider Care		
Provider Information							
First Name: Chrystal Last Name: Boykin:			5	Provide	er ID <u>510722</u>		
Care Location Inspected	Contraction of the local	AN AN AVAILABLE		Linai			
Street Address Address Verified? Yes.	C	County	Stat	e Zip Cod	le		
Name of Children in Care	(heheed if second he	Scholarship	Date of Birth	Age /	Present (Y/N)		
	Tana hadas u uconed)			10mos. / Y			
			(00/10/2022)	101105.71			
Safety of the Home	and the second		23.5				
Directions. Review and deter pages may be used for comm					s needed. Additional , n/a – Not Applicable		
Health and Safety Training	:		Standard Met Y/N	Comments/I Corrective A	Notes Action /Timeframe if needed		
Basic Health and Safety Tra	ining Completed?		Y	Relative Informal Care – Certificate Submi			
Home is free of health and	safety hazards:		Standard Met Y/N	Comments/ Corrective /	Notes Action /Timeframe if needed		
Is in good repair	Is in good repair		Y		All areas were clean		
Is free of insect or rodent infestation			Y		No evidence of infestation		
Is well-lit and well-v	entilated		Y		were turned on and natural window lighting		
Has hot and cold ru	nning water		Y	Tested by provider and steam observed o camera			
 Has a working insid 	e toilet		Y	Flus	hed by provider and observed		
Has utilities for cook	ting, lighting and heat	ing	Y				
Has a working and s	safe heating system		Y		tat tested by provider for cooling & heating		
 Has a working refrig 	erator and stove		Y		ted by provider and observed		
 Has a working telep 			Y	Outbou	nd call made to provider's phone		
Has operational smo	oke detector(s)		Y		ted by provider and observed		
 Has first aid kit/supp 			Y	First aid kit stored in upstairs in providers be			
 Has protective cover accessible to childre 	rings on any electrica n	l outlet that is	Y	All outlets were occupied or covered			
larmful items are stored ap hildren:	propriately and awa	ly from	Standard Met Y/N	Corrective Ac	Comments/Notes Corrective Action /Timeframe if needed		
Sharp or pointed iter	ns	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Y	Stored in storage bag in high kitchen cabine			
 Medications of any k 	ind		Y	Stored	on high shelf in kitchen pantry		
 Matches, lighters and 	d flammable products	1 martine	Y		Does not own		
Alcoholic beverages			Y		Does not own		
• Guns			Y		Does not own		
Cleaning agents			Y	All cleaning a	igents stored under kitchen with lock		
Poisonous substance	95		Y		Does not own		
ENERAL CLEANLINESS S	TANDARDS	all the second	Standard Met Y/N	Comments/No	otes tion /Timeframe if needed		

All areas of the home are kept clean, including dispering area.	Y	Dispering area in playroom room and provide room
Trash, garbage and wet and soited diapers are disposed of in a sanitary manner.	Y	Diapers are thrown away daily in garage tran bin
Child is changed immediately when sine has a solled or wet diaper, clothing or bedding.	¥	
Diapering procedures are followed.	¥	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting, Diapering, Before food preparation and eating, After playing outdoors, and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met	Comments Notes
A child is not subject to any form of abuse, including.	YIN	Corrective Action /Timeframe if needed
 Physical injury 	~	
Any sexual abuse Mental initial	Y	
Mental injury A child in care is not subjected to any form of neglect,		
 Including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	
Emergency Ready-to-Go Pack		Star for the start
The Emergency Ready-to-Go Pack must be available and easily accessible i needed medications) and Emergency Documents.	n the event of an en	nergency. This contains a Disester Supply Kit (including
Disaster Supply Kit		
Directions: Review and determine that each item is adequately included in the enough supplies for each child in care. Also the items are clean, organized, a	ne Disaster Supply K Ind usable Commen	It. Be certain that the Disaster Supply Kit contains It and note below if needed.
Flashlight Bottled water		SFolder or binder for EPP documents
Batteries for Flashlight	e food	EBackpack(s) or carrying case(s)
Portable First Aid Kit Diapers		ElConsider special toys or games
	thes	El Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash
Thermometer Schange of clo		bana
Thermometer Medications (N/A) Blanket(s)		bags

Item Specification (if neede		Stored in living room closet near exit	
: 1 duffle bag (carrying o	case), 3 canned food	s, 2 bottled waters, 3 flashlights, 1 flashligh	t, 1 pk of AA batteries, 1 first aid kit, no
spec. meds, 3 diapers/	1 pk of wipes, 1 large	e blanket, folder w/ EPP and ECMA, 1 toy, 1	roll of duct tape, 3 heavy duty trash bags
1 outfit (top/bottom) an Items to be reviewed on xx	the set of		
Emergency Documents	a Station		
⊠Informal Provider En	nergency Preparedne	ess Plan (this completed form)	
Authorization for em			
Planning and Maintenance	SPACE SHOLL	A STATE OF STATE OF STATE	
Person responsible for updat	ing the Disaster Supp	ply Kit and the Emergency Documents regula	ariy:
First Name Chrystal		Last Name Boykins	
Description of how the Emerg	ency Ready-to-Go P	Pack will be transported to an evacuation loca	ation: carried by the provider.
Shelter in Place Procedure			
provider and child will head to	o t	ergency bag, provider will ensure all doors a n (1 door 3 windows), where the provider will all the parent and 911 if needed.	nd windows are locked in the home. The use sealing plastic and tape to secure all
provider and child will head to areas if needed. Once secure Primary: The provider will ac facing car seat. Then drive to	count for the child an	(1 door 3 windows), where the provider will	use sealing plastic and tape to secure all will ensure the child is secured in her real on entry they would enter into the master
provider and child will head to areas if needed. Once secure Primary: The provider will ac facing car seat. Then drive to bedroom (1 door 2 windows) Alternate: If they could not a would secure the child in her	the provider will ca count for the child an The provider would access the primary lo rear-facing car seat. der and child would s	h (1 door 3 windows), where the provider will all the parent and 911 if needed. Ind ERTG and carry them to her vehicle. She he provider has key access into the home, up call the parent before, during and after the en incation, the provider will gather the child and	will ensure the child is secured in her real on entry they would enter into the master mergency. ERTG and carry them into her vehicle. Sh
provider and child will head to areas if needed. Once secure Primary: The provider will ac facing car seat. Then drive to bedroom (1 door 2 windows) Alternate: If they could not a would secure the child in her access. Upon entry the provi	the provider will ca count for the child an The provider would access the primary lo rear-facing car seat. der and child would s	n (1 door 3 windows), where the provider will all the parent and 911 if needed. Ind ERTG and carry them to her vehicle. She he provider has key access into the home, up call the parent before, during and after the en recation, the provider will gather the child and They would head to the	will ensure the child is secured in her real on entry they would enter into the master mergency. ERTG and carry them into her vehicle. Sh
provider and child will head to areas if needed. Once secure Primary: The provider will ac facing car seat. Then drive to bedroom (1 door 2 windows) Alternate: If they could not a would secure the child in her access. Upon entry the provi beginning and end of the em Signatures & Date Acknowledgement: By signing been discussed. The parties	the provider will can be the provider will can be count for the child an The The provider would access the primary lo rear-facing car seat. der and child would s ergency.	h (1 door 3 windows), where the provider will all the parent and 911 if needed. Ind ERTG and carry them to her vehicle. She he provider has key access into the home, up call the parent before, during and after the er recation, the provider will gather the child and They would head to the shelter in the living room (1 door 3 windows).	will ensure the child is secured in her real on entry they would enter into the master mergency. ERTG and carry them into her vehicle. Sh and would enter with provider's ke The provider will call the parent at the ewed, and any corrections if needed have
provider and child will head to areas if needed. Once secure Primary: The provider will ac facing car seat. Then drive to bedroom (1 door 2 windows) Alternate: If they could not a would secure the child in her access. Upon entry the provi beginning and end of the em Signatures & Date Acknowledgement: By signing been discussed. The parties pop up visit which will be con	the provider will can be the provider will can be count for the child an The The provider would access the primary lo rear-facing car seat. der and child would s ergency.	h (1 door 3 windows), where the provider will all the parent and 911 if needed. Ind ERTG and carry them to her vehicle. She he provider has key access into the home, up call the parent before, during and after the er recation, the provider will gather the child and They would head to the shelter in the living room (1 door 3 windows).	will ensure the child is secured in her real on entry they would enter into the master mergency. ERTG and carry them into her vehicle. Sh and would enter with provider's ke The provider will call the parent at the ewed, and any corrections if needed have
provider and child will head to areas if needed. Once secure Primary: The provider will ac facing car seat. Then drive to bedroom (1 door 2 windows) Alternate: If they could not a would secure the child in her access. Upon entry the provi- beginning and end of the em Signatures & Date Acknowledgement: By signing been discussed. The parties pop up visit which will be com	the provider will can be the provider will can be count for the child ar The provider would access the primary lo rear-facing car seat. der and child would s ergency. If below the parties ac also acknowledge tha ducted virtually or in-p	h (1 door 3 windows), where the provider will all the parent and 911 if needed. Ind ERTG and carry them to her vehicle. She he provider has key access into the home, up call the parent before, during and after the er recation, the provider will gather the child and They would head to the shelter in the living room (1 door 3 windows).	will ensure the child is secured in her real on entry they would enter into the master mergency. ERTG and carry them into her vehicle. St and would enter with provider's ke The provider will call the parent at the ewed, and any corrections if needed have vided is subject to random, unannounced
provider and child will head to areas if needed. Once secure Primary: The provider will ac facing car seat. Then drive to bedroom (1 door 2 windows) Alternate: If they could not a would secure the child in her access. Upon entry the provi- beginning and end of the em Signatures & Date Acknowledgement: By signing been discussed. The parties is pop up visit which will be con	ad the provider will ca ecount for the child an The provider would access the primary lo rear-facing car seat. der and child would s ergency. g below the parties ac also acknowledge tha ducted virtually or in-p ROVIDER	h (1 door 3 windows), where the provider will all the parent and 911 if needed. Ind ERTG and carry them to her vehicle. She he provider has key access into the home, up call the parent before, during and after the er recation, the provider will gather the child and They would head to the shelter in the living room (1 door 3 windows).	will ensure the child is secured in her rea on entry they would enter into the master mergency. ERTG and carry them into her vehicle. St and would enter with provider's ke The provider will call the parent at the ewed, and any corrections if needed have vided is subject to random, unannounced
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⊠Virtual Inspection □In-person Inspection	Child	epartment of Ec Care Care Scholarsh INFORMAL C PECTION CHE	ARE	Child	Return to: ccs.informalpro	oviders@maryland.gov
Inspection Date: 8/01/2024	Time	In: 3:31pm	Time Out: 4:11pm	Re:	sult: Passed	
Informal Care						
Type of Care (check one):	Non-relative Info	rmal Provider C	are ⊠Relative	Informal	Provider Care	
Provider Information	and the second					
First Name: Donna Provider ID #	Last	Name: Brewer			ovider ID: 55464	4
Care Location Inspected				En	nail	
Street Address: 1020 Upnor Re Address Verified?: Yes	d <u>City</u> : Baltimo	re <u>County</u>	: Baltimore City	-	State: MD	Zip Code: 21212
Name of Children in Care (ad	d pages if needed)	Scholarship	Date of Birth	Age	/ Pres	sent (Y/N)
			3/20/2022		s old / N	
		-		,		
Safety of the Home						
Directions: Review and Additional pages may b	determine compliance e used for comments.	with each stand	ard. Note any comm Y - Yes, N - No, I	ents or co D – Discu	orrective actions issed, n/a - No	needed. t Applicable
Health and Safety Training:	1		Standard Met Y/N		ents/Notes tive Action /Tir	neframe if needed
Basic Health and Safe	ety Training Complete	d?	Y			
lome is free of health and sa	fety hazards:		Standard Met Y/N		ents/Notes ctive Action /Tim	neframe if needed
Is in good repair	Contraction of the second		Y			
Is free of insect or rod	ent infestation		Y			
Is well-lit and well-ven	tilated		Y			
Has hot and cold runn	ing water	and the second second	Y			
Has a working inside t	toilet		Y			
Has utilities for cookin	g, lighting and heating	g	Y	1		
Has a working and sat	fe heating system		Y	-		
Has a working refriger	ator and stove		Y			
Has a working telepho	one		Y	1		
Has operational smoke	e detector(s)		Y			
Has first aid kit/supplie			Y			
Has protective coverin accessible to children	igs on any electrical o	outlet that is	Y			
larmful items are stored app hildren:	ropriately and away	from	Standard Met Y/N		ents/Notes tive Action /Tir	neframe if needed
Sharp or pointed items	5		Y			
Medications of any kin	d		Y		Jan .	
Matches, lighters and	flammable products		Y			
Alcoholic beverages			Y			
Guns		Ser of the second	Y			
Cleaning agents		1000	Y			and the second s
Poisonous substances	5		Y	-		and the second s
ENERAL CLEANLINESS ST	and the second s		Standard Met Y/N		ents/Notes tive Action /Tir	neframe if needed
Il areas of the home are kept of	clean, including diape	ring area.	Y			
		5	11/21	-		
		Y	1124			

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Trash, garbage and wet and soiled diapers are dis sanitary manner.	sposed of in a	Y	
Child is changed immediately when s/he has a so diaper, clothing or bedding.	iled or wet	Y	
Diapering procedures are followed.		Y	
 Handwashing procedures are followed. Provider washed thoroughly with soap and warm running w Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to preven disease. 	vater after:	Y	
CHILD ABUSE, NEGLECT AND MISTREATMEN	T STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, inc	luding:		
Physical injury Any convert abuse		Y	
Any sexual abuse Mental injury			
 A child in care is not subjected to any form of ncluding: The failure to give proper care and attent including leaving a child unattended under that indicate that the child's health or well placed at substantial risk of harm; Mental injury to a child, or a substantial rinjury that is caused by the failure to give attention to a child. 	tion to a child er circumstances fare is harmed or isk of mental	Y	
A child in care is not subjected to mistreatment		the state of the state	Contrast of Section 2. Section 2.
 Any deliberate act that hurts a child physical action of the second secon	sically or		
emotionally, including: • Spanking, Biting, Hitting, Shaking		10	A la strain and a strain of the strain of the
Any other means of physical discipline		The second se	a second the second phile and a final second of
 Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing 		Y	
 Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distastef child's mouth Requiring a child to stand on one foot as Tying child to a cot or other equipment 			
Typing child to a cot of other equipment The provider immediately reports any suspected	ed child abuse.		11
neglect or mistreatment by calling 911 and yo Department of Social Services Child Prote Unit.	our local	Y	
Emergency Ready-to-Go Pack		Le Ste	and the second
		ccessible in the even	nt of an emergency. This contains a Disaster Supply Kit
Disaster Supply Kit			
Directions: Review and determine that each in contains enough supplies for each child in car	tem is adequately inc re. Also that the items	luded in the Disaste are clean, organize	er Supply Kit. Be certain that the Disaster Supply Kit ad, and usable. Comment and note below if needed.
⊠Flashlight	Bottled water		Sector of binder for EPP documents
⊠Batteries	⊠Non-perishab	le food	Backpack(s) or carrying case(s)
Portable First Aid Kit	Diapers		⊠Consider special toys or games
	The second second		Heavy Duty Scissors, Duct Tape/
⊠Thermometer	Change of clo	othes	Packing Tape & Sealing Plastic/ Trash Bags
Medications	⊠Blanket(s)		
Items in the Disaster Supply Kit are clean, organiz	ed, and usable (Y/N	I)? Yes	
		P	5// 0
MSDE		Page 2 of 3	7/1/24

Carlos and a story water

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Location of Employment Parks	ly accessible in the event of an emergency (Y/N)? Yes	
Location of Emergency Ready to go Pack: Near	the front door	
Item Specification (if needed): •		
To be observed for compliance on :		
Emergency Documents		
☑ Informal Provider Emergency Preparedne ☑ Authorization for emergency medical care	ss Plan (this completed form)	
Planning and Maintenance		
Person responsible for updating the Disaster Supp	y Kit and the Emergency Documents regularly:	
First Name Donna	ast Name Brewer	
Description of how the Emergency Ready-to-Go P Shelter In Place Procedures:	ck will be transported to an evacuation location:	
The Provider will gather the child, the emergency to the sentence of the the the the sentence of the the the the sentence of the	ag and head	ise the
The Provider will gather the child, the emergency be and drive to the parent remains up The Provider will ensure that the parent remains up The Provider will gather the child, the emergency be	ag and head out to the car where the provider will secure the child in their car	w(s)). seat
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Page 3 of 3

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Sevietual Im Cito-person	ection repection	Maryland Stat	te Departer Child Car INI INSPE	Scholars FORMAL CTION CH	acation/Office of C hip Program CARE HECKLIST		
Inspection 0	sta: 05/04/2022	1000	Time in: 1:	:45PM	Time Out: 2:35P	M Resu	R: PASSED If returned by SPM on 4/2022
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Informal	tare						- Mar Care
Type of Car	(check one):	D Non-relation	ve informal	Provider C	are Ensiative	Informal Pr	ovider Care
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Provider ID			-	-		-	
	in Inspected	City	Concession of	Court	-	State:	Zip Code: Million
Street Address Ve	Fiel? Yes	-9	-				
Name of Ci	idren in Care (a	add pages if needs	od) Sci	holarship	Date of Birth	Age	/ Present (Y/N)
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1-7

	1	Y	Other than medications and cleaning solutions
	Puisenous substances	Standard Mot	Connective Action (Timpleares 2 needed
-	ERAL CLEANLINESS STANDARDS	Y/N	
1.0	reas of the home are kept clean, including dispering area.	Y	and the second second second
-	h, garbage and wet and solied diapers are disposed of in a	Y	Contraction of the
101	ary manual immediately when she has a solled or well	Y	Come State State
1.00	er, ciolhing or begang	۷	
	Invasiting procedures are followed. Provider and other's narros not thoroughly with soap and warm numing water after: Tolleting: Dispering: Before food preparation and eating: After playing outdoors; and At other times when necessary to prevent the spread of	Y	
-	D ABUSE, NEGLECT AND INSTREATMENT STANDARDS	Standard Met	Comments/Notes Corrective Action /Timetrame if needed
0	lid is not subject to any form of abuse, including: Physical injury Any sexual abuse Montal injury	Y	
D	 Itid in care is not subjected to any form of neglect, ding: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	10000	
10	ild in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitling, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with scap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment. Tying child to a cot or other equipment	¥	
	provider immediately reports any suspected child abuse, oct or mistreatment by calling 911 and your local intment of Social Services Child Protective Services Unit.	Y	
-			
-	ergency Ready-to-Go Pack	a in the stand of an	semiscourses. This contains a Disaster Seands Kit lincks
10	mergency Ready-to-Go Pack must be available and easily accession of medicontors) and Emergency Documents.	a transferrets of diff	Territor and a comment of the line
5	ster Supply Kit	and the second	
	ions: Review and determine that each item is adequately included a In supplies for each child in care. Also the kems are clean, organized	the Disaster Supp 1, and usable. Com	ity Kit. Be certain that the Disaster Supply Kit contains ment and note below if needed.
-	SFlashlight SBottled wat		SFolder or binder for EPP docum
	BBatteries for Flashlight DSNon-perish	able food	SIBackpack(s) or carrying case(s
	EPostable First Aid Kit DiDiapers N/	A	SConsider special toys or game
D	OCC Informal Care Inspection Checklist	Page 2 of 3	a Revised 1

	Thermometer	SChange of the	09963	201 leave Duty Scissors, duct toper packing tope & souling plastic/cash bags
	Inteckations MA	Diffiantet(s)		No. of Concession, Name
Res	The Discourse County K2 are chain, org.	enseed, and usuable (1778	Y 107	
Len	and the first is multiply and	d easily accessible in th	to event of an emergency	CAUNIT A
Les	tion of The Emergency Ready to so P	nà: Hallway by honor	ment states	
Rett	Specification (I nonded).	ment, secon,		
1 p4	pants, top, underwar, 2 blevilats,			
214	the cans of Chef Boyardee, 4 peach cu	ps, 2 16oz, bottles of v	water	
Rec	to review on xalkalizata if needed: 1	WA		
-	ency Documents	-	and the second second	Contraction of the local division of the loc
	Sinformal Provider Emergency Prepa	redness Plan (this con	(molt bare)	
	SAuthorization for emergency modica	i care		
_	ng and Maintenance	A STATISTICS	C. C	
100 March 100	responsible for updating the Disaster	and the second se	wergency Documents reg	ularly:
R.S.L.	arre	Last Name		and the second second second
-	and the second s		and the second se	the second s
itab icab	been of how the Emergency Ready to <u>r In Place Procedure:</u> In emergency bag that is at the top of howder will call the parent once they a ation Procedures:	the stars, get	down to the base	ocation: ment bathroom that has no windows and one
telli irab oor. vac	r In Place Procedure: In emergency bag that is at the top of howder will call the parent once they a <u>etion Procedures:</u> and the emergency bag and other booster seat and secure her in ation. If they could not go to the school	the stairs, get are secure in the shell of walk or drive the vehicle before driv I the Alternatic location	down to the base	
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⊠Virtual Inspection □In-person Inspection	Maryland S	Child	d Care Schola INFORMAL SPECTION C		of Child Care	Return to: ccs.informalproviders@marylane ov
Inspection Date: 07/06/2023		Time	In: 2:30PM	Time Out: 3:38	3PM Result	PASSED
Informal Care						
Type of Care (check one):	Non-rela	tive Info	rmal Provider C	are ⊠Relativ	ve Informal Prov	ider Care
Provider Information						
First Name: Jacqueline Provider ID #:		Last N	lame: Brookir	Ig	Provide Email:	r ID: <u>518292</u>
Care Location Inspected					Eman.	
Street Address: Address Verified? Yes.			City:	County:	State	Zip Code:
Name of Children in Care	(add pages if need	ded)	Scholarship	Date of Birth	Age /	Present (Y/N)
				(09/09/2014)	8yr. / N	
				(09/13/2017)	5yr. / Y	
				(09/15/2018)	4yr. / N	
			1	(09/22/2019)	3yr. / N	
				(08/31/2020)	2yr. / N	
				(0000 //2020)	-,	
Health and Safety Training	-		- 9	Standard Met Y/N		tes ion /Timeframe if needed mal Care – Certificate Submitted
Basic Health and Safety Tra				Standard Met	Comments/No	tes
Home is free of health and	i safety hazards	:		Y/N Y		tion /Timeframe if needed
 Is in good repair 				Y		All areas were clean
 Is free of insect or r 				Y		re turned on and natural window
 Is well-lit and well-vell 				Y	Tested by	lighting provider and steam observed on
 Has hot and cold rule 	nning water			Y		camera ed by provider and observed
 Has a working inside 	e toilet	lind		Y	- Adding	d by provider and observed
Has utilities for cook				Y	Thermosta	t tested by provider for cooling &
Has a working and s	afe heating syste	m		Y	neaung -	- utility bill previously submitted ed by provider and observed
Has a working refrige				Y	Outbound call	made by informal team to provider's
 Has a working teleph 	oné			Y		phone ed by provider and observed
				Y	First aid k	it stored on top of kitchen cabinet
 Has operational smok 				Y		outlets covered or occupied
 Has operational smok Has first aid kit/supplie 	05	N/LAI		Standard Met	Comments/No	
 Has first aid kit/supplie Has protective coverin 	ngs on any electr	way fro	m		Correction	Ales
 Has first aid kit/supplie Has protective covering 	ngs on any electr	way fro	m	Y/N Y	Stored in h	tion /Timeframe if needed igh level kitchen cabinet with knife
 Has first aid kit/supplie Has protective coverin accessible to children rmful items are stored appril Idren: 	ropriately and a	way fro	m	Y/N	Stored in h	tion /Timeframe if needed igh level kitchen cabinet with knife coverings
Has first aid kit/supplie Has protective coverin accessible to children mful items are stored appr Idren:	ropriately and a	way fro	m	Y/N Y	Stored in h	tion /Timeframe if needed igh level kitchen cabinet with knife

Sector Sector

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Ill areas of the home are kept clean, including diapering area. irash, garbage and wet and soiled diapers are disposed of in a anitary manner. child is changed immediately when s/he has a soiled or wet iaper, clothing or bedding. child is changed immediately when s/he has a soiled or wet iaper, clothing or bedding. child period procedures are followed. Adandwashing procedures are followed. Adandwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: • Toileting; • Diapering; • Before food preparation and eating; • After playing outdoors; and • At other times when necessary to prevent the spread of disease. CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS Child is not subject to any form of abuse, including: • Physical injury • Any sexual abuse • Mental injury • A child in care is not subjected to any form of neglect.	Y Y Standard Met Y/N Y Y Y Y Y Standard Met	Does not own Cleaning products stored on two high shelves in laundry room Does not own Comments/Notes Corrective Action /Timeframe if needed Diapering area organized in play pen carrier Diapering supplies near changing pad in parent's bedroom
 Poisonous substances Poisonous substances ENERAL CLEANLINESS STANDARDS If areas of the home are kept clean, including diapering area. rash, garbage and wet and soiled diapers are disposed of in a anitary manner. thild is changed immediately when s/he has a soiled or wet iaper, clothing or bedding. biapering procedures are followed. Inandwashing procedures are followed. Provider and child's hands ashed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. Child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury A child in care is not subjected to any form of neglect. 	Y Standard Met Y/N Y Y Y Y Y Standard Met	laundry room Does not own Comments/Notes Corrective Action /Timeframe if needed Diapering area organized in play pen carrier Diapering supplies near changing pad in
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Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner. Image: Second Se	Y Y Y Y Standard Met	Diapering supplies near changing pad in
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 Including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily accessible in th needed medications) and Emergency Documents.	he event of an en	nergency. This contains a Disaster Supply Kit (includin
Disaster Supply Kit		
Directions: Review and determine that each item is adequately included in the D enough supplies for each child in care. Also the items are clean, organized, and	Disaster Supply H usable. Comme	Kit. Be certain that the Disaster Supply Kit contains nt and note below if needed.
SFlashlight South		

MSDE OCC Informal Care Inspection Checklist

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Revised 10/2021

	⊠Diapers (N/A)	Consider special toys or games
⊠ Thermometer	⊠Change of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash
Medications	⊠Blanket(s)	bags
Items in the Disaster Supply Kit are clean.	Draanized and workle (VAU2 - V	
Emergency Ready-to-Go Pack is available	and easily accessible in the event of an emerge	
Location of The Emergency Ready to go Item Specification (if needed): 1 flashlight, 1 pk of AA batteries, 1	<u>o Pack</u> : Stored by front door near exit first aid kit, 1 thermometer, no spec meds (g l wipes, 5 outfits (top/bottom), 2 blankets, 4 to ECMA per child	en. cough medicine incl.), 6 bottled waters, 6 oys, 1 pair of scissors, 1 roll of duct tape, 1 pk of
mergency Documents		
Sinformal Provider Emergency Provider	paredness Plan (this completed form)	
Authorization for emergency med	ical care	
Planning and Maintenance	incol care	
	ter Cuesta Mita a ta a	
First Name	ter Supply Kit and the Emergency Documents	regularly:
Jacqueline	Brooking	
Description of how the Emergency Ready	-to-Go Pack will be transported to an evacuati	on location: carried by the provider.
Shelter In Place Procedure: The provider will gather the children and I		
wheels to secure all children together. The	ey will walk down the steps to the provider's ve	n wagon, the provider will use the hand-holding chicle, the provider secure each child in their
appropriate seating (oldest in car seat be youngest children in rear-facing car seats	It, 2 nd oldest in booster seat, middle child in formation of the seat and the seat of th	ward-facing car seat/booster seat, and 2 on arrival the provider has key access for entry, secured the provider will call and text the parent
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⊠Virtual Inspection □In-person Inspection	Child	Department of Ed Care d Care Scholarsh INFORMAL C SPECTION CHE	ARE	Chlld	Return ccs inf	n to: iormalproviders@maryland.gov
Inspection Date: 4/17/2024	Tim	ne In 1 52pm	Time Out: 3 10pi	m Re	sult: Pas	sed
Informal Care						
Type of Care (check one)	□ Non-relative In	formal Provider Ca	are ⊠Relative	Informal	Provider	Care
Provider Information						
First Name: Amperita	1.25	t Name: Brookins		Pro	vider ID	485685
Provider ID #		I Name. Drookins		Em	ail:	
Care Location Inspected				-		
Street Address Address Verified? Yes	City	County			State	Zip Code
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	1	Present (Y/N)
			12/24/2018	5 /N		
			11/10/2020	3 /N		
		-	1/18/2023	1 /N		
		-	2/4/2022	2 /N		
				1.		
Health and Safety Training:	be used for comments		Standard Mot Y/N	Comme	nts/Not	a – Not Applicable os on /Timeframe if needed
Basic Health and Sa	afety Training Comple	ted?	Y			
Home is free of health and	safety hazards:		Standard Met Y/N		ive Action	es on /Timeframe if needed
Is in good repair			Y			
Is free of insect or ro			Y	-		
 Is well-lit and well-vell 			Y			
	nning water					
Has hot and cold run						
Has a working inside	e toilet		Y			
 Has a working inside Has utilities for cook 	e toilet king, lighting and heati	ng	Y Y			
 Has a working inside Has utilities for cook Has a working and s 	e toilet king, lighting and heati safe heating system	ng	Y			
 Has a working inside Has utilities for cook Has a working and s Has a working refrig 	e toilet king, lighting and heati safe heating system jerator and stove	ing	Y Y Y			
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Page 1 of 3

	Y/N	Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Directions: Review and determine that each ite contains enough supplies for each child in care	m is adequately included in the Disaster Supply Kit. B Also that the items are clean, organized, and usable	Comment and note below if needed.
⊠ Flashlight	Bottled water	SFolder or binder for EPP documents
⊠Batteries	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
Portable First Aid Kit	⊠Diapers	⊠Consider special toys or games
⊠Thermometer	⊠Change of clothes	 Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags
E OCC Informal Care Inspection Checklist 2020-03-26	Page 2 of 3	

Items in the Disaster Supply Kit are clean, organized, and waster	
Items in the Disaster Supply Kit are clean, organized, and usable	(Y/N)? YES
Emergency Ready-to-Go Pack is available and easily accessible	in the event of an emergency (Y/N)? YES
Location of Emergency Ready to go Pack; KEPT IN CLOSET	ON THE EIRST EL COD
Item Specification (if needed):	ON THE FIRST FLOOR
LARGE DUFFLE BAG	
SCISSORS, DUCT TAPE AND SEALING PLASTIC	
. 1 EXTRA LARGE FLEEGE BLANKET	
CHEF BOYARDEE	
WATERS DIAPERS AND WIPES	
TOY CONTROLER AND OTHER TOYS.	
To be observed for compliance on	
•	
mergency Documents	
☑ Informal Provider Emergency Preparedness Plan (this ☑ Authorization for any	completed form)
Authorization for emergency medical care	
erson responsible for updating the Disaster Supply Kit and the irst Name Amperita	Emergency Documents regularly:
Last Name Br	
escription of how the Emergency Ready-to-Go Pack will be tra	
ne Provider will gather the older two children, carry the younge (1 door(s) 0 window(s)). The provid	er two children and the ERTG bag. <u>She</u> will der will contact the parent <u>after they are secured.</u>
vacuation Procedures:	
be Provider will get an i	
"9 to the call, the Provider will secure the child(ren) in their	hild and hold the second youngest child's hand and carry the emergency
efore relocating to	rear facing, forward facing and car seat belts and contact the parent where she will shelter in
efore relocating to	rear facing, forward facing and car seat belts and contact the parent
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⊠Virtual Inspection □In-person Inspection	Chil	Maryland State Department of Education/Office of Ch Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST			Return to: ccs.informalproviders@maryland.g ov
Inspection Date: 04/17/2023	Time	In: 9:30AM	Time Out: 10:46	SAM Result	PASSED
Informal Care					
Type of Care (check one):	Non-relative Info	ormal Provider C	are ⊠Relative	e Informal Pro	vider Care
Provider Information					
First Name : Amperita Provider ID #:	First Name: Amperita Last Name: Brookins		S	Provid Email:	er ID: <u>485685</u>
Care Location Inspected				Latrical.	
Street Address: Address Verified? Yes.	City:	County:	State Zip	Code:	
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
			(08/23/2010)	12yr. / N	
			(02/04/2022)	1yr. / Y	
			(12/24/2018)	4yr. / N	
			(11/10/2010)	2yr. / N	
			L		
Safety of the Home					
Directions: Review and determ pages may be used for comme		ch standard. Note			ns needed. Additional d, n/a – Not Applicable
Health and Safety Training:			Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed
Basic Health and Safety Train	ning Completed?		Y	Relative In	nformal Care - Certificate Submitted
Home is free of health and	safety hazards:		Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed
 Is in good repair 			Y		All areas were clean
 Is free of insect or ro 	odent infestation		Y		No evidence of infestation
Is well-lit and well-ve			Y		s were turned on and natural window lighting
 Has hot and cold run 	nning water		Y	Tested by provider and steam observed or camera	
 Has a working inside 	e toilet		Y	Flushed by provider and observed	
 Has utilities for cook 	ing, lighting and heatin	9	Y		
Has a working and s	afe heating system		Y	Thermostat tested by provider for coolin heating	
 Has a working refrig 	erator and stove		Y	Те	sted by provider and observed
 Has a working telept 	hone		Y	Outbo	und call made to provider's phone
 Has operational smoother 			Y	Те	sted by provider and observed
 Has first aid kit/supp 			Y	First aid kit stored in basket in living roc	
Has protective cover accessible to childre	rings on any electrical o n	outlet that is	Y	A	Il outlets covered or occupied
Harmful items are stored ap children:	ppropriately and away	from	Standard Met Y/N	Comments/I Corrective A	Notes Action /Timeframe if needed
 Sharp or pointed iter 			Y		
 Medications of any k 			Y	Stor	ed in high cabinet in bathroom
	d flammable products		Y		Does not own
Alcoholic beverages	······································		Y		Does not own
Guns			Y		ored in garage will move high
Cleaning agents			Y	All sto	red in locked cabinets or closets
Poisonous substances		Y		Outside in the shed	

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	Diaper supplies stored in basket in living room
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Thrown away daily as needed
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Υ	Diaper supplies stored in basket in living room
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also the items are clean, organized, and usable. Comment and note below if needed.

⊠ Flashlight	Bottled water	Section 2018 Folder or binder for EPP documents
凶Batteries for Flashlight	⊠Non-perishable food	図Backpack(s) or c arrying case(s)
図Portable First Aid Kit	⊠Diapers	⊠Consider special toys or games
⊠Thermometer	図Change of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
Medications	⊠Blanket(s)	

have in the Director Ormala Kitaan daar			
Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y			
Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y			
Location of The Emergency Ready to go Pack:	Location of The Emergency Ready to go Pack: Closet near exit door		
Item Specification (if needed):			
- 1 large blanket, 1 first aid kit, sippy cup for			
diapers/1pk of wipes, 4 canned foods, 1 bal pair of scissors, folder w/ EPP and ECMA fo			of trash bags, 4 outfits (top/bottom), 1
pair of scissors, forder w/ EPP and ECMA in	brea. Child, 5 toys,	and I DOOK	
the market has an element of a state for the former			
Items to be reviewed on xx/xx/xxxx:			
Emergency Documents			
⊠Informal Provider Emergency Preparedne	ss Plan (this comp	leted form)	
Authorization for emergency medical care		,	
Planning and Maintenance			
Person responsible for updating the Disaster Supp	w Kit and the Emer	zanov Documente regularly:	
	ast Name	gency Documents regularly.	
	Brookins		
Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: carried by the provider.			carried by the provider.
Shelter In Place Procedure:	_		
The provider will gather the children and grab the I			oor 0 windows) and seal the door with
the sealing plastic and tape if needed. The provide location.	r will contact each	parent by call, text or email aft	ter everyone is secured in the
location.			
Evacuation Location(s) Procedures:			
Primary: The provider will account for the children	and ERTG and he	ad to her vehicle with the child	Iren. She would secure the baby in
the rear-facing car seat, two toddler children in the			
the parents while they are in the car to the evacuat	ion location,	The	provider has key access, upon entry
the provider and children will shelter in the living room (1 door 2 windows). Once they are secured the provider will contact the parents by call, text or email.			
Uall, IEAL UL ETHAIL.			
Alternate: If they could not access the primary loo			
The provider will secure the baby in the rear-facing			
car seat belt. She will call the parents once they ar will call for home access. Upon e			the provider ving room (1 door 1 window). The
provider call or text each parent until the emergence	y has ended.	,	
Signatures & Date			
Acknowledgement: By signing below the parties ack	nowlodgo that all a	tandarda hava haan raviowad	and any corrections if peeded have
been discussed. The parties also acknowledge that pop up visit which will be conducted virtually or in-p	, if approved, the h		
PROVIDER		IN	SPECTOR
Printed Name:			
Amperita M. Brookin	5	Printed Name:	
Signeture		Signature:	
Date: 4-17-23 Phone:		Date: 04/17/2023	Phone: 1-877-227-0125
(11/4)2			

Maryland Sta	tion Child Care Scholarship Program		Return to: ccs.informalproviders	@maryland.gov		
Inspection Date: 05/11/2022		Time In: 3:30 PI	1 Time Out: 4:47 PM	Result: PASSED if su document correction 05/12/2022.		
Informal Care						
Type of Care (check one):	Nor	n-relative Informa	Provider Care		Provider Care	
Provider Information				1		
First Name: Amporita Provider ID #:		Last Name: Bro	okins	Provider ID: 485685		
				Email:		
Care Location Inspected						
Street Address: Address Verified? Yes .	(City	County	State	Zip Code	
Name of Children in Care (add page	is if needed)	Scholarship	Date of Birth	Age	/ Present	t (Y/N)
			(08/23/2010)	11yr.	/ N	
			(02/04/2022)	2 mos.	/ N	
			(12/24/2018)	3yr.	/ N	
			(11/10/2020)	1yr.	/ N	
				1		
				1		
	******		*****	-		
Safety of the Home						
Directions: Review and determine compl	liance with eac	h standard. Note a	y comments or correctiv	ve actions needed. Addition	onal pages	
may be used for comments. Y -	- Yes, N – No,	D – Discussed, n/	a – Not Applicable			
Health and Safety Training:			Standard Met Y/N	Comments/Notes Corrective Action /Time	eframe if needed	
Basic Health and Safety Training Co	mpleted?		Y		nformal Care	
Home is free of health and safety	hazards:		Standard Met Y/N	Comments/Notes Corrective Action /Tim	eframe if needed	
 Is in good repair 			Y	Home was very of	clean and organized	d
 Is free of insect or rodent infe 	station	n sa manana kanana kanana kanan k	Y			
 Is well-lit and well-ventilated 			Y			
 Has hot and cold running wate 	er		Y	Steam observed and	shower test by pro	vider
 Has a working inside toilet 			Y	Observed pro	ovider flush toilet	
 Has utilities for cooking, lighting 	ng and heatir	ıg	Y			
 Has a working and safe heating 	ng system		Y	Observed and	tested by provider	
 Has a working refrigerator and 	d stove		Y			
 Has a working telephone 	*******		Y	Only working cel	lphones, no landlin	e
 Has operational smoke detect 	tor(s)		Y	Tested both smoke (detectors on both le	evels
Has operational shoke detector(s) Has first aid kit/supplies						
 Has instalu kivsupplies 			Y	Stored in storage	bin on the lower lev	vel

Harmful items are stored appropriately and away from children:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 Sharp or pointed items 	Y	In kitchen cabinet with lock
 Medications of any kind 	Y	Stored in high level cabinet in the bathroom
 Matches, lighters, and flammable products 	Y	Lighters in kitchen cabinet with locks
Alcoholic beverages	Y	Does not have any at this time, if they did the beer would be stored in the fridge
• Guns	Y	Does not own
Cleaning agents	Y	Stored under kitchen and bathroom sink with locks
 Poisonous substances 	Y	Stored in the shed and not in the home
GENERAL CLEANLINESS STANDARDS	Standard Met	Comments/Notes

	Y/N	Corrective Action /Timoframe if needed
N areas of the home are kept clean, including diapering area.	Y	Neatly organized in children's room
rash, garbage, and wet and solled diapers are disposed of in sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet liaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
landwashing procedures are followed. Provider and child's		<u></u>
ands washed thoroughly with soap and warm ronning water ifter: • Toileting;		
 Diapering; 	Y	
 Before food preparation and eating; 		* -
 After playing outdoors; and 		}
 At other times when necessary to prevent the spread of 		*
disease.	···· = · · ·· ·	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including:		
Physical injury Any second share	Y	
Any sexual abuse Montel initial		
Mental Injury		
A child in care is not subjected to any form of neglect. neluding:		}
 The failure to give proper care and attention to a child 		ł
including leaving a child unattended under circumstances that indicate that the child's health or	Ŷ	
welfare is harmed or placed at substantial risk of harm; • Mental injury to a child, or a substantial risk of mental		
injury that is caused by the failure to give proper care		
and attention to a child.		
A child in care is not subjected to mistreatment, including:		1
 Any deliberate act that hurts a child physically or emotionally, including; 		
 Spanking, Biting, Hitting, Shaking 		
 Any other means of physical discipline 		1
 Not attending to a child's physical needs 		1
 Shouting, Carsing, Shaming, Ridicaling 	Y	
 Washing a child's mouth with soap 		1
 Putting pepper or other spicy or distasteful items in a 		
child's mouth		
 Requiring a child to stand on one foot as punishment 		}
 Tying child to a cot or other equipment 		1
he provider immediately reports any suspected child buse, neglect or mistreatment by calling 231 and		
e dagti en el composition de la composition de	Y	
· · · · ·		
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily access including needed medications) and Emergency Documents.	ble in the event of an em-	argency. This contains a Disaster Supply Kit
Disaster Supply Kit		
Sroctions: Review and determine that each item is adequately includer ontains enough supplies for each child in care. Also, the items are dea	Lin the Disaster Supply Ki n. organized, and osable.	t. Be certain that the Disaster Supply Kit Comment and note below if needed.
s Floshight	× Bottled water	Exercise Section Sect
x Batteries for Flashlight	Interstation In	Backpack(s) or carrying case(s)
Portable First Aid Kit	food	
	3.Dtapers 3.Change of	
<u>x</u> Thermometer	dothes	Theavy Duty Seissors, duct tape/ packing tape & seating plastic/trash bags
«Medications (N/A)	∦Blanke!(s)	
Items in the Disaster Supply Kit are clean, organized, and usable (Y/N		
Emergency Ready-to-Go Pack is available and easily accessible in the	event of an emergency (₩N? Yes, hallway closet near exit.
mergency Documents		
☑ Informal Provider Emergency Preparednoss Plan (this c	ompleted form)	

ID	48	5	6	8	5
- 2	10	-	~		

Amperita	Brookins			
Description of how the Emergency Ready-to-Go Pack will be tre	nsported to an evacuation location:			
Item Specification (if needed):				
1 first aid kit, 5 bottled water, 3 canned foods, 1 baby formula w/ bottle, diapers w/ wipes for 2mos & 1yr old, 1 thermometer, no medications for any of the children, 1 flashlight, 3 extra AA batteries, 1 outfit per child (4 total), 1 pair of heavy-duty scissors, duct tape and sealing plastic (trash bags), 3 toys and 1 book, binder with EPP & ECMA forms for all children.				
Shelter-in-Place Procedure:				
Provider will go into the after gathering the they are sheltered in place, she would contact the parents by ce	e children and the grabbing emergency bag, (1 door 0 windows). Once ellphone via call and text.			
Evacuation Location Procedures Primary: Provider will grab the emergency to-go bag and the children, once in the vehicle she will secure three small children in their car seats and the 11 yr. in her seatbelt, the secure of in location she will contact the parent by call or text. Iving room (1 door 2 windows), after secured in location she will contact the parent by call or text. Alternate: Provider will grab the emergency bag and all children, secure in car seats and seat belts, will proceed to the second location the other the parent by call or text once they are settled into the location. Will contact the parent via call or text once they are settled into the location.				

Signatures & Date						
Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. The parties also acknowledge that, if approved, the home in which care is provided is subject to random, unannounced pop-up visit which will be conducted virtually or in-person.						
PROVIDER	R	INSPECTOR				
Printed Name: Amporita Br	rookins	Printed Name				
		Signature:				
Date: Phone	:	Date: 05/11/202	22	Phone: 1-877-227-0125		
5-11-22						

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Revised 10/2021

⊠Virtual Inspection □In-person Inspection	Maryland S	Child	d Care Scholar INFORMAL	CARE	Child Care	Return to: ccs.informalproviders@maryland.g ov
Inspection Date: 09/12/2023 Time In: 9:30AM Follow-up Inspection Date: 09/13/2023 Time In: 10:15AM						t: Follow-up Required. Aup Result: PASSED
Informal Care						
Type of Care (check one):	Non-rel	ative Info	ormal Provider C	are Relative	Informal Pro	vider Care
Provider Information						
First Name: Linda Last Name: Brown Provider ID #:				Provid Email:	ler ID: <u>309053</u>	
Care Location Inspected			***			
Street Address: Address Verified? Yes.	City:		County:	State	Zip Code:	
Name of Children in Care	(add pages if nee	eded)	Scholarship	Date of Birth	Age	/ Present (Y/N)
				(09/23/2011)	11yr. / N	
				(12/25/2022)	9mos. / Y	
Safety of the Home			1	1, <u>/_</u>	1	
Health and Safety Trainin		42		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Basic Health and Safety Tra	aining Completee	d?		Y	Relative Informal Care – Certificate Submit	
Home is free of health and	d safety hazard	s:		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Is in good repair				Y		All areas were clean
 Is free of insect or 	rodent infestatio	n		Y		No evidence of infestation
Is well-lit and well-	ventilated			Y		s were turned on and natural window lighting
Has hot and cold r				Y		by provider and steam observed on camera
Has a working insi	the second s			Y	Flu	shed by provider and observed
Has utilities for coo Has a working and			9	Y Y	Thermo	estat tested by provider for cooling &
Has a working refr	icerator and stor	/e		Y	Te	heating ested by provider and observed
Has a working tele				Y		call made by informal team to provider phone
 Has operational sn 	noke detector(s)	6		Y	Te	sted by provider and observed
 Has first aid kit/sup 	oplies			Y		Aids and Alcohol in hallway closet
 Has protective cov accessible to child 		ectrical c	outlet that is	Y	A	Il outlets covered or occupied
Harmful items are stored a	appropriately a	nd away	from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Sharp or pointed it	ems			Y		nife holder on the back of the counter
Medications of any	kind			Y		p of provider's dresser and in basket o high shelf in the kitchen
 Matches, lighters a 	ind flammable pi	roducts		Y	Stored	on a high shelf in kitchen cabinet
 Alcoholic beverage 	es			Y	Stored	on a high shelf in kitchen cabinet
Guns			Y		Does not own	

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Cleaning agents	Y	Cleaning products stored on high shelves in bathroom, laundry and locked cabinet in kitcher
 Poisonous substances 	Y	Stored outside in the locked shed
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	Diapering area in living room
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Yes, thrown away outside daily
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	Yes changing area had a diaper bag, with al materials
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Ŷ	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	Y	
 including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily accessible in needed medications) and Emergency Documents.	n the event of an em	ergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit		
Directions: Review and determine that each item is adequately included in the mough supplies for each child in care. Also the items are clean, organized, a	e Disaster Supply Kind usable, Comment	t. Be certain that the Disaster Supply Kit contains t and note below if needed.
 ☑ Flashlight ☑ Batteries for Flashlight ☑ Non-perishable 		Seckpack(s) or carrying case(s)

Portable First Aid Kit

Page 2 of 3

Diapers

Revised 10/2021

Consider special toys or games

⊠Thermometer	⊠Change of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags				
Medications (N/A)	⊠Blanket(s)					
Items in the Disaster Supply Kit are clean, organi						
Emergency Ready-to-Go Pack is available and ex	asily accessible in the event o	of an emergency (Y/N)? Y				
Location of The Emergency Ready to go Pack Item Specification (if needed): 1 carrying case (tote bag), 1 flashlight, 2 e waters, 5 canned foods, 2 pks of baby foo scissors, 1 roll of duct tape, 1 blanket, 1 m <u>Items to be reviewed on 09/13/2023: Correc</u> <u>ERTG: ECMA docs per child</u>	extra AA batteries, 1 first aid d, 3 diapers, 1 pk of wipes, oll of heavy duty trash baos	t kit, 1 thermometer, no specific medications, 3 bottled 1 pk of wet wipes, 2 outfits (top/bottoms/socks), 1 pair of				
Emergency Documents						
⊠Informal Provider Emergency Preparedr	less Plan (this completed for	m)				
Authorization for emergency medical ca						
Planning and Maintenance						
Person responsible for updating the Disaster Sup	ply Kit and the Emergency I	Documents regularly:				
First Name	Last Name					
Description of how the Emergency Ready-to-Go	Brown Pack will be transported to a	n ounder la stime a stand				
Shelter In Place Procedure:	dor mil de transponeu to a	in evacuation location: carried by the provider.				
Sitelet in Prace Procedure: The provider will text or call the parent to inform her of the emergency. The provider will grab both children and the ERTG bag and head to the bathroom (1 door 1 window). The provider will use the sealing plastic and tape to secure the door, window, and vents if the need should arise. Evacuation Procedures Primary: The provider will text the parent to inform her of the emergency. The provider will account for the children and grab the ERTG, and head to the provider's vehicle. The provider will secure the oldest child in her seat belt and the younger child in her rear-facing car seat and drive to the provider will immediately text the parent before and after with emergency updates. Alternate: If they could not access the primary location, the provider's vehicle. The provider will secure the oldest child in her seat belt and the younger child in her rear-facing car seat and drive to the provider will text the parent to inform her of the emergency. The provider will account for the children and grab the ERTG, and head to the provider's vehicle. The provider will secure the oldest child in her seat belt account for the children and grab the ERTG, and head to the provider's vehicle. The provider will secure the oldest child in her seat belt and the younger child in her rear-facing car seat and drive to the provider's vehicle. The provider will secure the oldest child in her seat belt and the younger child in her seat and drive to the provider's vehicle. The provider will secure the oldest child in her seat belt and the younger child in her rear-facing car seat and drive to the provider's vehicle. The provider will secure the oldest child in her seat belt and the younger child in her rear-facing car seat and d						
Signatures & Date						
Acknowledgement: By signing below the parties ac	Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. The parties also acknowledge that if approved the borne in which care is any ideal in a standard been reviewed.					
PROVIDER		INSPECTOR				
Printed Name: inda Browl	Printed					
Signatur	Signatur	re:				
Date: 70 - 1- 2023 Phone	Date: 09	9/13/2023 Phone: 1-877-227-0125				

⊠Virtual Inspection □In-person Inspection					Return to: ccs.informalproviders@maryland.g ov
Inspection Date: 10/05/2022	Time	e In: 9:30AM	Time Out: 10:15	AM Result	Needs follow up
Follow up date: 10/06/2022			Time Out: 9:05A	AM Result	PASSED
Informal Care					
Type of Care (check one):	Non-relative Inf	ormal Provider C	are Relative	e Informal Pro	vider Care
Provider Information					
First Name: Linda Last Name: Brown Provider ID #:				Provid	er ID: 309053
				Email:	
Care Location Inspected					
Street Address: Address Verified? Yes	City:	County:		State	Zip Code:
Name of Children in Care (add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
			09/23/2011	11 / No-	At school
and a first his second seco		•		1	
Safety of the Home				1	
Directions: Review and deterr pages may be used for commo	ents.	ch standard. Note			d, n/a – Not Applicable
Health and Safety Training	•		Y/N		Action /Timeframe if needed
Basic Health and Safety Trai	ning Completed?		Y	Certificate	Submitted
Home is free of health and	safety hazards:		Standard Met Y/N	Comments Corrective	Notes Action /Timeframe if needed
 Is in good repair 			Y		
 Is free of insect or r 				Y No sign of infestation	
 Is well-lit and well-v 		····	Y		
 Has hot and cold ru 	and the second s		Y	Steam Obs	In the second
 Has a working insid 	and a graph operation of the section		Y	Flush obser	rved
	king, lighting and heatir	ng	Y		
	safe heating system		Y	Thermostat	dialed up
Has a working refrig	and a stand of the		Y Y		
 Has a working telep Has operational sm 	to the Advertise and the Advertise and the advertise of t		Y	Alarm soun	dad
 Has first aid kit/supp Has protective cover 	rings on any electrical	outlet that is	Y	Band aids,	alcohol pads, gauze, tape
accessible to childre	en		Y	1	
Harmful items are stored a children:		y from	Standard Met Y/N	Comments/ Corrective /	Notes Action /Timeframe if needed
 Sharp or pointed ite 	And a second s	·····	Y		
Medications of any	a second s		Y		
	nd flammable products		Y	Moved to hig	h cabinet
Alcoholic beverages	3		Y		
Guns			Y	None	
Cleaning agents	WINDER		Y	Locked or moved	
 Poisonous substances 			Y	Other than m	redications and cleaning solutions

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diaperin	ig area. Y	
Trash, garbage and wet and soiled diapers are dispose sanitary manner.	edofina Y	
Child is changed immediately when s/he has a soiled o diaper, clothing or bedding.	r wet Y	
Diapering procedures are followed.	Y	N/A
 Handwashing procedures are followed. Provider and c washed thoroughly with soap and warm running water Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the disease. 	after: Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT ST	ANDARDS Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, includin Physical injury Any sexual abuse Mental injury 	g: Y	
 including: The failure to give proper care and attention to including leaving a child unattended under circ that indicate that the child's health or welfare i placed at substantial risk of harm; Mental injury to a child, or a substantial risk of injury that is caused by the failure to give prop attention to a child. 	cumstances s harmed or Y mental	
 A child in care is not subjected to mistreatment, inc Any deliberate act that hurts a child physically emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful iter child's mouth Requiring a child to stand on one foot as punis Tying child to a cot or other equipment 	or Y ms in a	
The provider immediately reports any suspected ch neglect or mistreatment by calling 911 and your loc Department of Social Services Child Protective Services	al Y	
Emergency Ready-to-Go Pack	•	
The Emergency Ready-to-Go Pack must be available and eas needed medications) and Emergency Documents.	ily accessible in the event of an en	nergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit		
Directions: Review and determine that each item is adequate enough supplies for each child in care. Also the items are clea		
⊠Flashlight ⊠	Bottled water	Selder or binder for EPP document
⊠Batteries for Flashlight ⊠	Non-perishable food	Backpack(s) or carrying case(s)
	Diapers N/A	⊠Consider special toys or games

Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags

Thermometer

Medications N/A

Change of clothes

Blanket(s)

Items in the Disaster Supply Kit are clean, organized, and us	able (Y/N)? Y
Emergency Ready-to-Go Pack is available and easily access	sible in the event of an emergency (Y/N)? Y
Location of The Emergency Ready to go Pack: Behind the	he couch by the front door
Item Specification (if needed):	
1 shirts, 1 pants, 1 underwear	
2 extra DD batteries,	
Band aids, ointment, gauze, tape, alcohol wipes, gloves,	fr (k 1 k - 1)
3 16oz water bottles, 1 can tomato, cream chicken, corn and	ITUIE COCKEAN
Items to review on 10/06/2022 if needed: Observed10/06/	2022
Locks under sink	
Cleaning supplies in laundry room moved off floor to high she	əlf
Emergency Documents	
⊠Informal Provider Emergency Preparedness Plan (t	this completed form)
Authorization for emergency medical care	
Planning and Maintenance	·
Person responsible for updating the Disaster Supply Kit and	the Emergency Documents regularity
First Name Last Name	
Shelter In Place Procedure: The provider will call parent sectors , the ERTB and window. If the need should arise the provider will use plastic are secure.	d head to the bathroom in the basement which has one door and one and tape to seal the shelter. The provider will call the parent again once they
before driving to the primary evacuation location	g and proceed to the her vehicle where she will secure Concerned and the secure Once at the location, the provider will gain entry using a code or. If the need should arise, the provider will use plastic and tape to seal the e secure in the evacuation location.
to the alternate evacuation location The provider will gain en	d to the her vehicle where she will secure seatbelt before driving try using a spare key. They will shelter in the bathroom in the basement that provider will use plastic and tape to seal the shelter. The provider will call
Signatures & Date	
Acknowledgement: By signing below the parties acknowledge been discussed. The parties also acknowledge that, if approv pop up visit which will be conducted virtually or in-person.	e that all standards have been reviewed, and any corrections if needed have red, the home in which care is provided is subject to random, unannounced
PROVIDER	INSPECTOR
Drinted Name	
Linda M brown	Printed Name:

Signatu		Signature:	
Date: 10-6-22	Phone:4	Date: 10/06/2022	Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection		epartment of Ed ild Care Scholar INFORMAL NSPECTION C	f Child Care	Return to: ccs.informalproviders@maryland. ov		
Inspection Date: 09/14/2022 Time In: 3:30PM		In: 3:30PM	Time Out: 4:18	PM Result	Result: PASSED	
Informal Care		No. Contraction	1200 00 100			
Type of Care (check one):	Non-relative In	formal Provider C	are	e Informal Prov	vider Care	
Provider Information			Marshall Marshall	A ROAMS		
First Name: Shelemiah Last Name: Brow			n Provider ID: 494100 Email:			
Care Location Inspected	And the second second second	Street A street and a st				
Street Address: Address Verified? Yes	City:	Cou	unty:	Stat	e Zip Code:	
Name of Children in Care	(add pages if needed)	Scholarship	Date of Birth	Age	Present (Y/N)	
	(11/27/2018	3 / Yes		
				_		
	10 10 10 10 10 10 10 10 10 10 10 10 10 1					
44 N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
		To be loose the loose the	Shi California (Salahan)	No. of Contraction		
Safety of the Home					「「「「「「「」」、「「「」」、「」」、「」」、「」、「」、「」、「」、「」、」、「」、」、「」、」、「」、」、「」、」、「」、」、、、、、、	
Directions: Review and deter	mine compliance with ea	ach standard. Note	any comments or o	corrective actions	s needed. Additional	
pages may be used for comm	ients.		Y-Yes, N-No,	D - Discussed,	n/a – Not Applicable	
pages may be used for comm		A CONTRACTOR OF A DESCRIPTION OF		Comments/N	and the second	
Health and Safety Training	j:	A PARTY PARTY	Standard Met Y/N	Corrective A	ction /Timeframe if needed	
Participation of the second second second second			Y	Certificate Submitted		
Basic Health and Safety Tra	ining Completed?		Standard Met			
Home is free of health and	safety hazards:		Standard Met Y/N			
			Y	Controlation		
 Is in good repair 				NI		
 Is free of insect or r 			Y	No sign of infestation		
 Is well-lit and well-w 	entilated		Y			
 Has hot and cold rule 	nning water		Y	Steam observed		
 Has a working insid 				Olean observ	ved ·	
Has a working inside toilet Look under sink			Y	Oteam observ	ved ·	
				Electric stove		
Has utilities for cool	king, lighting and heating		Y		lit	
 Has utilities for cool Has a working and 	king, lighting and heatin safe heating system		Y Y Y	Electric stove	lit	
 Has utilities for cool Has a working and Has a working refrience 	king, lighting and heatir safe heating system gerator and stove		Y Y Y Y	Electric stove Thermostat tu	lit Irned down	
 Has utilities for cool Has a working and Has a working refri Has a working telep 	king, lighting and heatin safe heating system gerator and stove ohone		Y Y Y Y Y	Electric stove	lit Irned down	
 Has utilities for cool Has a working and Has a working refrience 	king, lighting and heatin safe heating system gerator and stove ohone		Y Y Y Y Y Y	Electric stove Thermostat tu Provider's cel	lit Irned down I called	
 Has utilities for cool Has a working and Has a working refri Has a working telep 	king, lighting and heatin safe heating system gerator and stove ohone noke detector(s)		Y Y Y Y Y	Electric stove Thermostat tu Provider's cel	lit Irned down I called Doxide, Tylenol, alcohol wipes, band	
 Has utilities for cool Has a working and Has a working refri Has a working telep Has operational sm Has first aid kit/sup 	king, lighting and heatin safe heating system gerator and stove ohone toke detector(s) oplies erings on any electrical	ng	Y Y Y Y Y Y	Electric stove Thermostat tu Provider's cel	lit Irned down I called Doxide, Tylenol, alcohol wipes, band	
Has utilities for coo Has a working and Has a working refri Has a working telep Has operational sm Has first aid kit/sup Has protective cove	king, lighting and heatin safe heating system gerator and stove ohone loke detector(s) plies erings on any electrical en	ng outlet that is	Y Y Y Y Y Y Y	Electric stove Thermostat tu Provider's cel Hydrogen per- aids, ointment	lit Irned down I called oxide, Tylenol, alcohol wipes, band	
Has utilities for cool Has a working and Has a working refri Has a working telep Has operational sm Has first aid kit/sup Has protective cove accessible to childr Harmful items are stored a children:	king, lighting and heating safe heating system gerator and stove obtone toke detector(s) oplies erings on any electrical en ppropriately and away	ng outlet that is	Y Y Y Y Y Y Standard Met	Electric stove Thermostat tu Provider's cel Hydrogen per- aids, ointment	lit irrned down I called oxide, Tylenol, alcohol wipes, band tes tion /Timeframe if needed	
Has utilities for cool Has a working and Has a working refri Has a working telep Has operational sm Has first aid kit/sup Has protective cove accessible to children Harmful items are stored a children: Sharp or pointed ite	king, lighting and heating safe heating system gerator and stove obnome noke detector(s) pilles erings on any electrical en ppropriately and away ms	ng outlet that is	Y Y Y Y Y Y Standard Met Y/N	Electric stove Thermostat tu Provider's cel Hydrogen per alds, ointment Comments/No Corrective Act	lit irrned down I called oxide, Tylenol, alcohol wipes, band tes tion /Timeframe if needed	
Has utilities for cool Has a working and Has a working refrig Has a working telep Has operational sm Has first aid kit/sup Has protective cov, accessible to childr Harmful items are stored a children: Sharp or pointed ite Medications of any b	king, lighting and heating safe heating system gerator and stove obhone noke detector(s) pplies erings on any electrical en ppropriately and away ms kind	ng outlet that is	Y Y Y Y Y Y Standard Met Y/N Y	Electric stove Thermostat tu Provider's cel Hydrogen per- alds, ointment Comments/No Corrective Act	lit irrned down I called oxide, Tylenol, alcohol wipes, band tes tion /Timeframe if needed	
Has utilities for cool Has a working and Has a working refri Has a working refri Has a working telep Has operational sm Has first aid kit/sup Has protective cov accessible to childr Harmful items are stored a children: Sharp or pointed ite Medications of any b Matches, lighters an	king, lighting and heating safe heating system gerator and stove obnome noke detector(s) pilles erings on any electrical en ppropriately and away ms	ng outlet that is	Y Y Y Y Y Y Standard Met Y/N Y Y	Electric stove Thermostat tu Provider's cell Hydrogen per- aids, ointment Comments/No Corrective Act Up on top of ca	lit irrned down I called oxide, Tylenol, alcohol wipes, band tes tion /Timeframe if needed	
Has utilities for cool Has a working and Has a working refrig Has a working telep Has operational sm Has first aid kit/sup Has protective cov, accessible to childr Harmful items are stored a children: Sharp or pointed ite Medications of any b	king, lighting and heating safe heating system gerator and stove obhone noke detector(s) pplies erings on any electrical en ppropriately and away ms kind	ng outlet that is	Y Y Y Y Y Y Standard Met Y/N Y Y Y Y	Electric stove Thermostat tu Provider's cell Hydrogen per- aids, ointment Comments/No Corrective Act Up on top of ca None None	lit irrned down I called oxide, Tylenol, alcohol wipes, band tes tion /Timeframe if needed	
Has utilities for cool Has a working and Has a working refri Has a working telep Has operational sm Has first aid kit/sup Has protective cov accessible to childr Harmful items are stored a children: Sharp or pointed ite Medications of any b Matches, lighters an	king, lighting and heating safe heating system gerator and stove obhone noke detector(s) pplies erings on any electrical en ppropriately and away ms kind	ng outlet that is	Y Y Y Y Y Y Standard Met Y/N Y Y	Electric stove Thermostat tu Provider's cell Hydrogen per- aids, ointment Comments/No Corrective Act Up on top of ca	lit irrned down I called oxide, Tylenol, alcohol wipes, band tes tion /Timeframe if needed	
Has utilities for cool Has a working and Has a working refri Has a working refri Has a working telep Has operational sm Has first aid kit/sup Has protective cove accessible to childr Harmful items are stored a children: Sharp or pointed ite Medications of any k Matches, lighters an Alcoholic beverages	king, lighting and heating safe heating system gerator and stove obhone noke detector(s) pplies erings on any electrical en ppropriately and away ms kind	ng outlet that is	Y Y Y Y Y Y Standard Met Y/N Y Y Y Y	Electric stove Thermostat tu Provider's cell Hydrogen per- aids, ointment Comments/No Corrective Act Up on top of ca None None	lit irrned down I called oxide, Tylenol, alcohol wipes, band tes tion /Timeframe if needed	

Revised 10/2021

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area	· Y	
Trash, garbage and wet and soiled diapers are disposed of in sanitary manner.	a y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's b washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDA	ARDS Standard Met	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a chi including leaving a child unattended under circumst that indicate that the child's health or welfare is harr placed at substantial risk of harm; Mental injury to a child, or a substantial risk of ment injury that is caused by the failure to give proper care attention to a child. 	ances med or Y tal re and	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in child's mouth Requiring a child to stand on one foot as punishme Tying child to a cot or other equipment 	Y en a en t	Υ
The provider immediately reports any suspected child al neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services		
Emergency Ready-to-Go Pack	A DAY SAFATATA	
The Emergency Ready-to-Go Pack must be available and easily an needed medications) and Emergency Documents.	ccessible in the event of an en	mergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit		
Directions: Review and determine that each item is adequately inc enough supplies for each child in care. Also the items are clean, or	cluded in the Disaster Supply ganized, and usable. Comme	Kit. Be certain that the Disaster Supply Kit contains ent and note below if needed.
	led water	⊠Folder or binder for EPP documents
	-perishable food	Backpack(s) or carrying case(s)
	bers N/A	Consider special loys or games
⊠ Thermometer ⊠ Cha	nge of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
MSDE OCC Informal Care Inspection Checklist	Page 2 of 3	Revised 10/2021

	et(s)	
ems in the Disaster Supply Kit are clean, organized, and usa		1
mergency Ready-to-Go Pack is available and easily accessi	ble in the event of an emergency (Y/N)? Y	
ocation of The Emergency Ready to go Pack: Hallway (Closet	
m Specification (if needed):		
nesie, Skirt, Shirt, Socks extra AA batteries, Spring time friends Book, magic ink pictu and aids, ointment, gauze, tape, alcohol wipes, Neosporin, g 16oz water bottles, 2 cans of corn, green beans, pink salmo	gloves,	
ems to review on xx/xx/xxxx if needed: N/A		
ergency Documents		和自有自然的分
☑ Informal Provider Emergency Preparedness Plan (t ☑ Authorization for emergency medical care	his completed form)	
anning and Maintenance		
Shelter In Place Procedure:	throom where there is one door and no windows. If the need shou	ld arise the
Shelter In Place Procedure: The provider will grab Giselle, the ERTB and head to the ba provider will use plastic and tape to seal the shelter. The pro Evacuation Procedures:	throom where there is one door and no windows. If the need shou ovider will call the parent once they are secure.	
provider will use plastic and tape to seal the shelter. The provider will Evacuation Procedures: The provider will and the ERTG	throom where there is one door and no windows. If the need shou ovider will call the parent once they are secure.	windows
Shelter In Place Procedure: The provider will grab Giselle, the ERTB and head to the ba provider will use plastic and tape to seal the shelter. The pro- <u>Evacuation Procedures:</u> The provider will and the ERTG and one door. The provider will call the parent on the way to If they couldn't shelter at the primary location, they will go to	throom where there is one door and no windows. If the need shou ovider will call the parent once they are secure. The has no v the evacuation location and once they are secure in the evacuation of the alternate evacuation location which is It call parent to let her know they are evacuating. The has to	windows
Shelter In Place Procedure: The provider will grab Giselle, the ERTB and head to the ba provider will use plastic and tape to seal the shelter. The provider will Evacuation Procedures: The provider will and the ERTG and one door. The provider will call the parent on the way to If they couldn't shelter at the primary location, they will go to about from the care location. The provider will	throom where there is one door and no windows. If the need shou ovider will call the parent once they are secure. The has no v the evacuation location and once they are secure in the evacuation of the alternate evacuation location which is It call parent to let her know they are evacuating. The has to	windows on location.
Shelter In Place Procedure: The provider will grab Giselle, the ERTB and head to the ba provider will use plastic and tape to seal the shelter. The provi- Evacuation Procedures: The provider will and the ERTG and one door. The provider will call the parent on the way to If they couldn't shelter at the primary location, they will go to about from the care location. The provider will doors and no windows. The provider will call the parent once Signatures & Date Acknowledgement: By signing below the parties acknowledge	throom where there is one door and no windows. If the need shou ovider will call the parent once they are secure. The has no v the evacuation location and once they are secure in the evacuation of the alternate evacuation location which is It call parent to let her know they are evacuating. The has to	windows on location. two sliding ded have
Shelter In Place Procedure: The provider will grab Giselle, the ERTB and head to the bap provider will use plastic and tape to seal the shelter. The provider will use plastic and tape to seal the shelter. The provider will use plastic and tape to seal the shelter. The provider will and one door. The provider will call the parent on the way to fit they couldn't shelter at the primary location, they will go to about from the care location. The provider will doors and no windows. The provider will call the parent on constraint of the parent on the way to be about from the care location. The provider will doors and no windows. The provider will call the parent oncomplete the parent on the way to be about from the care location. The provider will doors and no windows. The provider will call the parent oncomplete the parent on the way to be about from the care location will call the parent on the way to be about from the care location. The provider will doors and no windows. The provider will call the parent on the way to be about from the care location will call the parent on the way to be about from the care location. The provider will doors and no windows. The provider will call the parent on the way to be about from the care location will call the parent on the way to be about from the care location will call the parent on the way to be about from the care location.	throom where there is one door and no windows. If the need show ovider will call the parent once they are secure. The has no vote the evacuation location and once they are secure in the evacuation of the evacuation location which is It call parent to let her know they are evacuating. The has the e secure in the alternate evacuation location.	windows on location. two sliding ded have
Shelter In Place Procedure: The provider will grab Giselle, the ERTB and head to the bap provider will use plastic and tape to seal the shelter. The provider will use plastic and tape to seal the shelter. The provider will use plastic and tape to seal the shelter. The provider will call the provider will call the provider will call the parent on the way to about form the care location. The provider will doors and no windows. The provider will call the parent on constraint of the parent on constraint of the parent on the will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will call the parent on constraint of the provider will be constraint of the parent on constraint of the parent on the care location.	throom where there is one door and no windows. If the need show ovider will call the parent once they are secure. The has no voor the evacuation location and once they are secure in the evacuation of the evacuation location which is It call parent to let her know they are evacuating. The has to e secure in the alternate evacuation location. The has to have been reviewed, and any corrections if nee- tived, the home in which care is provided is subject to random, unanc	windows on location. two sliding ded have
Shelter In Place Procedure: The provider will grab Giselle, the ERTB and head to the bap provider will use plastic and tape to seal the shelter. The provider will use plastic and tape to seal the shelter. The provider will use plastic and tape to seal the shelter. The provider will grate the provider will call the parent on the way to the shout form the care location. The provider will doors and no windows. The provider will call the parent on constraint on the will doors and no windows. The provider will call the parent on constraint of the parent on the shout form the care location. The provider will doors and no windows. The provider will call the parent on constraint of the parent on the parent on the shout form the care location. The provider will doors and no windows. The provider will call the parent on constraint of the parent on the shout form the care location will call the parent on the shout form the care location. The provider will doors and no windows. The provider will call the parent on constraint of the parent on the shout form the care location of the parent on the shout form the care location. The provider will doors and no windows. The provider will call the parent on constraint of the parent on the shout form the care location of the parent on the shout form the care location of the parent on the shout form the care location.	throom where there is one door and no windows. If the need show ovider will call the parent once they are secure. The has no v to the evacuation location and once they are secure in the evacuation of the alternate evacuation location which is It call parent to let her know they are evacuating. The has to be secure in the alternate evacuation location. The has no v the alternate evacuation location which is the secure in the alternate evacuation location.	windows on location. two sliding ded have

⊠Virtual Inspection □In-person Inspection					Return to: ccs.informalproviders@maryland.g ov	
Inspection Date: 09/01/2023	Time	ln: 1:30PM	Time Out: 2:30PI	M Result	PASSED	
Informal Care						
Type of Care (check one):	Non-relative Info	rmal Provider C	are Relative	Informal Prov	vider Care	
Provider Information						
First Name: Shanisa Last Name: Brown Provider ID #:			Provider ID: <u>520456</u> Email:			
Care Location Inspected						
Street Address: Address Verified? Yes.	City:	County:	State	Zip Code:		
Name of Children in Care (add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)	
			(10/19/2022)	10mos. / Y	1	
Calabaratio				1		
Safety of the Home						
Directions: Review and detern pages may be used for comme	nine compliance with eac ents.	h standard. Note	e any comments or co Y – Yes, N – No, I	orrective actio D – Discusse	ns needed. Additional d, n/a – Not Applicable	
Health and Safety Training	:		Standard Met Y/N		Action /Timeframe if needed	
Basic Health and Safety Trai	ning Completed?		Y	Non-Re	elative Informal Care – Certificate Submitted	
Home is free of health and	safety hazards:		Standard Met Y/N	Comments Corrective	:/Notes Action /Timeframe if needed	
 Is in good repair 			Y		All areas were clean	
 Is free of insect or r 	odent infestation		Y	No evidence of infestation		
 Is well-lit and well-v 	entilated		Y		s were turned on and natural window lighting	
Has hot and cold ru			Y		provider and observed the ice melt in the clear glass	
 Has a working insid 			Y	Flu	ished by provider and observed	
 Has utilities for cool 	king, lighting and heatin	g	Y			
Has a working and	safe heating system		Y	Thermo	estat tested by provider for cooling & heating	
 Has a working refrig 	gerator and stove		Y		ested by provider and observed	
 Has a working telep 	phone		Y	Outbound	call made by informal team to provider's phone	
 Has operational sm 	oke detector(s)		Y	-	ested by provider and observed	
Has first aid kit/sup	plies		Y	Alcohol a	and Band-Aids , Gauze and Gloves in hallway closet	
 Has protective cover accessible to children 	erings on any electrical o en	outlet that is	Y	All d	outlets were covered or occupied	
Harmful items are stored a children:	ppropriately and away	/ from	Standard Met Y/N	Comments/ Corrective	Notes Action /Timeframe if needed	
 Sharp or pointed ite 	ems		Y	Stored	in knife holder on back of counter	
 Medications of any 	kind		Y	St	tored in high cabinet in kitchen	
 Matches, lighters ar 	nd flammable products		Y		Stored on top of the fridge	
 Alcoholic beverages 	S		Y		Does not own	
• Guns			Y		Does not own	
 Cleaning agents 			Y	Mov	ved to high shelf in hallway closet	
Poisonous substances			Y		Does not own	

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
All areas of the home are kept clean, including diapering area.	Y		
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Trash thrown away daily via kitchen trash	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y		
Diapering procedures are followed.	Y	Diapers and wipes near changing area	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y		
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y		
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y		
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y		
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y		

Emergency Ready-to-Go Pack

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also the items are clean, organized, and usable. Comment and note below if needed.

Z Flashlight	Bottled water	Solder or binder for EPP documents
Batteries for Flashlight	⊠Non-perishable food	Backpack(s) or carrying case(s)
Portable First Aid Kit	⊠Diapers (N/A)	⊠Consider special toys or games
Thermometer	⊠ Change of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
Medications (N/A)	⊠Blanket(s)	

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y
Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y
 Location of The Emergency Ready to go Pack: Stored by front door exit Item Specification (if needed): <u>1 backpack (carrying case), 2 flashlights, 1 pk of D batteries, 1 first aid kit, 1 thermometer, no specific medications, 4 bottled water, 2 canned foods, 4 dried foods, 1 jar of baby food, 7 diapers w/ 1pk of wipes, 1 outfit (top/bottom/undershirt), 1 large blanket, 1 puzzle, 2 books, 1 roll of duct tape, 1 pair of scissors, 2 large trash bags, and folder w/ EPP and ECMA docs</u> Items to be reviewed on xx/xx/xxxx; N/A
Emergency Documents
S Informal Provider Emergency Preparedness Plan (this completed form) S Authorization for emergency medical care
Planning and Maintenance
Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly: First Name Last Name
Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: carried by the provider.
Shelter In Place Procedure:
The provider will gather the child and grab the ERTG and go into the bedroom (1 door 1 window 1 vent). Once in the room the provider will lock the door and window and then use the sealing plastic and tape to seal the door, window and vent if the need should arise. The provider will call, text, or video message the parent with emergency updates.
Evacuation Procedures
Primary: The provider will account for the child, grab the ERTG and head to the provider's vehicle. The provider will secure the child in their rear-facing car seat and drive to be account of the provider driving the provider will call the provider will call the church again or go inside the building to receive instruction of where to shelter specifically. Once secured she will call, text or video message the parent with emergency updates.

Alternate: If they could not access the primary location, the provider will account for the child, grab the ERTG and head to the provider's vehicle. The provider will secure the child in their rear-facing car seat and drive to the local church. Before driving the provider will call the church and the parent to declare the emergency. Upon arrival the provider will call the church again or go inside the building to receive instruction of where to shelter specifically. Once secured she will call, text or video message the parent with emergency updates. If walking the provider will secure the child in the child's stroller alongside the ERTG and follow all the above emergency steps.

Care Hours: M-F 7:30am-3:30pm

Signatures & Date

Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. The parties also acknowledge that, if approved, the home in which care is provided is subject to random, unannounced pop up visit which will be conducted virtually or in-person.

PROVIDER	INSPECTOR
Printed Name: Showisa Brown	Printed Name:
Signature:	Signature:
Date: 10 03 2023 Phone:	Date: 09/01/2023 Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection	-person				Return to: ccs.informalproviders@maryland.gov
inspection Date: 12/16/2024 Time In: 1:30pm			Time Out: 2:17pm Result: Passed		
Informal Care					
Type of Care (check one):	Non-relative Info	rmal Provider Ca	are DRelative I	nformal P	rovider Care
Provider Information		Walks and the Mark	图1221月7月一至2010月	Stellar 102	
First Name: Valerie Provider ID #	Last	Name: Brown	Provider ID: 56		vider ID: 567298 ail:
Care Location Inspected	Contraction of the local division of the loc	and the second second second	Cart and a start	and the second	
Street Address: Address Verified?: Yes		<u>City</u> :	County		State: Zip Code:
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
Hune of entitient in early to			8/8/2022	2yrs/Y	
	and in some failer at sin	Hereb.	4/4/2015	9yrs/N	
				CALL COLLEGE	
Safety of the Home					
Directions: Review a	nd determine compliance	with each stand	ard. Note any comm	ents or cor	rective actions needed.
Additional pages may	be used for comments.		Standard Met	Y – Yes, N – No, D – Discussed, n/a – Not Applicable Standard Met Comments/Notes	
Health and Safety Training:			Y/N	Correct	ive Action /Timeframe if needed
Basic Health and Safety Training Completed?		Y			
Home is free of health and safety hazards:		Standard Met	Comme	nts/Notes ive Action /Timeframe if needed	
			Y/N Y	Correct	ive Action / Internance in Record
Is in good repair Is free of insect or re	odent infestation		Y		
Is well-lit and well-v			Y	1	
Has hot and cold ru	Contraction of the Contract of the Contract		Ý		
Has a working insid	A CONTRACTOR OF	Tunna Inta	Y		
	king, lighting and heatin	g	Y		
	safe heating system	and an and an	Y		
Has a working refrig	gerator and stove	Malur Alerina	Y		
Has a working telep	bhone	the st	Y		
Has operational sm	and the second se	htp: September	Y	1 A DE LA	and the second second second
Has first aid kit/supp	plies		Y	- inner	
Has protective cove accessible to childre	erings on any electrical e	outlet that is	Y	Contraction of the	
Harmful items are stored appropriately and away from children:		Standard Met Y/N		nts/Notes ive Action /Timeframe if needed	
Sharp or pointed items		Y	23 1 182	WERE AND	
Medications of any kind		Y	Station of the	and the second	
Matches, lighters an	Matches, lighters and flammable products		Y	Serie In	and the second
Alcoholic beverages		Y		at an the Lord Manager States	
• Guns		Y	- first		
Cleaning agents		Y			
Poisonous substance	es	COLORAND	Y	the Bar	
SENERAL CLEANLINESS S	TANDARDS		Standard Met	Comm	ents/Notes
ENERAL OLEANLINESS S	TANDARDS	A REAL PROPERTY AND A REAL PROPERTY A REAL PROPERTY AND A REAL PROPERTY AND A REAL PRO	Y/N	Correc	tive Action /Timeframe if needed

THE REPORT OF THE PARTY OF THE		
Trash, garbage and wet and soiled diapers are disposed of in a	Y	
sanitary manner. Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
the analytics are followed.	Y	
 Diapening procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	Y	and a service of all wond presents
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	r r	A CONTRACTOR OF
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily (including needed medications) and Emergency Documents.	accessible in the even	nt of an emergency. This contains a Disaster Supply Kit
Disaster Supply Kit		
Directions: Review and determine that each item is adequately i contains enough supplies for each child in care. Also that the iter ØFlashlight	ncluded in the Disaste	ar Supply Kit. Be certain that the Disaster Supply Kit
ØFlashlight ⊠Bottled wate	I send the set of the set of the set of the	sector comment and note below if needed.
Batteries Non-perisha	able food	Sector Folder or binder for EPP documents
ØPortable First Aid Kit ⊠Diapers		Backpack(s) or carrying case(s)
⊠Thermometer ⊠Change of c	clothes	☑ Consider special toys or games ☑ Heavy Duty Scissors Dust To a second sec
⊠Medications ⊠Blanket(s)		Packing Tape & Sealing Plastic/ Trash Bags

Items in the Disaster Supply Kit are clean, organize	id, and usable (Y/N)? Y		
	illy accessible in the event of an emergency (Y/N)?Y		
Location of Emergency Ready to go Pack: Hallw	vay shelf		
• To be observed for compliance on :			
•			
Emergency Documents	Dis (this seemalated form)		
⊠Informal Provider Emergency Preparednes ⊠Authorization for emergency medical care	ss Plan (this completed form)		
Planning and Maintenance	Kith and the Emergency Documents regularly:		
First Name Valene	ast Name Brown		
Description of how the Emergency Ready-to-Go Pa Shelter In Place Procedures:	ack will be transported to an evacuation location:		
The Provider will gather the ready to go bag and the The provider will <u>contact</u> parent before, during and	e children, take them to sheltering location (#1 of doors, #0 of window(s)). after sheltering.		
Evacuation Procedures:			
shelter in #1 of doors, #0 of window(s The <u>Provider will gather the</u> children and the ready t	to the evacuation location and gaining access by 0 (0) The provider will contact parent before, during and after sheltering to go bag, they will be traveling children secured by 0 (0) Children secured by 0		
the the second	to the evacuation location gamma and gamma access by o o o o o o o o o o o o o o o o o o		
:ARE HOURS: - Monday-Friday 9am-6:30pm			
ignatures & Date			
p up visit which will be conducted virtually or in-perso	wledge that all standards have been reviewed, and any corrections if needed have approved, the home in which care is provided is subject to random, unannounced on.		
nted Name:	INSPECTOR		
VO PETE BROWN	Printed Name:		
	Signature:		
e: 17-116/2024 Phone	Date: 12/16/2024 Phone: 1-877-227-0125		

SDE OCC Informal Care Inspection Checklist 2020-03-26

⊠Virtual Inspection □In-person Inspection	and a subset of	epartment of Ed ild Care Scholan INFORMAL NSPECTION CI	Child Care	Id Care Return to: ccs.informalproviders@maryland. ov		
nspection Date: 07/14/2023 Time In: 2:30PM			Time Out: 4:02	PM Result	Result: PASSED	
Informal Care						
Type of Care (check one):	Non-relative Inf	formal Provider C	are ⊠Relativ	e Informal Pro	vider Care	
Provider Information						
First Name: Wanda Provider ID #	Last	Name: Brown	Provider ID: <u>518806</u> Email:			
Care Location Inspected						
Street Address Address Verified? Yes.	City	County:	S	Zip (Code:	
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)	
			(09/19/2020)	2yr. / Y		
Safety of the Home			States and a second			
Directions: Review and determ pages may be used for comme	ents.	ch standard. Note	any comments or o Y – Yes, N – No, Standard Met	D-Discussed	/Notes	
Health and Safety Training:			Y/N	Corrective Action /Timeframe if needed		
Basic Health and Safety Training Completed?		Y		formal Care – Certificate Submitte		
Home is free of health and safety hazards:			Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Is in good repair			Y		All areas were clean No evidence of infestation	
Is free of insect or rodent infestation		Y	All lights	were turned on and natural window		
 Is well-lit and well-vell 	entilated		Y	lighting		
 Has hot and cold rule 	nning water		Y	Tested by provider and steam observed or camera		
 Has a working inside 	e toilet		Y	Flushed by provider and observed		
 Has utilities for cook 	ing, lighting and heating	ng	Y			
 Has a working and s 	afe heating system		Y	Thermostat tested by provider for coo heating		
 Has a working refrig 	erator and stove		Y	Tested by provider and observe		
Has a working telept	hone		Y		utbound call made to provider's phone	
 Has operational smoothing 	oke detector(s)		Y	Tes	Tested by provider and observed	
Has first aid kit/supplies			Y	First a	First aid kit stored in bathroom cabinet	
 Has protective coverings on any electrical outlet that is accessible to children 		Y	AI	All outlets covered or occupied		
Harmful items are stored appropriately and away from children:		Standard Met Y/N		ction /Timeframe if needed		
Sharp or pointed items		Y		ed on back of kitchen counter		
Medications of any kind		Y	Store	d in locked cabinet in bathroom		
 Matches, lighters and flammable products 		Y		Does not own		
Alcoholic beverages			Y		Does not own	
Guns			Y	Channel	Does not own	
Cleaning agents			Y	Stored in	higher level shelf in laundry room	
 Poisonous substance 	35		Standard Met	Comments/M	Does not own	
GENERAL CLEANLINESS STANDARDS		Y/N	and a second sec	ction /Timeframe if needed		

Revised 10/2021

Y	Changing station in provider's bathroom or common bathroom/child is partly potty-trained
Y	Diapers taken out daily via mini trash bin
Y	
Y	All diapering supplies available near changing area
Y	
DS Standard Met	Comments/Notes Corrective Action /Timeframe if needed
Y	
d or Y	
Y	
Y	
sible in the event of an en	nergency. This contains a Disaster Supply Kit (including
d in the Disaster Supply Rized, and usable. Commen	Kit. Be certain that the Disaster Supply Kit contains nt and note below if needed.
	SFolder or binder for EPP documents
ishable food	Backpack(s) or carrying case(s)
	Consider special toys or games
of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
	Y Y <td< td=""></td<>

Emergency Ready-to-Go Pack is available and easily	accessible in the event of an emergency (Y/N)? Y
--	--

Location of The Emergency Ready to go Pack: Stored in foyer near exit door Item Specification (if needed):

<u>1 backpack (carrying case), 2 bubbles and a few toys, folder w/ EPP and ECMA, 1 pk of diapers and wipes and ointment, 5 pks of dried foods, 1 blanket, 1 outfit (top/bottom), 3 bottled waters, 1 roll of sealing plastic, 2 rolls of duct tape, 1 thermometer, 1 flashlight, 1 pk of extra batteries, 1 pair of scissors, and 1 first aid kit</u>

Items to be reviewed on xx/xx/xxxx: N/A

Emergency Documents

Sinformal Provider Emergency Preparedness Plan (this completed form)

Authorization for emergency medical care

Planning and Maintenance

ĺ	Person responsible for updating t	he Disaster Supply Kit and the Emergency Documents regularly:
l	First Name	Last Name

Brown

Wanda

Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: carried by the provider.

Shelter In Place Procedure:

The provider will gather the child and ERTG and go into the hallway bathroom (1 door 0 windows). The provider will use the sealing plastic and tape to seal the door and vent if needed. The provider will call, text or email the parent to give emergency updates.

Evacuation Procedures

Primary: The provider will account for the child and grab the ERTG and drive to the provider will secure the child in her forward-facing car seat. Upon arrival the provider will receive instruction from the provider of the shelter. The provider will call, text or email the parent with emergency updates.

Alternate: If they could not access the primary location, the provider will gather the child and ERTG and drive to school. The provider will secure the child in her forward-facing car seat. Upon arrival the provider will receive instruction from of where to shelter. The provider will call, text or email the parent with emergency updates.

Care Hours:

Signatures & Date Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. The parties also acknowledge that, if approved, the home in which care is provided is subject to random, unannounced pop up visit which will be conducted virtually or in-person. PROVIDER INSPECTOR Printed Name: Printed Name:

WANDED DEDWIN		
Signature:	Signature:	
Date: 8 8 23 Phone:	Date: 07/14/2023	Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection	Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST				Return to: ccs.informalproviders@maryland.gov
Inspection Date: 12/10/2024	Date: 12/10/2024 Time In: 1:30 pm			om Re	esult: Passed
Informal Care					
Type of Care (check one):	Non-relative Info	ormal Provider C	are ⊠Relative	Informal	Provider Care
Provider Information					
First Name: Stephanie Last Name: Burton Provider ID #:					ovider ID: 445915 nail:
Care Location Inspected					
<u>Street Address</u> : <u>Address Verified?</u> : Yes	<u>City</u> :	<u>C</u>	County: State	<u>e</u> :	Zip Code:
Name of Children in Care (add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
			3/20/2023	1 year	old/ N
			2/19/2014		ars old/ N
Safety of the Home					
		e with each stand			orrective actions needed.
Additional pages may Health and Safety Training	y be used for comments.		Standard Met	Comm	ussed, n/a – Not Applicable eents/Notes
		10	Y/N	Correc	ctive Action /Timeframe if needed
Basic Health and S	afety Training Complete	ed?	Y		
Home is free of health and	safety hazards:		Standard Met Y/N		ents/Notes ctive Action /Timeframe if needed
Is in good repair			Y		
 Is free of insect or r 	odent infestation		Y	_	
 Is well-lit and well-w 	rentilated		Y		
 Has hot and cold rule 	inning water		Y		
 Has a working insid 			Y		
	king, lighting and heatir	ng	Y		
	safe heating system		Y		
 Has a working refri 			Y		
 Has a working telep 			Y		
Has operational sm			Y		
Has first aid kit/sup			Y		
 Has protective cover accessible to childred 	erings on any electrical en	cutlet that is	Y		
Harmful items are stored a children:	ppropriately and awa	y from	Standard Met Y/N		ents/Notes tive Action /Timeframe if needed
Sharp or pointed ite	ems		Y		
Medications of any			Y		
 Matches, lighters a 	nd flammable products		Y		
Alcoholic beverage	s		Y		
Guns			Y		
Cleaning agents			Y		
 Poisonous substan 	ces		Y		
GENERAL CLEANLINESS	STANDARDS		Standard Met Y/N		ents/Notes tive Action /Timeframe if needed
All areas of the home are ke	pt clean, including diap	ering area.	Y		

Trash, garbage and wet and soiled diapers are disposed of in a canitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Y	
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services <u>Unit</u> .	Y	

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit

	hat each item is adequately included in the Disaster hild in care. Also that the items are clean, organized	
⊠Flashlight	⊠Bottled water	Section 2012 Folder or binder for EPP document
⊠Batteries	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
⊠Portable First Aid Kit	⊠Diapers	⊠Consider special toys or games
⊠Thermometer	⊠Change of clothes	 Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Tras Bags
□Medications-N/A	⊠Blanket(s)	

Items in the Disaster Supply Kit are clean, organized	d, and usable (Y/N)? Yes	
Emergency Ready-to-Go Pack is available and easil	ly accessible in the event of an emergency (Y/	N)? Yes
Location of Emergency Ready to go Pack: Coat	<u>Closet</u>	
Emergency Documents		and the second
⊠Informal Provider Emergency Preparednes	ss Plan (this completed form)	
Authorization for emergency medical care		
Planning and Maintenance		
Person responsible for updating the Disaster Suppl	ly Kit and the Emergency Documents regula	arly:
	ast Name	
Stephanie Emergency Ready-to-Go Pa	Burton ack will be transported to an evacuation loca	ation:
Shelter In Place Procedures:		
text the parent before, during and after sheltering	<u>ig</u> .	
Evacuation Procedures: The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provident of doors, # of window(s)). The provider will text the The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provident instruction(# of doors, # of window(s)). The provident CARE HOURS:	der will he parent before, during and after shelter to go bag, taking them to the car, securin der will	ring. In the toddler in a forward facing car
The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provi of doors. # of window(s)). The provider will text the The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provider instruction(# of doors, # of window(s)). The provi-	der will he parent before, during and after shelter to go bag, taking them to the car, securin der will	ring. In the toddler in a forward facing car
The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provident of doors, # of window(s)). The provider will text the The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provident instruction(# of doors, # of window(s)). The provident CARE HOURS:	der will he parent before, during and after shelter to go bag, taking them to the car. securin der will vider will text the parent before, during an vider will text the parent before, during an powledge that all standards have been reviewed approved, the home in which care is provided	t, and any corrections if needed have
The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provider of doors, # of window(s)). The provider will text the The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provider instruction(# of doors, # of window(s)). The provider CARE HOURS: - Signatures & Date Acknowledgement: By signing below the parties acknowledge that, if pop up visit which will be conducted virtually or in-pers PROVIDER	der will he parent before, during and after shelter to go bag, taking them to the car. securin der will vider will text the parent before, during an vider will text the parent before, during an powledge that all standards have been reviewed approved, the home in which care is provided	t, and any corrections if needed have
The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provident of doors, # of window(s)). The provider will text the The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provider instruction(# of doors, # of window(s)). The provident CARE HOURS: - Signatures & Date Acknowledgement: By signing below the parties acknowledge that, if pop up visit which will be conducted virtually or in-pers PROVIDER Printed Name: Stephanic Builton	der will he parent before, during and after shelter to go bag, taking them to the car. securin der will vider will text the parent before, during an vider will text the parent before, during an powledge that all standards have been reviewed approved, the home in which care is provided son.	ting. ag the toddler in a forward facing car d after sheltering. d, and any corrections if needed have is subject to random, unannounced
The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provi of doors, # of window(s)). The provider will text the The Provider will gather the children and the ready seat and the oldest child in a seatbelt. The provider instruction(# of doors, # of window(s)). The provider CARE HOURS: - Signatures & Date Acknowledgement: By signing below the parties acknowledge that, if pop up visit which will be conducted virtually or in-pers PROVIDER	der will he parent before, during and after shelter to go bag, taking them to the car. securin der will vider will text the parent before, during an vider will text the parent before, during an powledge that all standards have been reviewed approved, the home in which care is provided son.	ting. ag the toddler in a forward facing car d after sheltering. d, and any corrections if needed have is subject to random, unannounced

⊠Virtual Inspection □In-person Inspection		epartment of Ed Id Care Scholar INFORMAL NSPECTION C	ship Program CARE	Child Care	Return to: ccs.informalproviders@maryland.g ov
Inspection Date: 11/02/2022	Time	e in: 10:30AM	Time Out: 11:20	SAM Result	PASSED
Informal Care					
Type of Care (check one):	Non-relative Inf	ormal Provider C	are Relative	e Informal Prov	ider Care
Provider Information					
First Name: Stephanie Provider ID #:	Last	Name: Burton		Provide Email:	er ID: 445915
Care Location Inspected				Lindii.	
Street Address: Address Verified? Yes	City:	County	: State	Zip	o Code:
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	Present (Y/N)
	p		7/18/2020		/ith Great Grandparent
			2/19/2014		
				8 / No, A	
		l	6/23/2010	12 / No, A	t School
		1	l		
Safety of the Home					
Directions: Review and determ pages may be used for comme	ine compliance with each	ch standard. Note	any comments or o Y – Yes, N – No,	orrective action	is needed. Additional I, n/ a – Not Applicable
Health and Safety Training:			Standard Met Y/N	Comments/ Corrective	Notes Action /Timeframe if needed
Basic Health and Safety Train	ning Completed?		Y	Certificate \$	Submitted
Home is free of health and s	safety hazards:		Standard Met Y/N	Comments/	Notes Action /Timeframe if needed
 Is in good repair 			Y		
 Is free of insect or ro 	dent infestation		Y	No sign of in	festation
 Is well-lit and well-ve 	entilated		Y		
 Has hot and cold run 	ning water		Y	Steam Obse	rved
 Has a working inside 	e toilet		Y	Flush Obser	
 Has utilities for cooki 	ing, lighting and heatin	g	Y		
 Has a working and s 	afe heating system		Y	Thermostat I	Dialed down
 Has a working refrige 	erator and stove		Y		
 Has a working teleph 	none		Y	Provider's ce	ell called
 Has operational smo 	ke detector(s)		Y		
 Has first aid kit/suppl 			Y	Band-Aids, o wipes, tourni	intment , gauze, tape, gloves, Alcoho quet, pain relief, burn relief
 Has protective cover accessible to children 	ings on any electrical on	outlet that is	Y	Covered, in t	use or behind furniture
larmful items are stored ap children:		from	Standard Met Y/N	Comments/N Corrective Ac	otes ction /Timeframe if needed
 Sharp or pointed item 			Y	Upper cabinet	
 Medications of any kit 	and the second se		Y	Upper cabinet	
the state of the s	flammable products		Y	Upper cabinet	No. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10
 Alcoholic beverages 			Y		
Guns			Y		
Cleaning agents			Y	Locked in Lau	ndry room
 Poisonous substance 	es		Y	Other than me	dications and cleaning solutions

MSDE OCC Informal Care Inspection Checklist

Revised 10/2021

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury A child in care is not subjected to any form of neglect, 	Y	
 ncluding: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
he provider immediately reports any suspected child abuse, eglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	
mergency Ready-to-Go Pack		
he Emergency Ready-to-Go Pack must be available and easily accessible in the edded medications) and Emergency Documents.	he event of an eme	rgency. This contains a Disaster Supply Kit (including
isaster Supply Kit		
		Be certain that the Disaster Supply Kit contains

⊠ Flashlight	Bottled water	
•	A Dottied water	Solder or binder for EPP documents
⊠Batteries for Flashlight	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
☑Portable First Aid Kit	⊠Diapers	⊠Consider special toys or games
⊠Thermometer		Heavy Duty Scissors, duct tape/
⊠ memometer	⊠ Change of clothes	packing tape & sealing plastic/trash
		bags
Medications	⊠Blanket(s)	

Emergency Ready-to-Go Pack is evaluable and easily accessible in the event of an emergency (YN)? Y Location of The Emergency Ready to go Pack: At the bottom of stairs in the basement Item Specification (if needed): 3 shifts, 1 tank too, 3 points,3 pairs socks, 7 Dispers and box wipes 12 odra AAA & bottonies for 3 fash lights, target, about the stain of t	will secure the baby in car seat and the older children their seated Once at the location, they will shelter in the provider will call the parents before leaving the care location and i If they couldn't shelter at the primary location, they will go to the a The provider will grab the emergency bag, have the children she will secure the baby in car seat and the older children their se They will shelter in the the provider will use plastic and tape to seal the shelter. The provi immediately after they are secure in the alternate evacuation locat Signatures & Date Acknowledgement: By signing below the parties acknowledge that, been discussed. The parties also acknowledge that, if approved, the pop up visit which will be conducted virtually or in-person.	immediately after they are secure in the evacuation location. Iternate evacuation location which is an analysis an line up at the front door, then proceed to the provider's vehicle where eatbelts, before driving to the location. The provider will call before family room that has two window and one door. If the need should arise ider will call the parents before leaving the care location and tion.
Location of The Emergency Ready to go Pack: At the bottom of stairs in the basement Image: Description of in needed: 3 shirs, 1 tank too, 3 pants, 3 pains socks, 7 Diapers and box wipes 12 stairs AAA & batteries for 3 flash lights, tarps, 3 blankets Band alds, ointiment, gauze, tape, alcohol wipes, ointiment, gloves, pain relief, tweezers, whistle 16 oz vatar bottles, 2 Gatardaes, 5 Tuna kits, 16 oz tag of beel jerky, 3 slim jims snacks, Peanut butter cracker, ritz, fruit snacks, Image: Description of new constructions of the ended: WA Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly: First Name Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: Belter In Place Procedure The pavoider will grab the children, grab the ERTB from basement , and shelter to the family room away from windows. The room has one pation glass door. If the need should arise the provider will use plastic and tape to seal the shelter. The provider will call the parent location, which is	will secure the baby in car seat and the older children their seated Once at the location, they will shelter in the provider will call the parents before leaving the care location and i If they couldn't shelter at the primary location, they will go to the a The provider will grab the emergency bag, have the children she will secure the baby in car seat and the older children their se They will shelter in the the provider will use plastic and tape to seal the shelter. The provi immediately after they are secure in the alternate evacuation locat Signatures & Date	immediately after they are secure in the evacuation location. Iternate evacuation location which is an under secure in the provider's vehicle where an line up at the front door, then proceed to the provider's vehicle where eatbelts, before driving to the location. The provider will call before family room that has two window and one door. If the need should arise ider will call the parents before leaving the care location and tion.
Location of The Emergency Ready to go Pack: At the bottom of stairs in the basement Item Specification (if needed): 3 shirts, 1 tank too, 3 pants,3 pairs socks, 7 Diapers and box wipes 12 extra AAA & batteries for 3 flash lights, tarps, 3 blankets Band aids, ointment, gauze, tape, alcohol wipes, ointment, gloves, pain relief, tweazers, whistle 6 16oz water bottles, 2 Gatorades, 5 Tuna kits, 16 oz bag of beef jerky, 3 slim jims snacks, Peanut butter cracker, ritz, fruit snacks, Items to review on xx/xx/xxxx if needed: N/A Emergency Documents ⊠Authorization for emergency medical care Planning and Maintenance Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly: First Name Last Name Description of how the Emergency Ready-to-Gc Pack will be transported to an evacuation location: Shelter In Place Procedure: The provider will grab the children, grab the ERTB from basement , and shelter to the family room away from windows. The room has one patio glass door. If the need should arise the provider will use plastic and tape to seal the shelter. The provider will call the parent once they are situated and secure. Evacuation Procedures: The provider will grab the children, grab have the children line up at the front door, then proceed to the provider's vehicle where she will secure the baby in care seat and the older children their seatbels, before driving to the primary exacuation lo	will secure the baby in car seat and the older children their seatbe Once at the location, they will shelter in th provider will call the parents before leaving the care location and i If they couldn't shelter at the primary location, they will go to the a The provider will grab the emergency bag, have the children she will secure the baby in car seat and the older children their se They will shelter in the the provider will use plastic and tape to seal the shelter. The provi	immediately after they are secure in the evacuation location. Iternate evacuation location which is factorial of the provider's vehicle where an line up at the front door, then proceed to the provider's vehicle where eatbelts, before driving to the location. The provider will call before family room that has two window and one door. If the need should arise ider will call the parents before leaving the care location and
Location of The Emergency Ready to go Pack: At the bottom of stairs in the basement Item Specification (if needed): 3 shirts, 1 tank top, 3 pants,3 pairs socks, 7 Diapers and box wipes 12 extra AAA & batteries for 3 flash lights, tarps, 3 blankets Band aids, ointment, gauze, tape, alcohol wipes, ointment, gloves, pain relief, tweezers, whistle 6 16oz water bottles, 2 Gatorades, 5 Tuna kits, 16 oz bag of beef jerky, 3 slim jims snacks, Peanut butter cracker, ritz, fruit snacks, Items to review on xx/xx/xxxx if needed: N/A Emergency Documents Image: Informal Provider Emergency Preparedness Plan (this completed form) Authorization for emergency medical care Planning and Maintenance Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly: First Name Last Name Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location:	The provider will grab the children, grab the ERTB from basemen one patio glass door. If the need should arise the provider will use once they are situated and secure. Evacuation Procedures:	e plastic and tape to seal the shelter. The provider will call the parent up at the front door, then proceed to the provider's vehicle where she alts, before driving to the primary evacuation location, which is
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Location of The Emergency Ready to go Pack: At the bottom of stairs in the basement	12 extra AAA & batteries for 3 flash lights, tarps, 3 blankets Band aids, ointment, gauze, tape, alcohol wipes, ointment, gloves,	pain relief, tweezers, whistle
Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y	Item Specification (if needed):	of stairs in the basement
Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y	Location of The Emergency Ready to go Pack: At the bottom	n the event of an emergency (Y/N)? Y

TROUBER		INSPECTOR
Printed Name: Stephanie Burton	Printed Name:	
Signature:	Signature:	
Date: 11/02/2022 Phone:	Date: 11/02/2022	Phone: 1-877-227-0125
• /		

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⊠Virtual Inspection □In-person Inspection	Maryland Sta	Child Care Sch INFORM	f Education/Office o olarship Program IAL CARE N CHECKLIST	f Child Care	Return to: ccs.informalproviders@maryland.g
Inspection Date: 01/06/2023		Time In: 10:30Al Time In: 3:55PM	In Distance Company of the State Stat State State S		t: Follow-up Required v-up Result: PASSED
Informal Care		THOM THE	http://www.		
Type of Care (check one):	Non-relativ	e Informal Provid	er Care SRelati	ve Informal Pro	wider Care
Provider Information				Contraction Provident Providence	and second a
First Name: Laura Provider ID #		Last Name: Bus	tamante	Provid	ier ID:
Care Location Inspected					
Street Address: Address Verified? Yes.	City:	County:	State	Zip Code:	
Name of Children in Care (and name if needs	d) Scholars	hin Date of Birth	Age	/ Precent (V/M)
name of onligion in care (ever helles it ucede	u) oundars	11/6/2013	9 / No, at	/ Present (Y/N)
			7/11/2016	6 / No, at	school
Directions: Review and deten pages may be used for comm	ents.	th each standard.	Note any comments or Y - Yes, N - No Standard Met	, D – Disousse	od, n/a – Not Applicable
Health and Safety Training	E		Y/N		Action /Timeframe if needed
Basic Health and Safety Tra	ining Completed?		Y	Rela	tive Informal Care Completed
Home is free of health and	safety hazards:		Standard Mot Y/N		s/Notes • Action /TimeTrame if needed
 Is in good repair 			Y		
 Is free of insect or r 	odent infestation		Y		No evidence of infestation
 Is well-lit and well-v 	rentilated	0	Y		ts of ertificial and natural lighting
 Has hot and cold rule 			Y	C	old/Hot water tested by provider
 Has a working insid 	and the second se		Y	_	
 Has utilities for cool 			Y	-	
 Has a working and 		m	Y	-	Tested by provider
 Has a working refrig 	gerator and stove		Y	180xdilare	allahana manddar talar har shana fa
 Has a working 			Y	voncing a	cellphone, provider using her phone for inspection
 Has operational sm 	oke detector(s)		Y	Te	est alarm tested by provider for
 Has first aid kit/sup 	plies		Y		Band-Aids and alcohol wipes
 Has protective cover accessible to children 		rical outlet that is	Y		All outlets were occupied
Harmful Items are stored a children:	ppropriately and	away from	Standard Mot Y/N	Comments/ Corrective	Notes Action /Timeframe if needed
 Sharp or pointed ite 	ms		Y	Un	der the sink in a locked cabinet
 Medications of any 	110-00		Y	-	High level cabinet
 Matches, lighters ar 	nd flammable prod	ucts	Y	-	Does not own
Alcoholic beverage	5		Y	Bar area	but had a gate to blocked access for children
• Guns			Y		on high level shelf, provider displayed thin case and that the case is code-pad locked
 Cleaning agents 			Y	Un	der the sink in a locked cabinet
 Poisonous substant 	nee		Y		Does not own

GENER	RAL CLEANLINESS STANDARDS	St	andard Met Y/N	Conments/Notes Corrective Action /Timeframe if needed
All area	is of the home are kept clean, including diape	ring area.	Y	No diaper age children in care
	garbage and wet and soiled diapers are dispo / manner.	sed of in a	Y	No diaper age children in care
	changed immediately when s/he has a solled clothing or bedding.	f or wet	Y	
COLUMN TWO IS NOT	ng procedures are followed.		Y	No diaper age children in care
washed	ashing procedures are followed. Provider and I thoroughly with soap and warm running wate Tolleting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the disease.	er after:	Y	
CHILD	ABUSE, NEGLECT AND MISTREATMENT	STANDARDS St	andard Mot Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child	is not subject to any form of abuse, includ Physical injury Any sexual abuse Mental injury	ing.	Y	
A child Includin	In care is not subjected to any form of neg g. The failure to give proper care and attention including leaving a child unattended under o that indicate that the child's health or welfare placed at substantial risk of harm; Mental injury to a child, or a substantial risk injury that is caused by the failure to give pro attention to a child.	to a child ircumstances a is harmed or of mental	¥	
A child • • • • •	in care is not subjected to mistreatment, in Any deliberate act that hurts a child physical emotionally, including: Spanking, Bitting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridicuting Washing a child's mouth with scap Putting pepper or other spicy or distasteful if child's mouth Requiring a child to stand on one foot as pur Tying child to a cot or other equipment	ly or ems in a	¥	
neglect	wider immediately reports any suspected of or mistreatment by calling 911 and your <u>lo</u> nent of Social Services Child Protective So	scal	Y	
Emerc	ency Ready-to-Go Pack		12 2 9 2	
The Eme		asily accessible in the e	event of an em	ergency. This contains a Disaster Supply Kit (including
Disaste	r Supply Kit			
	Review and determine that each item is adequate upplies for each child in care. Also the items are clipplies for each child in care.			
8	Flashlight	Bottled water		SFolder or binder for EPP documents
8	Batteries for Flashlight	Non-perishable food	i.	Backpack(s) or carrying case(s)
		Dispers (N/A)		Oconsider special toys or games
		Change of clothes		回Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags

Items in the Disaster Supply Kit are clean,	organized and upable (VAUA)	
Emergency Ready-to-Go Pack is available	and easily accessible in the event of an emergen	NADA MAL
The second		sy (Trin)r Tes
Location of The Emergency Ready to ge	<u>Pack</u> : Locked in Master Bedroom	
Item Specification (if needed);		
 2 flashlights, 1 pk of batteries, 1 first 	e and his	the second s
canned food items, no diapers, 2 or	tite and underward and any shift of the	ermometer, 3 bottled waters, 4
1 carrying case duffle bag, 3 toys, 1	pair of scissors, 2 rolls of duct tape, 3 heavy	the provided the provided the provided the provided to the pro
Items to review on 01/06/2023 if needed:	Reviewed and corrected on 01/06/23 @ 3:55pr	and the state of the state of the state of the
		n
- Child's prescribed medication in to-	go bag	
Emergency Documents		
Authorization for emergency medic	aredness Plan (this completed form)	
	al care	
Planning and Maintenance		
First Name	r Supply Kit and the Emergency Documents re	gulariy:
Laura	Last Name Bustamante	
Description of how the Emergency Ready-to	Go Pack will be transported to an evacuation	
	an exacting of the second seco	location: Garried
 The provider will gather both children a seal the door with the sealing plastic a and stay until the emergency is over. 	and emergency bag and head into the bathroor and duct tape. Provider will call the parent once	n(1 door 0 windows). Provider will lock and they are settled in the emergency location
The provider will gather both children a seal the door with the sealing plastic a and stay until the emergency is over. <u>ivacuation Procedures:</u> <u>Primary Location:</u> Provider will grab the emergency bag other child in car seat. Both children w Provider will call the parent on the way parent again. <u>Iternate Location:</u> Provider will grab the emergency bag a will drive to the children's home in who	and the children and head to the car and 1 child If he secured in by seat bet. Upon arrival, prov Once inside the provider and children wi to evacuation location and once they are settle ind children and place them in their booster and h she has a spare key for access. Upon arrival	d will be placed in a booster seat and the rider and children will I go into the ed and safe in the location she will call the d car seat with seatbelts strapped. Provider
The provider will gather both children a seal the door with the sealing plastic a and stay until the emergency is over. Evacuation Procedures: Primary Location: Provider will grab the emergency bag other child in car seat. Both children will other child in car seat. Both children will parent again. Provider will grab the emergency bag parent again. Itemate Location: Provider will grab the emergency bag will drive to the children's home in which window) for shelter. Provider will call the parent again will drive to the children's home in which window) for shelter. Provider will call the aphone notification that alerts the parent again will drive to the children's home in which window) for shelter. Provider will call the aphone notification that alerts the parent again the parent aga	and the children and head to the car and 1 child it he secured in by seat belt. Upon arrival, pro- Conce inside the provider and children wi to evacuation location and once they are settle ind children and place them in their booster and h she has a spare key for access. Upon arrival e parent once she arrives there and is secured in when she arrives at the home.	d will be placed in a booster seat and the rider and children will Il go into the ed and safe in the location she will call the d car seat with seatbelts strapped. Provider they will go to the basement (1 door 1 in the home with the children, as well as has
 The provider will gather both children a seal the door with the sealing plastic a and stay until the emergency is over. Evacuation Procedures: Primary Location: Provider will grab the emergency bag other child in car seat. Both children will provider will call the parent on the way parent again. Itemate Location: Provider will grab the emergency bag a will drive to the children's home in whic window) for shelter. Provider will call the parent will call the parent again. Itemate Location:	and the children and head to the car and 1 child If he secured in by seat bet. Upon arrival, pro- Conce inside the provider and children wi to evacuation location and once they are setth ind children and place them in their booster and h she has a spare key for access. Upon arrival e parent once she arrives there and is secured int when she arrives at the home.	d will be placed in a booster seat and the rider and children will Il go into the ed and safe in the location she will call the d car seat with seatbelts strapped. Provider they will go to the basement (1 door 1 in the home with the children, as well as has
The provider will gather both children a seal the door with the sealing plastic a and stay until the emergency is over. Evacuation Procedures: Primary Location: Provider will grab the emergency bag other child in car seat. Both children will parent again. Iternate Location: Provider will grab the emergency bag a will drive to the children's home in which will grab the emergency bag a will drive to the children's home in which will grab the emergency bag a will drive to the children's home in which window) for shelter. Provider will call the a phone notification that alerts the parent a phone notification that alerts the parent drives. gnatures & Date knowledgement. By signing below the parties en discussed. The parties also acknowledge p up visit which will be conducted virtually or PROVIDER	and the children and head to the car and 1 child If he secured in by seat bet. Upon arrival, pro- Conce inside the provider and children wi to evacuation location and once they are setth ind children and place them in their booster and h she has a spare key for access. Upon arrival e parent once she arrives there and is secured int when she arrives at the home.	d will be placed in a booster seat and the rider and children will Il go into the ed and safe in the location she will call the d car seat with seatbelts strapped. Provider they will go to the basement (1 door 1 in the home with the children, as well as has
The provider will gather both children a seal the door with the sealing plastic a and stay until the emergency is over. Evacuation Procedures: Primary Location: Provider will grab the emergency bag other child in car seat. Both children will parent again. Iternate Location: Provider will grab the emergency bag a will drive to the children's home in which will grab the emergency bag a will drive to the children's home in which will grab the emergency bag a will drive to the children's home in which window) for shelter. Provider will call the a phone notification that alerts the parent a phone notification that alerts the parent drives. gnatures & Date knowledgement. By signing below the parties en discussed. The parties also acknowledge p up visit which will be conducted virtually or PROVIDER	and the children and head to the car and 1 child If he secured in by seat bet. Upon arrival, pro- Conce inside the provider and children wi to evacuation location and once they are setth ind children and place them in their booster and h she has a spare key for access. Upon arrival e parent once she arrives there and is secured int when she arrives at the home.	d will be placed in a booster seat and the rider and children will Il go into the ed and safe in the location ane will call the d car seat with seatbelts strapped. Provider they will go to the basement (1 door 1 in the home with the children, as well as has well as has
The provider will gather both children a seal the door with the sealing plastic a and stay until the emergency is over. Evacuation Procedures: Priorider will grab the emergency bag other child in car seat. Both children w Provider will call the parent on the way parent again. Iternate Location: Provider will grab the emergency bag a will drive to the children's home in which window) for shelter. Provider will call the a phone notification that alerts the parent apain. gnatures & Data knowledgement. By signing below the participation of the p	and the children and head to the car and 1 child in he secured in by seat belt. Upon arrival, pro- Conce inside the provider and children wi to evacuation location and once they are settle ind children and place them in their booster and h she has a spare key for access. Upon arrival e parent once she arrives there and is secured in when she arrives at the home.	d will be placed in a booster seat and the rider and children will Il go into the ed and safe in the location ane will call the d car seat with seatbelts strapped. Provider they will go to the basement (1 door 1 in the home with the children, as well as has well as has
and stay until the emergency is over. Evacuation Procedures: Primary Location: Provider will grab the emergency bag other child in car seat. Both children w Provider will call the parent on the way parent again. Iternate Location: Provider will grab the emergency bag a will drive to the children's home in which window) for shelter. Provider will call the a phone notification that alerts the parent gnetures & Date chnowledgement. By signing helow the paties en discussed. The parties also acknowledge p up visit which will be conducted virtually of PROVIDER Inted Name:	and the children and head to the car and 1 child if he secured in by seat beit. Upon arrival, prov Once inside the provider and children wi to evacuation location and once they are settle ind children and place them in their booster and h she has a spare key for access. Upon arrival e parent once she arrives there and is secured in when she arrives at the home.	d will be placed in a booster seat and the rider and children will Il go into the ed and safe in the location ane will call the d car seat with seatbelts strapped. Provider they will go to the basement (1 door 1 in the home with the children, as well as has well as has



⊠Virtual Inspection □In-person Inspection	Ch	e Department of E Care ild Care Scholars INFORMAL (INSPECTION CH	ARE	Child	Return to: ccs.informalproviders@maryland.gov
Inspection Date: 8/13/2024	π	ime In: 3:30PM	Time Out: 4:00 P	M Re	sult Passed
Informal Care			1		
Type of Care (check one):	□ Non-relative	Informal Provider (are Relative	Informal	Provider Care
Provider Information	-				
First Name: Maxine		ast Name: Butler		Pro	ovider ID: 424122
Provider ID #:		ast name. Dutier		En	nait
Care Location Inspected					The Code
Street Address: Address Verified?: Yes		City:	County:		State: Zip Code:
Name of Children in Care (add pages if needed) Scholarship	Date of Birth	Age	/ Present (Y/N)
in the set of the set of the set of the			2/13/2012	11 yea	irs old/ Y
			1/19/2018	6 years	s old/ Y
			-	~	
Safety of the Home				. Jala	
Directions: Review a	nd determine compli	ance with each stan	dard. Note any comm	nents or co	prective actions needed.
Additional pages may		nts.	Y - Yes, N - NO, Standard Met	Comm	issed, n/a – Not Applicable ents/Notes
Health and Safety Training			Y/N	Correc	tive Action /Timeframe if needed
Basic Health and Sa	afety Training Comp	pleted?	Y	-	5. MP 2
Home is free of health and	safety hazards:		Standard Met Y/N		ents/Notes tive Action /Timeframe if needed
 Is in good repair 			Y		
 Is free of insect or re 	odent infestation		Y		
 Is well-lit and well-w 	entilated		Y	-	
 Has hot and cold rule 	nning water		Y		
 Has a working insid 	e toilet		Y	-	
 Has utilities for cool 	ting, lighting and he	eating	Y		
 Has a working and : 	safe heating system	n	Y	-	
 Has a working refrig 	erator and stove		Y	-	
 Has a working telep 	hone		Y	-	
 Has operational sm 	oke detector(s)		Y	-	
 Has first aid kit/supp 			Y	-	
 Has protective cove accessible to children 		cal outlet that is	Y		
Harmful items are stored a children:	ppropriately and a	way from	Standard Met Y/N		nts/Notes ive Action /Timeframe if needed
 Sharp or pointed ite 	ms		Y		
Medications of any			Y		
 Matches, lighters ar 		icts	Y		
 Alcoholic beverages 			Y		
Guns			Y	1	
Cleaning agents			Y		
 Poisonous substance 	es		Y		
GENERAL CLEANLINESS	and the second		Standard Met Y/N	Comme	nts/Notes ive Action /Timeframe if needed
All areas of the home are kep	t clean, including d	liapering area.	Y		

	1	
Trash, garbage and wet and soiled diapers are disposed of in a	Y	
sanitary manner. Child is changed immediately when s/he has a soiled or wet	Y	
diaper, clothing or bedding.	Y	
Diapering procedures are followed.		
 Dispering procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after. Toileting. Diapering. Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	Y	Comments/Notes
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	Y	
 A child in care is not subjected to any form of neglect. including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm. Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	¥	
 A child in care is not subjected to mistreatment, including: Any deliberate act that nurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment. Tying child to a cot or other equipment 	Y,	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily ao (including needed medications) and Emergency Documents.	cessible in the even	t of an emergency. This contains a Disaster Supply Kit
Disaster Supply Kit		

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also that the items are clean, organized, and usable. Comment and note below if needed EFolder or binder for EPP documents SBottled water **⊠Flashlight** Backpack(s) or carrying case(s) Non-penshable food Batteries ☑Consider special toys or games SPortable First Aid Kit Diapers - N/A 8 Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Change of clothes **WThermometer** Bags ⊠Blanket(s) □Medications-N/A

Items in the Disaster Supply Kit are clean,	organized, and usable (Y/N)?	Yes	
Emergency Ready-to-Go Pack is available			(Y/N)? Yes
Location of Emergency Ready to go Pac	c <u>k:</u> In the providers bed room		
Emergency Documents			
⊠Informal Provider Emergency Pre ⊠Authorization for emergency medi		ted form)	
Planning and Maintenance			
Person responsible for updating the Disast First Name Maxine	ter Supply Kit and the Emerg Last Name Butler	ency Documents reg	ularly:
Description of how the Emergency Ready-		d to an evacuation la	analizan .
Shelter In Place Procedures:	to contract min or trainsporte	to to an evacuation it	Cabon.
text and email the parent before, during an	d aπer sheltering.		
Evacuation Procedures: The Provider will gather the children and re- youngest will be in a forward facing booster to 10 (1 of doors, 3 of wind) The Provider will gather the children and re- youngest will be in a forward facing booster window(s)). The provider will text, call and	eady to go bag, placing them r seat. The provider will drive low(s)). The provider will tex eady to go bag, placing them r seat. The provider will drive	to <u>o</u> t, call and email pare in the car the oldest	nt before, during and after evacuation.
Evacuation Procedures: The Provider will gather the children and re youngest will be in a forward facing booste	eady to go bag, placing them r seat. The provider will drive low(s)). The provider will tex eady to go bag, placing them r seat. The provider will drive	to <u>o</u> t, call and email pare in the car the oldest	nt before, during and after evacuation.
Evacuation Procedures: The Provider will gather the children and re- youngest will be in a forward facing booster to (1 of doors, 3 of wind) The Provider will gather the children and re- youngest will be in a forward facing booster window(s)). The provider will text, call and CARE HOURS: Signatures & Date Acknowledgement: By signing below the parti- been discussed. The parties also acknowledge	eady to go bag, placing them r seat. The provider will drive low(s)). The provider will text ady to go bag, placing them r seat. The provider will drive I email parent before, during ies acknowledge that all stand at that, if approved, the home i	to o t, call and email pare in the car the oldest to and after evacuation.	ant before, during and after evacuation. will be secured using a seatbelt and the (1 of doors, 2 of
Evacuation Procedures: The Provider will gather the children and re- youngest will be in a forward facing booster to (1 of doors, 3 of wind) The Provider will gather the children and re- youngest will be in a forward facing booster window(s)). The provider will text, call and CARE HOURS: Signatures & Date Acknowledgement: By signing below the parti- been discussed. The parties also acknowledge	eady to go bag, placing them r seat. The provider will drive low(s)). The provider will text ady to go bag, placing them r seat. The provider will drive I email parent before, during ies acknowledge that all stand at that, if approved, the home i	to o t, call and email pare in the car the oldest to and after evacuation.	ant before, during and after evacuation. will be secured using a seatbelt and the (1 of doors, 2 of and any corrections if peeded have
Evacuation Procedures: The Provider will gather the children and re- youngest will be in a forward facing booste- to (1 of doors, 3 of wind) The Provider will gather the children and re- youngest will be in a forward facing booste- window(s)). The provider will text, call and CARE HOURS: Signatures & Date Acknowledgement: By signing below the parti- been discussed. The parties also acknowledge pop up visit which will be conducted virtually of PROVIDER	eady to go bag, placing them r seat. The provider will drive low(s)). The provider will text eady to go bag, placing them r seat. The provider will drive l email parent before, during ies acknowledge that all stand ge that, if approved, the home i or in-person.	to o t, call and email pare in the car the oldest to and after evacuation.	taining entry going nt before, during and after evacuation. will be secured using a seatbelt and the (1 of doors. 2 of (1 of doors. 2 of wed, and any corrections if needed have ed is subject to random, unannounced
Evacuation Procedures: The Provider will gather the children and re- youngest will be in a forward facing booster to (1 of doors, 3 of wind) The Provider will gather the children and re- youngest will be in a forward facing booster window(s)). The provider will text, call and CARE HOURS: - Signatures & Date Acknowledgement: By signing below the parti- been discussed. The parties also acknowledge pop up visit which will be conducted virtually of PROVIDER	eady to go bag, placing them r seat. The provider will drive low(s)). The provider will text eady to go bag, placing them r seat. The provider will drive l email parent before, during ies acknowledge that all stand- tes that, if approved, the home is or in-person.	ards have been review	taining entry poing nt before, during and after evacuation. will be secured using a seatbelt and the (1 of doors. 2 of (1 of doors. 2 of wed, and any corrections if needed have ed is subject to random, unannounced

⊠Virtual Inspection □In-person Inspection		INFORMAL INSPECTION CI	ship Program CARE	Child Care	Return to: ccs.informalproviders@maryland.g ov
Inspection Date: 8/4/2023	Tim	e in: 2:30PM	Time Out: 3:30P	M Result	PASSED
Informal Care		Carl Contract			
Type of Care (check one):	Non-relative Inf	ormal Broudday C			
Provider Information	- Horriciauve init	ormal Provider Ca	are Melative	Informal Prov	vider Care
First Name: Maxine	Last	Name: Butler		Drouid	
Provider ID #.		warne. Dutier		Email:	er ID: 424122
Care Location Inspected		3			
Street Address: Address Verified? Yes	City:	County:	State	Zip Code:	-
Name of Children in Care	(add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
			1/19/2018	5/Yes	
			2/13/2012	10/ Yes	
			10/26/2010	12/ With P	arent
Safety of the Home		1		1	
Directions. Review and deter pages may be used for comm Health and Safety Training	nents.			D – Discussed	d, n/a - Not Applicable
Basic Health and Safety Tra	aining Completed?		Y		Certificate Received
Home is free of health and	d safety hazards:		Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed
 Is in good repair 			Y	Yes, home	is in good repair
 Is free of insect or 	rodent infestation		Y	No sign of it	nfestation
 Is well-lit and well- 			Y		and Ventilated
 Has hot and cold r 			Y	Steam Obs	
 Has a working insi 			Y	Flush obser	
	oking, lighting and heating	ng	Y	Electric Sto	and the second se
and the second se	I safe heating system		Y		turned up and down d on When Opened
 Has a working refr Has a working tele 	a second s		Y		ell was called
Has operational sr			Y	Alarm soup	
 Has first aid kit/su 			Y		antiseptic wipes, gauze tape
the second s	erings on any electrical	outlet that is	Y		ehind furniture or in use
Harmful items are stored children:	the state of the s	y from	Standard Met Y/N	Comments// Corrective A	Notes Action /Timeframe if needed
 Sharp or pointed it 	rems		Y	Moved to Hig	pher Cabinet
Medications of any	and the second		Y	Moved to Hig	gher cabinet
the second s	and flammable products		Y	None	
Alcoholic beverage	55		Y	None	
• Guns			Y	None	
Cleaning agents			Y	Upper shelf i	n linen closet
 Poisonous substar 	0006		Y	Other than m	redications and cleaning solutions

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	N/A
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Tolleting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	¥	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe If needed
A child is not subject to any form of abuse, including. Physical injury Any sexual abuse Mental injury 	Ŷ	
 A child in care is not subjected to any form of neglect, including. The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with scap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Projective Services Unit.	Y	

Emergency Ready-to-Go Pack

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (including needed medications) and Emergency Documents.

Disaster Supply Kit

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also the items are clean, organized, and usable. Comment and note below if needed.

-			
	⊠Medications N/A	SiBlanket(s)	
	⊠Thermometer	Change of clothes	Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
	⊗Portable First Aid Kit.	⊠Diapers N/A	⊠Consider special toys or games
	Batteries for Flashlight	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
	20Flashlight	⊠Bottled water	Folder or binder for EPP documents

	clean, organized, and usable (Vikno)	1	
Emergency Ready-to-Go Pack is a	e clean, organized, and usable (Y/N)? wailable and easily accessible in the eve	Y of an amazon a	
Location of The Emergence	,	nt of an emergency (Y	Y/N)? Y
Econation of the Emergency Rea	dy to go Pack: Provider's Bedroom		
Item Specification (if needed):			
	s, 3 Shorts, 3 shirts, 3 sox, 3 underwear		
3 16oz bottles of water, 4 8oz water	C 2 cans each chef Rovardee Jacanae L	S, S Ostmaal ham 2 car	ack Cheetos bags, 3 Welch's fruit snacks
Band-Aids' Neosporin, tape, Benad	iryl cream, gauze,	o coarnear bars, o sna	ack Cheetos bags, 3 Weich's truit snacks
Items to suday an unhadrown if			
Items to review on xx/xx/xxxx if	heeded: N/A		
Emergency Documents			
⊠Informal Provider Emerge	ncy Preparedness Plan (this complete	d form)	
Authorization for emergen	cy medical care		
lanning and Maintenance			
erson responsible for updating the	e Disaster Supply Kit and the Emerger	cy Documents regul	larly:
First Name Maxine	Last Name Butler		
Description of how the Emergency	Ready-to-Go Pack will be transported	to an evacuation loc	sation: Carried
Shelter In Place Procedure			
	grab the ERTB from basement, and h	ead to the lower leve	el family room to shelter. The room has on
he provider will grab the children, loor and four windows. If the need	should arise the provider will use plas		el family room to shelter. The room has on the shelter. The provider will call the paren
The provider will grab the children, loor and four windows. If the need	should arise the provider will use plas		
The provider will grab the children, loor and four windows. If the need is soon as she has to shelter in pla	should arise the provider will use plas		
The provider will grab the children, loor and four windows. If the need is soon as she has to shelter in pla	should arise the provider will use plas ace.	tic and tape to seal t	the shelter. The provider will call the paren
he provider will grab the children, oor and four windows. If the need s soon as she has to shelter in pla evacuation Procedures: he provider will grab the emergen	should arise the provider will use plas ace. cy bag, gather the children, then proce	tic and tape to seal t	wehicle where she will secure
The provider will grab the children, loor and four windows. If the need is soon as she has to shelter in pla evacuation Procedures: The provider will grab the emergen eat, Provider will	should arise the provider will use plas ace. cy bag, gather the children, then proce belts the in car, before driving to the pr Once at the I	tic and tape to seal t red to the provider's imary evacuation loc ocation, they will she	vehicle where she will secure cation, elter in the where sho will secure
The provider will grab the children, loor and four windows. If the need is soon as she has to shelter in pla execution Procedures: The provider will grab the emergen eat, Provider will Provider will window and one door. The provide	should arise the provider will use plas ace. cy bag, gather the children, then proce belts the in car, before driving to the pr Once at the I	tic and tape to seal t red to the provider's imary evacuation loc ocation, they will she	vehicle where she will secure
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