

Child Care Scholarship Program

Informal Child Care Monitoring Inspections



First letter of the provider's last name.

Posted January 2024

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☑ □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.g

	HASPECTION	HECKLIST	
Inspection Date 06/02/2022 Follow-up Inspection Date 06/07/2022	Time In: 9:30AM Time In: 11:00 AM	Time Out, 11:02 AM Time Out, 11:22 AM	Result DID NOT PASS Follow-up Result APPROVED
Informal Care			
Type of Care (check one) Non-re	lative Informal Provider	Care MRalatace	Information
Provider Information		Sitelative !	Informal Provider Care
First Name Angela Provider ID #	Last Name Davis		Provider ID 488083
Care Location Inspected			Email
Street Address Address Verified? Yes.	City	County	State Zip Code
Name of Children in Care (add pages if ne	eded) Scholarship	Date of Birth	Age / Present (Y/N)
		(02/05/2022)	4mos. /Y
			1
			1
			/
			1
			1
Safety of the Home			

Health and Safety Training:	Standard Met Y/N Y Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Basic Health and Safety Training Completed?		Relative Informal Care	
Home is free of health and safety hazards:		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	Natural and artificial lightening	
 Has hot and cold running water 	Y	Observed and tested by provider	
Has a working inside toilet	Y	Observed and tested by provider	
 Has utilities for cooking, lighting and heating 	Y	Stored in kitchen cabinets	
Has a working and safe heating system	Y	Observed and tested by provider	
Has a working refrigerator and stove	Y	Observed fridge/freezer and tested stove	
Has a working telephone	Y	No home phone, only working cellphones	
Has operational smoke detector(s)	Y	Observed and tested by provider	
Has first aid kit/supplies	Y		
 Has protective coverings on any electrical outlet that is accessible to children 	Y	All accessible outlets were covered	

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	Moved to container on high kitchen counter	
Medications of any kind	Y	Stored on high shelf in closet	
Matches, lighters and flammable products	Y	Moved to a high-level cabinet	
Alcoholic beverages	Y	Does not own	
Guns	Y	Does not own	

Cleaning agents	Y	I less to the second	
Poisonous substances	Y	Lower-level cablinets all locks added	
GENERAL CLEANLINESS STANDARDS	Standard Met	Does not own	
	Y/N	Comments/Notes Corrective Action /Timeframe if needed	
All areas of the home are kept clean, including diapening area.	Y	Diapering area in bedroom was clean.	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y		
Child is changed immediately when sihe 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: Tolleting: 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: Physical injury Any sexual abuse Mental injury	Y	Corrective Action /Timeframe if needed	
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		
he provider immediately reports any suspected child abuse, eglect or mistreatment by calling 911 and your local epartment of Social Services Child Protective Services nit.	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

⊠Batteries for Flashlight

⊠Portable First Aid Kit

⊠Bottled water

⊠Non-perishable food

⊠Diapers

⊠Folder or binder for EPP documents ⊠Backpack(s) or carrying case(s)

⊠Consider special toys or games

MSDE OCC Informal Care Inspection Checklist

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Revised 10/2021

Thermometer	Change of clothes	Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
⊠Medications	⊠Blanket(s)	0993
Items in the Disaster Supply Kit are clear	an, organized, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is availa closet.	able and easily accessible in the event of an emerg	gency (Y/N)? Y, stored in the provider's bedroom
Emergency Documents		
⊠Informal Provider Emergency I ⊠Authorization for emergency m	Preparedness Plan (this completed form) nedical care	
Planning and Maintenance		
Person responsible for updating the Dis First Name	saster Supply Kit and the Emergency Documen Last Name	ts regularly
Description of how the Emergency Rea	dy-to-Go Pack will be transported to an evacua	tion location
Item Specification (if needed):	The state of the s	nor ocasor.
 Transmitter radio, 2 flashl No specific medication, be trash bags, and 1 small be 	aby 1000 and 2 packaged food items 1 blanket	meter, folder of EPP/ECMA, 1 first aid kit, 2 outfits, diapers and wet wipes, 1 tape roll, 1 scissors, 3
Shelter-in-Place Procedures: Provide emergency supply kit, and grab the chil before, during and after via call or text.	er will close and lock all windows and exterior do ld, go into the bathroom closet with no windows	ors and blinds, turn off all fans and a/c, locate the to seal (1 door 0 windows). Will contact the parent
Evacuation Locations:		
child in their car seat. Upon arrival	hild and to-go bag via rideshare service vehicle of in lobby area (2 doors 6 winge. Will call or text the parents before, during o	ndows).
in their car seat and emergency to-go b	ort herself and baby in a rideshare service vehicle ag. Upon arrival at speaking, speaking stact the parent before during or after via call, te	le, provider will have the child and secure the child with an associate and getting instructions of ext, or email.
Items to be reviewed on 06/03/2022:	All corrections completed as of 06/07/2022	
 Locks needed for 3 cabine 	ets in kitchen	
 Flashlight/additional batte 		
 Emergency to-go bag pace 		
- Health & Safety Training C	Certificate	
Signatures & Date		een reviewed, and any corrections if needed have

Signatures & Date Acknowledgement. By signing below the parties acknowledgement been discussed. The parties also acknowledge that, if appropup visit which will be conducted virtually or in-person.	dge that all standards have been reviewe roved, the home in which care is provide	ed, and any corrections if needed have d is subject to random, unannounced	
PROVIDER	INSPECTOR		
Printed Name Angela DAVIS	Printed Name:		
Signate Signate	Signature		
Date: 06 / 0.8 /2492 Phor	Date: 06/07/2022	Phone: 1-877-227-0125	

⊠Virtual Inspection
☐In-person Inspection

Return to: ccs.informalproviders@marylan ov

	IN	ISPECTION CI	HECKLIST		
Inspection Date: 04/14/2022	Time	In: 1:45 PM	Time Out: 2:40 F	PM Result: 04/15/2	PASSED if returned by end of d
Informal Care					
Type of Care (check one):	Non-relative Info	ormal Provider C	are ⊠Relative	Informal Prov	rider Care
Provider Information					
First Name: Mary Provider ID #:	Last Name: Davis			Provide Email:	er ID: 276047
Care Location Inspected					
Street Address: Address Verified? Yes	City	County	State 2	ip Code	
Name of Children in Care (add p	ages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
THE RESERVED TO SERVED TO		11	6/11/2010	11yr / N	
		4	2/18/2018	4yr/N	
				1-2-4	
				75	
				14.0	
				100	
2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -			1.		
Safety of the Home				-	
Directions: Review and determine of pages may be used for comments.	compliance with each	ch standard. Note			ns needed. Additional , n/a – Not Applicable
Health and Safety Training:			Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed
Basic Health and Safety Training	Completed?		N/A		Relative Informal Provider
Home is free of health and safet	ty hazards:		Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed
 Is in good repair 			Y		
Is free of insect or rodent infestation			Y	No sign of in	nfestation
Is well-lit and well-ventilated			Y		70,000,000
Has hot and cold running water			Y	Steam obse	erved
Has a working inside toilet			Y	Flush obser	ved
Has utilities for cooking, lighting and heating		ng	Y		
Has a working and safe heating system			Y		
Has a working refrigerator and stove			Y	Light came	on
 Has a working telephone 			Y	Called provi	der on her cell phone
 Has operational smoke d 	letector(s)		Y	Alarm sound	ded
Has first aid kit/supplies			Y	Tape, gauze	e, scissors, band aids

Y

Standard Met

All outlets not in use covered.

Corrective Action /Timeframe if needed

Comments/Notes

Has protective coverings on any electrical outlet that is accessible to children

Harmful items are stored appropriately and away from

Alcoholic beverages	Υ	None
Guns	Υ	None
Cleaning agents	Y	Linen closet highest shelf
Poisonous substances	Υ	None
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, notuding: 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,		

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.

⊠ Batteries for Flashlight	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
☑ Portable First Aid Kit	⊠Diapers (N/A)	⊠Consider special toys or games
31 (102)11 (22)11 (22)		⊠Heavy Duty Scissors, duct tape/
⊠Thermomeler	⊠ Change of clothes	packing tape & sealing plastic/trast bags
⊠ Medications (N/A)	⊠Blanket(s)	
Items in the Disaster Supply Kit are clea	n, organized, and usable (Y/N)? Yes.	
Emergency Ready-to-Go Pack is available	ble and easily accessible in the event of an emerg	ency (Y/N)? Laundry room near exit.
Emergency Documents		
☑Informal Provider Emergency P ☑Authorization for emergency me	Preparedness Plan (this completed form) edical care	
Planning and Maintenance		
	aster Supply Kit and the Emergency Documen	ts regularly:
First Name	Last Name	
2 Pull ups, 2 children's outfits 1 large blanket 1 roll of duct tape, scissors, heavy duty, Playing phone and plastic toys, playing of the laundry area, which has no windown to the location (Primary): Transported home Provider has to the location and soon as they arrive Evac Location (Secondary): Grab the parent of the evacuation location cha	ns, soup and 4 marshmallow pie snacks	the parents. h seat belt and emergency bag, go to child parent's room (3 doors and 1 window). Enr 1. n into the car and car seat, and notified the
1 *		
	parties acknowledge that all standards have but wledge that, if approved, the home in which car	
PROVIDER		INSPECTOR
Printed Name: Mary Davis	Printed Name:	
Signature	Signature:	
Date: Phone	Date: 04/15//202	22 Phone: 1-877-227-0125

☐In-person Inspection

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 03/01/2022 Follow-up Inspection Date: 03/02/2022		e In: 1:45 PM e In: 10:30 AM	Time Out: 3:07 Pl Time Out: 10:55 AM	Result: DID NOT PASS Follow-up Result: PASSED if returned to ccs.informalproviders@maryland.gov by 4pm on 03/02/2022.	
Informal Care					
Type of Care (check one): ☐ Non-re	lative Info	ormal Provider C	are Relative	Informal Provider Care	
Provider Information					
First Name: Mary	Last Name: Davis			Provider ID: 276047	
Provider ID #:				Email:	
Care Location Inspected					
Street Address: Address Verified? Yes.	City E	County	State Z	p Code	
Name of Children in Care (add pages if ne	eeded)	Scholarship	Date of Birth	Age / Present (Y/N)	
State of the state		11	(6/11/2010)	11yr / N	
		4	(2/18/2018)	4yr / N	
				1	
				1	
				1	
				I	
Safety of the Home					
Directions: Review and determine compliance pages may be used for comments.	ce with ea	ch standard. Note		rrective actions needed. Additional - Discussed, n/a - Not Applicable	

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	Relative Informal Provider Comments/Notes Corrective Action /Timeframe if needed	
Home is free of health and safety hazards:	Standard Met Y/N		
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		
Has hot and cold running water	Y	Tested the shower	
Has a working inside toilet	Y		
Has utilities for cooking, lighting and heating	Y	Pots and pans in cabinets	
Has a working and safe heating system	Y	Tested thermostat	
Has a working refrigerator and stove	Y		
Has a working telephone	Y	Working cellphone	
Has operational smoke detector(s)	Y	Tested by provider	
Has first aid kit/supplies	Y	Only had peroxide no other medical supplies Corrective Action: Must add bandages and medical ointment Correction: Medical Kit:Scissors, gloves, gauze, bacterial ointment, sanitary wipes, band-aids, medical tape, and peroxide	
 Has protective coverings on any electrical outlet that is accessible to children 	Y	All areas had outlet coverings	

children:

Harmful items are stored appropriately and away from

Standard Met

Y/N

Comments/Notes

Corrective Action /Timeframe if needed

Stored in plastic container in laundry room

Medications of any kind	Υ	Stored in providers purse
 Matches, lighters and flammable products 	Y	Lighter stored in purse
Alcoholic beverages	Υ	Stored in storage closet on high shelf
Guns	Y	Does not own
Cleaning agents	Υ	Moved to high storage closet
Poisonous substances	Υ	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, 4yr old wears pull ups
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	No diaper age children
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	N/A	No diaper age children
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	Υ	
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 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-needed-medications) and-emergency-needed-medications)

Disaster Supply Kit

	tern is adequately included in the Disaster Supply he items are clean, organized, and usable. Commo	Kit. Be certain that the Disaster Supply Kit contains ent and note below if needed.
⊠Flashlight	⊠Bottled water	⊠Folder 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
		⊠Heavy Duty Scissors, duct tape/
⊠Thermometer	⊠Change of clothes	packing tape & sealing plastic/trash bags
⊠Medications (N/A)	⊠Blanket(s)	
Items in the Disaster Supply Kit are clean	i, organized, and usable (Y/N)? Yes.	
Emergency Ready-to-Go Pack is available exit.	le and easily accessible in the event of an emer	rgency (Y/N)? Yes. Stored in the laundry room near
Emergency Documents		
	reparedness Plan (this completed form)	
Planning and Maintenance		
Person responsible for updating the Disa	ster Supply Kit and the Emergency Documer	nts regularly:
First Name	Last Name	
	y-to-Go Pack will be transported to an evacu-	ation location:
temized Specification (if needed):		
I flashlight		
1 thermometer		
1 AAA pack of batteries		
small portable kit		
3 bottled waters		
4 cans/2 snack bars		
2 Pull ups		
1 outfit/child		
1 large blanket		
1 roll of duct tape, scissors, heavy duty, t	rash bags	
1 Cellphone and plastic toys		
	ne, and emergency to go bag, go into the down she will contact the parents about s	laundry area, shutting the windows and doors, safety
	by car, children placed in the car seat, wi ses into the home, will go contacted as well as 911.	th seat belt and emergency bag, go to Enroute to the
parent of the evacuation location char		em into the car and car seat, and notified the
Item Needed for Review on: 03/02/22 –		or medical supplies.
Signatures & Date		are the same of
	ledge that, if approved, the home in which ca	peen reviewed, and any corrections if needed have are is provided is subject to random, unannounced
PROVIDER		INSPECTOR

Printed Name: Mary Davis

Printed Name:

Signature:		Signature:		
Date:	Phone:	Date: 03/02/2022	Phone: 1-877-227-0125	

⊠Virtual Inspection
☐ In-person Inspection

Return to: ccs.informalproviders@maryland.g ov

	INSPECTION CHECKET					
Inspection Date: 08/24/2023	Time	ln: 2:30PM	Time Out: 4:11PN	Result: PAS	SED	
Informal Care	19					
Type of Care (check one):	□ Non-relative Info	rmal Provider C	are ⊠Relative	nformal Provider (Care	
Provider Information						
First Name: Charlene	Last	Name: Deloato	h	Provider ID:	524410	
Provider ID #:				Email:		
Care Location Inspected		Y SELECTION OF THE SELE		1 - A - A		
Street Address: Address Verified? Yes.	City:	Cour	nty:	State:	Zip code:	
Name of Children in Care (ad	dd pages if needed)	Scholarship	Date of Birth	Age /	Present (Y/N)	
***************************************			(01/06/2014)	9yr. / N		
					1000	

Directions: Review and determine compliance with each standard. Note pages may be used for comments.	any comments or c Y – Yes, N – No,	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 Y/N	Comments/Notes Corrective Action /Timeframe if needed
Is in good repair	Υ	All areas were clean
Is free of insect or rodent infestation	Y	No evidence of infestation
Is well-lit and well-ventilated	Υ	All lights were turned on and natural window lighting
Has hot and cold running water	Y	Tested by provider and steam observed by sink water
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 system	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 by informal team to provider's phone
Has operational smoke detector(s)	Y	Tested by provider and observed
Has first aid kit/supplies	Y	First aid kit and medical supplies stored in bathroom and provider's bedroom
 Has protective coverings on any electrical outlet that is accessible to children 	Y	All outlets were covered or occupied
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	Knives moved to high level kitchen cabinet
Medications of any kind	Y	Provider moved the medicine box to top shelf of closet
Matches, lighters and flammable products	Υ	Does not own
indicated against and managed by several	- V	Dava not num

Poisonous substances

Alcoholic beverages

Cleaning agents

Guns

Υ

Υ

Y

Υ

Does not own

Does not own

Moved to top shelf of laundry room

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 children in care
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Trash thrown away daily
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:	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>	Υ	

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.

elloudii anbbilea for each office in each, the		
⊠Flashlight	⊠Bottled water	☑ Folder 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	
⊠Medications (N/A)	⊠Blanket(s)	

Items in the Disaster Supply Kit are clean, organize	d, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is available and eas	ily accessible in the event of an emergency	(Y/N)? Y
Location of The Emergency Ready to go Pack: §	Stored in living room corner near exit	
4	ok of AA batteries, 1 first aid kit, 1 thermo	meter, no specific medications, 2 bottled
waters, 1 bag of non-perishable items (10+)	, 1 outfit (top/bottom/underwear/socks), 1	large blanket, 3 books, 1 pair of scissors, 1
roll of duct tape, 2 large trash bags and fold	der w/ EPP and ECMA docs	
- Items to be reviewed on		
Emergency Documents		
⊠Informal Provider Emergency Preparedne	ess Plan (this completed form)	
Planning and Maintenance		
Person responsible for updating the Disaster Supp	oly Kit and the Emergency Documents reg	ularly:
First Name	Last Name	
Griantene	Deloatch	and a seried by the provider
Description of how the Emergency Ready-to-Go P	Pack will be transported to an evacuation in	ocalion. Carried by the provider.
Shelter In Place Procedure:		5 the moster hadroom (1 door 0 window) The
The provider will account for the child and grab the	e ERTG and head into the walk-in closet of	or the master begroom (1 door 0 willdow). The
provider will use the sealing plastic and tape to se call or text the parent with emergency updates.	eal the door and vent if the need anses. If	lete are no windows to soul. The provider him
call of text the parent with emergency apactor.		
Evacuation Procedures	the EDTC. The provider and shild will	walk to the evacuation location which is the
Primary: The provider will account for the child, g	provider and/or child would call the parent	with initial emergency update. Upon the
arrival, the provider will communicate with	to gain instruction of where s	he and the child can shelter. Once secured
the provider will call or text the parent with emerge	ency updates.	
the provider will delit or text the parent was a	- Andrew J. Company of the Company o	
Alternate: If they could not access the primary lo	ocation, the provider will account for the ch	nild, grab the ERTG. The provider and child
will be transported by	to the evacuation location which is	Duning the transport the
provider and/or shild would call the parent with ini	itial emergency update. Upon the arrival, t	he provider will communicate with
to gain instruction of where she and the	e child can shelter. Once secured the prov	ider will call or text the parent with emergency
updates.		
Care Hours:		
Signatures & Date		i la
Acknowledgement: By signing below the parties a	cknowledge that all standards have been in	reviewed, and any corrections it needed have provided is subject to random, unannounced
been discussed. The parties also acknowledge the pop up visit which will be conducted virtually or in-	at, if approved, the nome in which care is person	browness is subject to fariability analysis a
PROVIDER		INSPECTOR
Printed Name	Ara I Printed Name:	
Charlene Deloc	atch Printed Name.	
	Signature:	
Date: 9-29-23 Phone:	Signature: Date: 08/24/2023	Phone: 1-877-227-0125

□Virtual Inspection
In-person Inspection

Return to: ccs.informalproviders@maryland.g

Inspection Date: 05/01/2023 Follow-up Inspection Date: 05/02/2023	There are	1:30PM 11:30AM	Time Out: 2:178 Time Out: 11:50	The second secon	
Informal Care	A LINE				
Type of Care (check one):	lative Inform	al Provider C	are ⊠Relativ	e Informal Provider Care	
Provider Information		17.159	Etha both A. J.		
First Name: Eleni Provider ID #:	Last Na	me: Densmo	re	Provider ID: 349600 Email:	
Care Location Inspected	ale in the		1988 1 1 1 1		
Street Address: Address Verified? Yes.	City:	County:	Stat	le Zip Code:	
Name of Children in Care (add pages if ne	eeded)	Scholarship	Date of Birth	Age / Present (Y/N)	
(222 2232			(02/22/2013)	10yr. / N	
10.19			(10/06/2021)	1yr./ N	
Safety of the Home Directions: Review and determine compliant pages may be used for comments.	ce with each	standard. Note	any comments or of Y – Yes, N – No,	corrective 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 Submitte		
Home is free of health and safety hazar	ds:	garan sama	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Is in good repair	Is in good repair		Y	All areas were clean	
 Is free of insect or rodent infestat 	ion		Y	No evidence of infestation	
Is well-lit and well-ventilated	alry		Υ	All lights were turned on and natural windor lighting	
Has hot and cold running water		Υ	Tested by provider and steam observed on camera		
Has a working inside toilet	2 . 2 inc. 5		Y	Flushed by provider and observed	
 Has utilities for cooking, lighting a 	and heating	1, 10 1 1 1	Y		
 Has a working and safe heating s 	system	Tricks)	Y	Thermostat tested by provider for cooling & heating	
 Has a working refrigerator and str 	ove	d all don't	Y	Tested by provider and observed	
Has a working telephone	TO YOU TO		Y	Outbound call made to provider's phone	
 Has operational smoke detector(s 	5)	ST. Carrie	Y	Tested by provider and observed	
Has first aid kit/supplies		Y	Medical Supplies: Band-Aid, Gauze, Alcohol Wipes and Ointment stored in locked kitchen cabinet		
Has protective coverings on any of accessible to children	electrical out	let that is	Y	All outlets covered and/or occupied	
Harmful items are stored appropriately a children:	nd away fro	m	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Sharp or pointed items	Territoria	Swining,	Y	Stored in high kitchen cabinet with lock	
Medications of any kind		Cathad Incolo	Y	Stored in provider's bedroom	
Matches lighters and flammable products			Y	Stored in high kitchen cabinet with lock	

Υ

Stored in high kitchen cabinet with lock

Does not own

Stored under kitchen sink with lock

Alcoholic beverages

Cleaning agents

Guns

Matches, lighters and flammable products

Poisonous substances	Υ	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	Diapers and wipes in changing area of playroom
rash, garbage and wet and soiled diapers are disposed of in a anitary manner.	Υ	Disposed daily in trash can
child is changed immediately when s/he has a soiled or wet iaper, clothing or bedding.	Υ	
Diapering procedures are followed.	Υ	
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	en trouger properties (constant
A child in care is not subjected to any form of neglect, including:	Y and the second	Early and hazar result steam construction with the construction 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 	A Same The Control of	
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.	Υ	and Burney

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
- ⊠Portable First Aid Kit
- Thermometer

- ⊠Bottled water
- ⊠Non-perishable food
- ⊠Diapers
- - Change of clothes

- Folder or binder for EPP documents
- ⊠Backpack(s) or carrying case(s)
- ⊠Consider special toys or games
- packing tape & sealing plastic/trash

Medications	Blanket(s)
liems 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
waters, 2 canned and 6 dry snacks, 2 diapers	ht, 2 extra AA batteries, 1 first aid kit, 1 thermometer, no spec meds, 3 bottled w/ 1 pk of wipes, 2 outfits(top/bottom), 1 large blanket, 1 ok of flash cards, 1 ball, 1 ash bags, and folder w/ EPP and ECMA per child
Items to be reviewed on 05/02/2023: Corrected & F	Reviewed on 05/02/2023
- EPP documents (all 5 pages) and Description	of all Evacuation Procedures by Provider
Emergency Documents	
	s Plan (this completed form)
Planning and Maintenance	
Person responsible for updating the Disaster Supply	Kit and the Emergency Documents regularly:
	st Name
Shelter In Place Procedure: The provider will call each child's name and gather the provider will use the sealing plastic and tape secure emergency is over.	the children and the ERTG and head into the basement (2 doors 1 window), the the areas if needed. The provider will call and text the before and after the
Evacuation Location(s) Procedures:	
once she and the children are secured in the location Alternate: If they could not access the primary local safety seat. Younger child in rear-facing car seat and	in which she will the provider and children the provider will call or text the parent immediately when the emergency began and
Signatures & Date	
Acknowledgement: By signing below the parties acknowledgement. The parties also acknowledge that, pop up visit which will be conducted virtually or in-per	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: Eleni Densm	ore Printed Name:
Signature:	Signature:
Date: 6 06 2023 Phone:	Date: 05/02/2023 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

Return to: ccs.informalproviders@maryland.o

	INSPECTION C	CARE HECKLIST	ov
Inspection Date: 05/10/2022 Follow Up Date: 05/11/2022 Informal Care	Time In: 1:45PM Time In: 11:00AM	Time Out: 2:47PI	Follow Up: Approved
Time of County	on-relative Informal Provider C		Informal Provider Care
First Name: Eleni Provider ID #	Last Name: Densmo	ore	Provider ID: 349600
Care Location Inspected	9100		Email:
Street Address: Address Verified? Yes	County:	State	Zip Code:
Name of Children in Care (add pages	if needed) Scholarship	Date of Birth	Age / Present (Y/N)
		2/22/2013	9 yrs / No, at school
- Della		10/6/2021	6 mos / No, with Parent
Comment of the land of the lan		1	
		FEET ST	

Directions: Review and determine compliance with each standard. N pages may be used for comments.	ote any comments or Y - Yes, N - No	corrective actions needed. Additional , D - Discussed, n/a - Not Applicable
Health and Safety Training:	Standard Met	The state of the s
Basic Health and Safety Training Completed?	N/A	Informal Relative Provider
Home is free of health and safety hazards:	Standard Met Y/N	
Is in good repair	Y	The state of the s
Is free of insect or rodent infestation	Y	
Is well-lit and well-ventilated	Y	
Has hot and cold running water	Y	
Has a working inside toilet	Y	Cabinet under sink locked with cleaning agent
 Has utilities for cooking, lighting and heating 	Y	sound; once sink locked with cleaning agent
Has a working and safe heating system	Y	
Has a working refrigerator and stove	Y	Light observed when opened
Has a working telephone	Y	Cell phone provider was called on
 Has operational smoke detector(s) 	Y	Smoke detector in basement level observed
Has first aid kit/supplies	Y	smoke detector in basement level observed
 Has protective coverings on any electrical outlet that is accessible to children 	Y	12 Outlets covered
armful items are stored appropriately and away from illdren:	Standard Met	Comments/Notes Corrective Action /Timeframe if needed
Sharp or pointed items	Y	Relocated to the top of the refrigerator
Medications of any kind	Y	Locked in cabinet
Matches, lighters and flammable products	Y	High Shelf
Alcoholic beverages	Y	
Guns	Y	High cabinet
Cleaning agents	Y	None
Poisonous substances	Y	Locked under sink 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.	Υ	Sometive Action / Timetrame it 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.	Υ	
Diapering procedures are followed.	Υ	
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:	= 0 = 0 = 0 = 0 = 0 = 0 = 0 = 0 = 0 = 0	
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.

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	
⊠Batterles for Flashlight	⊠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)	
Items in the Disaster Supply Kit are clea	n organized and weekle occurs	
Emergency Ready-to-Go Pack is availal	ple and easily accessible in the event of an emerge	nney (V/N)2 V
Location of The Emergency Ready to	go Pack: Family room	nicy (fin)? Y
Item Specification (If needed)	1.5500	
Band-Aids playes gauge tage	Service of Section 1	
2 onesies for baby, 2 blankets. One shir	nt, wipes, q-tips, hand sanitizer, hydrogen Peroxide, t and one pair of pants for the diapers, wipes,	
316oz. bottles of water, pedia lite, 4 bab	t and one pair of pants for dispers, wipes, y food cups, cookies, granola bars, peanuts, 2 chef	_
Books, toys, yarn to make crafts	cher	Boyardee cans
Items to review on 05/11/2022 if need	ed; Observed on 05/11/2022	
Electrical covers in kitchen, Sharp items	and pointed items	
	and pointed items, smoke alarm in the house, Evac	cuation procedure Observed on 05/11/2022.
Emergency Documents	100 No.	
⊠Informal Provider Emergency P	reparedness Plan (this completed form)	
Authorization for emergency me	edical care	
Planning and Maintenance	The same and the same	
Person responsible for updating the Disa	aster Supply Kit and the Emergency Documents of	regularly
First Name	Last Name	egularly.
Shelter In Place Procedure: The provider will gather the children and	y-to-Go Pack will be transported to an evacuation emergency back down to the basement that has plastic and tape from the emergency to go back. If	
Shelter In Place Procedure: The provider will gather the children and the provider would seal the shelter with p secured shelter. Evacuation Procedures: Gather the children and bag and shelter in the basement(0 doors and wind bag and head to be year the children and bag and head to be year the children and bag and head to be year the children and bag and head to be year the children and bag and head to be year the children and bag and head to be year the children and bag and head to be year the children and the provider where the children and the children and the provider where the provider where the children and the provider where the provider where the children and the provider where the provider wh	emergency back down to the basement that has plastic and tape from the emergency to go back. If the print the provider will secure the baby in a car seat and the provider will receive instruction.	2 doors and 1 window. If the need should aris Provider would call the parent once in the mary location. The Provider and the children will gather the children and emergency to go
Shelter In Place Procedure: The provider will gather the children and the provider would seal the shelter with p secured shelter. Evacuation Procedures: Gather the children and bag and wind shelter in the basement(0 doors and wind bag and head to her vehicle where she we evacuation location which is the library. The with the parent and 911 immediately at the signatures & Date	emergency back down to the basement that has plastic and tape from the emergency to go back. It is the print the emergency to go back. If they could not shelter there the provider will secure the baby in a car seat and the interest of the emergency.	2 doors and 1 window. If the need should aris Provider would call the parent once in the mary location. The Provider and the children will gather the children and emergency to go r booster seat before driving to the alternate shelter upon arrival. The provider will be in tour
Shelter In Place Procedure: The provider will gather the children and the provider would seal the shelter with p secured shelter. Evacuation Procedures: Gather the children and bag and shelter in the basement(0 doors and wind shelter in the basement(0 doors and wind bag and head to her vehicle where she we evacuation location which is the library. The with the parent and 911 immediately at the same of the parent shelter in the parent and 911 immediately at the parent shelter in the parent shelter i	emergency back down to the basement that has plastic and tape from the emergency to go back. It is the print the emergency to go back. If they could not shelter there the provider ill secure the baby in a car seat and her her back in the Provider will receive instruction on where to see time of the emergency.	2 doors and 1 window. If the need should aris Provider would call the parent once in the mary location. The Provider and the children will gather the children and emergency to go r booster seat before driving to the alternate shelter upon arrival. The provider will be in tour
Shelter In Place Procedure: The provider will gather the children and the provider would seal the shelter with p secured shelter. Evacuation Procedures: Gather the children and bag and shelter in the basement(0 doors and wind bag and head to her vehicle where she we evacuation location which is the library. The with the parent and 911 immediately at the second shelter in the parent and 911 immediately at the second shelter in the parent and 911 immediately at the parent shelter in the parent and 911 immediately at the second shelter in the parent and 911 immediately at the second shelter in the parent and 911 immediately at the shelter in the parent and 911 immediately at the second shelter in the parent and 911 immediately at the shelter in the s	emergency back down to the basement that has plastic and tape from the emergency to go back. It is the print tows) If they could not shelter there the provider will secure the baby in a car seat and the help of the Provider will receive instruction on where to see time of the emergency. And the print the print the provider will secure the baby in a car seat and the help of the provider will receive instruction on where to see time of the emergency.	2 doors and 1 window. If the need should aris Provider would call the parent once in the mary location. The Provider and the children will gather the children and emergency to go r booster seat before driving to the alternate chelter upon arrival. The provider will be in tour reviewed, and any corrections if needed have provided is subject to random, unannounced
Shelter In Place Procedure: The provider will gather the children and the provider would seal the shelter with p secured shelter. Evacuation Procedures: Gather the children and bag and shelter in the basement(0 doors and wind bag and head to her vehicle where she we evacuation location which is the library. The with the parent and 911 immediately at the second shelter in the parent and 911 immediately at the second shelter in the parent and 911 immediately at the parent shelter in the parent and 911 immediately at the second shelter in the parent and 911 immediately at the second shelter in the parent and 911 immediately at the parent shelter in the parent and 911 immediately at the second shelter in the parent and 911 immediately at the second shelter in the parent shelter in the passent shelter i	emergency back down to the basement that has plastic and tape from the emergency to go back. It is the print tows) If they could not shelter there the provider will secure the baby in a car seat and the help of the Provider will receive instruction on where to see time of the emergency. And the print the print the provider will secure the baby in a car seat and the help of the provider will receive instruction on where to see time of the emergency.	2 doors and 1 window. If the need should aris Provider would call the parent once in the mary location. The Provider and the children will gather the children and emergency to go r booster seat before driving to the alternate shelter upon arrival. The provider will be in tour
Shelter In Place Procedure: The provider will gather the children and the provider would seal the shelter with p secured shelter. Evacuation Procedures: Gather the children and bag and shelter in the basement(0 doors and wind bag and head to her vehicle where she we evacuation location which is the library. The with the parent and 911 immediately at the signatures & Date Acknowledgement: By signing below the popen discussed. The parties also acknowledge up visit which will be conducted virtual.	emergency back down to the basement that has plastic and tape from the emergency to go back. It is the print dows) If they could not shelter there the provider will secure the baby in a car seat and here he Provider will receive instruction on where to see time of the emergency. And the print down in the provider will receive instruction on where to see time of the emergency.	2 doors and 1 window. If the need should aris Provider would call the parent once in the mary location. The Provider and the children will gather the children and emergency to go r booster seat before driving to the alternate chelter upon arrival. The provider will be in tour reviewed, and any corrections if needed have provided is subject to random, unannounced
Shelter In Place Procedure: The provider will gather the children and the provider would seal the shelter with p secured shelter. Evacuation Procedures: Gather the children and bag and shelter in the basement (0 doors and wind bag and head to her vehicle where she we evacuation location which is the library. The with the parent and 911 immediately at the shelter in the parent and 911 immediately at the shelter in the parent and 911 immediately at the parent shelter in the parent and 911 immediately at the shelter in the parent and 911 immediately at the shelter in the parent and 911 immediately at the properties also acknowledgement: By signing below the parent discussed. The parties also acknowledgement which will be conducted virtual provider. Printed Name: Ele n i Department of the provider in the parties also acknowledgement. By signing below the parent discussed. The parties also acknowledgement is the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also acknowledgement. By signing below the parent of the parties also ack	emergency back down to the basement that has plastic and tape from the emergency to go back. It is the print tows) If they could not shelter there the provider ill secure the baby in a car seat and here he Provider will receive instruction on where to see time of the emergency. Arties acknowledge that all standards have been edge that, if approved, the home in which care is lay or in-person. Printed Name:	2 doors and 1 window. If the need should aris Provider would call the parent once in the mary location. The Provider and the children will gather the children and emergency to go r booster seat before driving to the alternate chelter upon arrival. The provider will be in touch the children arrival of the provider will be in touch the children and the children will be in touch the children will

☑ Virtual Inspection ☐ In-person Inspection

Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST

Inspection Date:	Time	in:	Time Out:	Result:	
6/1/2021	10:00	AM (12:00 PM	APPROVED	
Informal Care		The same of	WE WAS TO	0.716	LINE STATE
☑ Type of Care (check one): ☐	Non-relativ	e Informal Provid	ler Care ☑ Relat	ive Informal Provider	Care
Provider Information					
First Name:	Lacti	Name:		Provider ID:465	091
François François	Diadi			Email:	
Care Location Inspected					
Street Address:		City	County	State	Zip Code
Name of Children in Care (add pages if	needed)	Scholarship	Date of Birth	Age / Pri	esent (Y/N)
		1000 100	05/12/2016	11/Y	
				IY	
				/Y	
			1	/Y	
				/Y	
				/Y	

Directions: Bouley and determine compliance with such star-	dand Mata and accord	
Directions: Review and determine compliance with each stan Additional pages may be used for comments.		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?		
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	
Has a working inside toilet	2 Y	
 Has utilities for cooking, lighting and heating 	Y	
Has a working and safe heating system	Υ	
Has a working refrigerator and stove	Y	
Has a working telephone	Y	House phone & Mobile phones only
Has operational smoke detector(s)	Y	
Has first aid kit/supplies	Y	
 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/Notes Corrective Action /Timeframe if needed
Sharp or pointed items	Y	
Medications of any kind	Υ	
Matches, lighters and flammable products	Y	
Alcoholic beverages	Y	
Guns	N/A	
Cleaning agents	Y	
		1

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 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 Units	Y	Verbally agreed to comply

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 ☑ Folder or binder for EPP documents \checkmark Batteries Non-perishable food Backpack(s) or carrying case(s) Portable First Aid Kit Diapers Consider special toys or games Thermometer Change of clothes Scissors, tape & sealing plastic

☑ Medications ☑ Blanke	t(s)
Items in the Disaster Supply Kit are clean, organized, and usable	e (Y/N)? Y
Emergency Ready-to-Go Pack is available and easily accessible	in the event of an emergency (Y/N)? Y
Disaster Supply Kit Comments/Notes: Stored in the hallway closet on the main level.	
Emergency Documents	
 ☑ Informal Provider Emergency Preparedness Plan (this co ☑ Authorization for emergency medical care 	empleted form)
Planning and Maintenance	
Person responsible for updating the Disaster Supply Kit and the First Name Last Name Description of how the Emergency Ready-to-Go Pack will be tra	
care. Then walk out the door to the backyard area. The eya	nain level hallway closet, verbally yell the Code Word to the child in scuation location is the Neighbor's house at and alert them of the relocation. The Provider and child will stay
Signatures & Date	
Acknowledgement: By signing below the parties acknowledge th been discussed.	nat all standards have been reviewed, and any corrections if needed have
PROVIDER	INSPECTOR
FRANCOIS DIADHIOU	Printed Name:
Signature:	Signature:

Date: 06/04/2021 Phone:

Date:6/1/2021

Phone: 410-767-7832

⊠Virtual Inspection □In-person Inspection

Maryland State Department of Education/Office of Child Care Child Care Scholarship Program

Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST Return to: ccs.informalproviders@maryland.gov

			UKLIST		
Inspection Date: 12/14/2021	Time In: 3:	30 PM	Time Out: 4:27	Result: App	proved
Informal Care			MET 18	a Harris	
Type of Care (check one):	lon-relative Informal I	Provider Car	e ©Relative Ir	nformal Provider	Care
Provider Information					
First Name: Maria	Last Name	: Diaz		Provider ID	NOT IN CCATS
				Email:	
Care Location Inspected					
Street Address: Address Verified?: Yes	City		County	State	Zip Code
Name of Children in Care (add page	s if needed) Sch	olarship	Date of Birth	Age /	Present (Y/N)
			06/13/2020	1 year /Y	
				1	
				1	
				1	

Safety	of the Home		
	Directions: Review and determine compliance with each star Additional pages may be used for comments.		ments 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 Safety Training Completed?	N/A	
Home h	s 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	Baseboards and cabinets observed.
•	Is well-lit and well-ventilated	Y	Natural and artificial lighting observed.
•	Has hot and cold running water	Y	
•	Has a working inside toilet	Y	
	Has utilities for cooking, lighting and heating	Y	Artificial lighting observed in the home
•	Has a working and safe heating system	Y	Turned from 67 degrees to 70 degrees
•	Has a working refrigerator and stove	Y	Frozen food and refrigerator light observed. 4 burners on stove top observed.
•	Has a working telephone	Y	The Provider made an outbound call.
•	Has operational smoke detector(s)	Y	1 smoke detector was observed.
	Has first aid kit/supplies	Y	Alcohol Wipes, Burn Gel, hand Sanltizer, Bandages, Gloves, Gauze
•	Has protective coverings on any electrical outlet that is accessible to children	Y	Taped b/c the child can remove the plastic outle covers.
Harmfu childre	l items are stored appropriately and away from n:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
•	Sharp or pointed items	Y	
es () • .	Medications of any kind	Y	Kept in a high kitchen cabinet.
•	Matches, lighters and flammable products	Y	
•	Alcoholic beverages	Y	Not kept in the home
•	Guns	Y	Not kept in the home

Cleaning agents	Y	Kept in a locked cabinet in the kitchen
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	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	ln .
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Υ	
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 (5)	ν,
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 local epartment 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 that the items are clean, organized, and usable. Comment and note below if needed.

 ☑Flashlight
 ☑Bottled water
 ☑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

Heavy Duty Scissors, Duct Tape/ **⊠Thermometer** □ Change of clothes Packing Tape & Sealing Plastic/ Trash **⊠Medications** ⊠Blanket(s) Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Yes, kept in a black and white polka dot duffel bag. 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 a closet near the front door. Item Specification (if needed): Yellow and Black Flashlight **6 AA Batteries** Ointment, Gloves, Bandages, Alcohol Wipes, Gauze, Tape. **Forehead Scanner** Liquid Saline and Tylenol 2 16.9 Oz Bottled Water Rice Cracker and canned fruit 4 Diapers Black and Yellow long sleeve top, Grey Sweatpants Light blue blanket with stars EPP and ECMA Navy B/kie and 2-5 word and animal Books Grey Scissors, Packing at **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: First Name Last Name: Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: Shelter in Place Procedures: The Provider will call the parent to inform her of the emergency. She will then grab the child and the ERTGB and go to the master bedroom(2 doors 2 windows). **Evacuation Procedures:** The Provider will call the parent to inform her of the emergency. She will then grab the child and the ERTGB and walk which she has the key in order to gain entrance. The provider and the child will shelter in Joyce's room(2 doors 2 doors). If the provider cannot shelter ant the primary location she will call the parent to inform her of the emergency. She will then grab the child and the ERTGB and secure the child in a car seat. She will then go to by car. The provider has a key to the location and will shelter in her bedroom (1 window 2 doors). 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:** Signa

Signature:

Date: 12/14/2021

Phone: 1-877-227-0125

50
□Virtual Inspection
In-person Inspection

Return to:	
ccs inform	alproviders@maryland o
OA	asproviders@manu-
	yland o

		Marto			1
Inspection Date: 07/01/2022 Follow-up Inspection Date: 0	7/05/2022	Time In: 3:32PM Time In: 8:00 AM	Time Out: 4:57 Pt Time Out: 8:13 Al	M Resu	III: APPROVED
Informal Care		A family Provider (are //Relative	led	
Type of Care (check one)	Non-relati	ve Informal Provider (Sale N. Merana	mormal P	rovider Care
Provider Information		Last Name: Dixon		Den	
First Name Corresha		Last Name. Dixon		Ema	der ID 443483
Provider ID #				2714	-
Care Location Inspected Street Address:	Ci	Coun	ty	State	Zip code
Address Venfied? Yes.					7 - 7 - 7
Name of Children in Care (add pages if need	ed) Scholarship	Date of Birth	Age	/ Present (Y/N)
			(04/28/2011)	11yr	/ N
			(06/17/2016)	6yr	/ N
			(03/13/2014)	8yr	/ N
			1		
Safety of the Home					
Directions: Review and determ	nine compliance v	vith each standard. No	te any comments or o	orrective ac	chons needed. Additional
pages may be used for commi	ents.			- Discuss	ed, n/a - Not Applicable
Health and Safety Training		141	Standard Met Y/N	Correct	rits/Notes ive Action /Timetrame if needed
Basic Health and Safety Train	ning Completed?)	Y		Relative Informal Care
Home is free of health and	safety hazards:		Standard Met Y/N	Correct	mts/Notes Ive Action /Timeframe if needed
 Is in good repair 			Y		All areas were clean and organized
Is free of insect or re	Control of the second of the s		Y		No evidence of infestation
Is well-lit and well-vi	entiated		Y		Wetl-is and well-ventilated
 Has hot and cold ru 	nning water		Y	Ot	bserved and tested hot water and cold
Has a working insid			Y	-	Observed and flushed by provider
Has utilities for cool	water the state of	Andrew Control of the	Y		Organized in kitchen cabinets
Has a working and :			Y		
Has a working refrig			Y		
Has a working telep			Y		Everyone has cellphones
Has operational sm	oke detector(s)		Y		Observed and tested
Has first aid kit/supp			Y		First aid kit and additional supplies
Has protective cove accessible to childre		trical outlet that is	Y		Not required due to their ages
armful items are stored app hildren:	propriately and	away from	Standard Met Y/N	Commer	nts/Notes ve Action /Timeframe if needed
Sharp or pointed item	s		Y		
 Medications of any kit 			Y		Does not own
Matches, lighters, and	The same of the sa	furte	· ·	1.00	hter stored in cabinet above the stove
 Alcoholic beverages 	prot		· ·		Does not own
• Guns			Y		Does not own
Cleaning agents			+ -		Stored on top of the fridge
The state of the s			. v		Side of the second seco

Does not own

Revised 10 2021

GENERAL CLEAN INCO CHANGE	Standard Met	Comments/Notes
GENERAL CLEANLINESS STANDARDS	Y/N	Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	No diaper age children.
Trash, garbage, and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a solled or wet diaper, clothing, or bedding.	Y	
Diapening procedures are followed.	Y	No diaper age children.
Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting. Diapening. 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.

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

SSFolder or binder for EPP documents

⊠Batteries for Flashlight

®Non-perishable food

⊠Change of clothes

⊠Backpack(s) or carrying case(s)

⊠Portable First Aid Kit

⊠ Diapers

©Consider special toys or games ©Heavy Duty Scissors, duct tape/

Page 2 of 3

Revised 10-2021

		packing tape #
		packing tape & sealing plastic/trash
⊠Medications	⊠ Blanket(s)	
items in the Disaster Supply Kit are	clean, organized, and usable (Y/N	n? Y
Emergency Ready-to-Go Pack is an	vallable and easily accessible in the	e event of an emergency (Y/N)? Y, near the front door exit.
Emergency Documents		TOOL DEST.
⊠Informal Provider Emergence ⊗ Authorization for emergence	cy Preparedness Plan (this com cy medical care	pleted form)
Planning and Maintenance		
Person responsible for updating the	Disaster Supply Kit and the Em	ergency Documents regularly:
First Name	Last Name	
Description of how the Emergency i	Ready-to-Go Pack will be transp	orted to an evacuation location:
Item Specification (if-needed):		
 2 thermometers, 4 canned for cellphones, 2 blankets, 3 c and ECMA per child. 	ids, 4 bottled waters, no medical jutfits/1 per child, 1 roll of duct ta	tions, no diapers, 5 extra AA batteries, 2 flashlights, 2 books and their ipe, 4 trash bags, 1 first aid kit, 1 hardware scissors, folder w/ EPP
Shelter-in-Place Procedures: The basement area (3 windows 2 doors the emergency begins and will stay		and do the counting method with the to-go bag and go into the long the windows. The provider will contact the guardian as soon as
Evacuation Location(s):		
Primary – Provider will gather the car seat, and Lorii in a botten go into his basement area. The possible.	children and do the counting met oster seat, they will drive to e basement has (2 doors 3 wind	hod and grab the to-go bag. Kharon will be strapped into his seatbelt, Provider will use her spare key to enter the home and ows). Provider will call, text, and email the guardian as soon as
Alternate - Provider will gather the seat and in a booster seat. The Upon entry they will go into the bas settled.	ev well drive to her	od, with to-go bag. She will secure seatbelt, and either have key access or be let in by the homeowner. Provider will call, text, and email the guardian as soon as they are
tems to be reviewed on 07/05/22 First aid kit for emergency	: Corrected & Reviewed on 07 houseware/hardware scissors.	05/2022 needs EPP and ECMA per child printed
Signatures & Date		
Acknowledgement: By signing below	w the parties acknowledge that a	ill standards have been reviewed, and any corrections if needed have is home in which care is provided is subject to random, unannounced
pop-up visit which will be conducted	virtually or in-person.	and the second of second to random, unannounced

Phone: 1-877-227-0125

Phone:

Signature

Date:

Signature:

Date 07/05/2022

☐In-person Inspection	

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 02/08/2023 Follow-up Inspection Date: 02/08/2023	Time In: 9:00AM Time In: 11:00AM	Time Out: 10:12		llow-up Required. Result: PASSED	
Informal Care					
Type of Care (check one): Non-rel	ative Informal Provide	er Care Relative	Informal Provide	r Care	
Provider Information					
First Name: Chanel Provider ID #:	Last Name: Dozier		Provider II	Provider ID: 504295	
Care Location Inspected			- Cindia		
Street Address: City: Address Verified? Yes.	Cou	inty:	zip C	ode:	
Name of Children in Care (add pages if ne	eded) Scholarsh	ip Date of Birth	Age /	Present (Y/N)	
		(05/26/2022)	6 mos. /Y		
		(05/26/2022)	6 mos. / Y		

Safety of the Home		
Directions: Review and determine compliance with each standard. No pages may be used for comments.		corrective 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	Non-Relative Informal Care – Certificate Submitted
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	Υ	No evidence of infestation
Is well-lit and well-ventilated	Y	Lots of artificial and access to natural lighting
Has hot and cold running water	Y	Tested by provider and observed
Has a working inside toilet Look under sink	Y	Tested by provider and observed in both bathrooms
 Has utilities for cooking, lighting and heating 	Y	
 Has a working and safe heating system 	Y	Tested the digital thermostat and observed
 Has a working refrigerator and stove 	Y	
Has a working telephone	Y	Made call to provider's cellphone and parent's home phone at care location
 Has operational smoke detector(s) 	Y	
Has first aid kit/supplies	Y	Band-Aids, Alcohol wipes, baby medicine, gauz medical tape, ointments
 Has protective coverings on any electrical outlet that is accessible to children 	Y	All outlets observed and either occupied or had the inner sheath covering
larmful items are stored appropriately and away from frildren:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Sharp or pointed items	Y	Corrective Action: Provider and parent will add a safety lock
Medications of any kind	Y	Stored on a high shelf in closet
Matches, lighters and flammable products	Y	Moved by provider and parent to a high level cabinet

Alcoholic beverages	Y	Does not own
Guns	Y	Does not own
Cleaning agents	Y	All cleaning agents moved to high level shelf and family bathroom
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	Clean diapering area
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Garbage area in kitchen and disposed of daily
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: Tolleting: Diapering: Before food preparation and eating: After playing outdoors; and At other times when necessary to prevent the spread of disease.	Y	The children have a separate sink for their usage
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.	Υ	
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.

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.

Separately 1

⊠Folder or binder for EPP documents ⊠Batteries for Flashlight ⊠Non-perishable food ⊠Backpack(s) or carrying case(s)

⊠Portable First Aid Kit	EDiscore	MC-neider enseigl tour or games
SPORADIS FIRST AID KIL	⊠Diapers	☑Consider special toys or games
⊠Thermometer	⊠Change of clothes	
⊠Medications	⊠Blanket(s)	
Items in the Disaster Supply Kit are clean, orga	anized, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is available and	deasily accessible in the event of an emer	gency (Y/N)? Y
Location of The Emergency Ready to go Pa	uck: In the front room near exit	
1 pair of scissors, 1 thermometer, First aid formula, 2 can of tuna, backpack carrying and ECMA docs per child Items to review on 02/08/2023 if needed: Co	d kit (Band-Aids, Gauze, Ointment, Alcoho case, 2 blankets, diapers & wipes, 2 smal prected & Reviewed on 02/08/2023	ights, 1 extra battery, 1 roll of duct tape, 3 trash bags, I wipes), baby cereal, 6 baby jars & ready-made II children's books, 1 outfit per child, binder with EPP
 Lock added to knife drawer in kitchen - 	corrected	
Emergency Documents		
⊠Informal Provider Emergency Prepare ⊠Authorization for emergency medical		
Planning and Maintenance		
Person responsible for updating the Disaster S	Supply Kit and the Emergency Documer	nts regularly:
First Name	Last Name	
Shifra	Natiga	sting to estimate Company to the second to
Description of how the Emergency Ready-to-G Shelter In Place Procedure:	50 Pack will be transported to an evacua	ation location: Carried by provider.
The provider will grab the ready to go bag and	eal up any areas with large trash bags a	o downstairs to the closet room in the basement (1 and duct tape. Once the babies are secured and all
Evacuation Procedures:	, , , , , , , , , , , , , , , , , , , ,	
Primary: The provider will grab the emergency and secure They will give them access. Provider and children wi once they are secured in the location.	and upon arrival she v	with individual seating (side by side) will ring the door bell and/or call the ows) and will contact the parents via call or text
Alternate:		
The provider will grab the emergency bag and secure them in. They will walk over to the other	r neighbor's home and ring the bell and	side by side) and call the homeowner for entry access. Upon entry r text the parent once they are secured and when
Signatures & Date		
	that, if approved, the home in which car	een reviewed, and any corrections if needed have e is provided is subject to random, unannounced
PROVIDER		INSPECTOR
	Printed Name	
Signatur	Signature:	
Phone	Date: 02/08/202	23 Phone: 1.877.227.0125

	Maryland State Department of Education/Office of Child Care
✓ Virtual Inspection	
-	INFORMAL CARE
	INSPECTION CHECKLIST

	Time In: 2:00 PM	Time Out 3:36 PM	Result:	
Informal Care				
Type of Care (check one): Care	Non-relative Informal	Provider Care	Relative Informal Provider	
Provider Information				
First Name: Betty License #:	Last Name: Dunn	ock	Provider ID: 416589	
			Email	
Care Location Inspected				
Street Address:	City:	County:	State: Zip Code:	
Name of Children in Care (add pages it	f needed) Scholarship	Date of Birth	Age / Present (Y/N)	
		05/19/2008	13 / N	
		08/25/2013	8 /N	
		04/09/2010	11 / N	
	_		1	
			ι	
Safety of the Home				
\$1,000,000 pt. 700,000 pt. 700	compliance with each standar	d Note any comme	nts or corrective actions needed. Additional	
pages may be used for comments				
Health and Safety Training:		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Basic Health and Safety Train	ing Completed?	N/A	Relative Informal Care	
Home is free of health and safety ha	zards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Is in good repair		Y	Surveyed all common areas: kitchen, living roo and dining area	
 Is free of insect or rodent infesta 	ation	Y		
Is well-lit and well-ventilated		Y	All areas had bright light and windows for natura	
Has hot and cold running water			light access	
Has hot and cold running water		Y	light access Tested the water and used thermometer to test hot water side	
Has hot and cold running water Has a working inside toilet Has utilities for cooking, lighting		Y	Tested the water and used thermometer to test	
Has a working inside toilet	and heating	Y	Tested the water and used thermometer to test	
Has a working inside toilet Has utilities for cooking, lighting	and heating	Y Y Y	Tested the water and used thermometer to test hot water side	
Has a working inside toilet Has utilities for cooking, lighting Has a working and safe heating	and heating	Y Y Y	Tested the water and used thermometer to test hot water side Tested thermostat for heat and cool temps	
Has a working inside toilet Has utilities for cooking, lighting Has a working and safe heating Has a working refrigerator and s	and heating system stove	Y Y Y Y	Tested the water and used thermometer to test hot water side Tested thermostat for heat and cool temps Tested the stove and opened the fridge/freezer	
Has a working inside toilet Has utilities for cooking, lighting Has a working and safe heating Has a working refrigerator and s Has a working telephone	and heating system stove	Y Y Y Y Y Y	Tested the water and used thermometer to test hot water side Tested thermostat for heat and cool temps Tested the stove and opened the fridge/freezer Family and provider all have cellphones Tested both smoked detectors in the living room	

Has a working telephone Has apparational amelia detector(a)		Y	Family and provider all have Tested both smoked detectors in	ANY COMPANY OF THE PROPERTY OF
Has operational smoke detector(s) Has first aid kit/supplies		Y	and basement Using same kit for emergence	v to-go ba
Has first aid kit/supplies			All outlets were covered except	kitchen ou
 Has protective coverings on any electrical out accessible to children 	tiet that is	Y	used for kitchen appliances, and she would get covers for when s the area	
	3.			
armful items are stored appropriately and away	Standard Met		ments/Notes	
Sharp or pointed items	Y	P 15/25/732	e in the drawers, but placed in a higher	
Medications of any kind	D	M	cabinet Medicine cabinet above sink, no lock	
Matches, lighters and flammable products	Υ		Does not own	
Alcoholic beverages	Υ		Does not own	
• Guns	Y		Does not own	
Cleaning agents	D Y	D Under the kitchen sink		
Poisonous substances ENERAL CLEANLINESS STANDARDS	Standard Met		ments/Notes	
Il areas of the home are kept clean, including	Y/N		ective Action /Timeframe if needed	
apering area.	Y	Diap	ering does not apply to these children. No diaper age	
rash, garbage and wet and soiled diapers are	Υ		No diaper age children.	
sposed of in a sanitary manner. hild is changed immediately when s/he has a soiled	Y		The children change themselves.	
wet diaper, clothing or bedding. iapering procedures are followed.	N/A		No diaper age children.	
andwashing procedures are followed. Provider and				
nild's hands washed thoroughly with soap and warm inning water after:				
Toileting. Diapering.		80	ap at the kitchen and bathroom soap	
Before food preparation and eating.	Y	30	station	
After playing outdoors; and				
 At other times when necessary to prevent the spread of disease. 				
HILD ABUSE, NEGLECT AND MISTREATMENT	Standard Met Y/N		ments/Notes ective Action /Timeframe if needed	
child is not subject to any form of abuse,		2500	in instance,	
cluding: Physical injury	Ŷ			
Any sexual abuse				
Mental injury child in care is not subjected to any form of		-		
eglect, 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	Y			
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.				
child in care is not subjected to mistreatment, cluding:				
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 Shouting Chapter Plaining Plaining	Υ			
 Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap 				
Putting pepper or other spicy or distasteful items in a child's mouth	4			
Requiring a child to stand on one foot as				
Tying child to a cot or other equipment				
he provider immediately reports any suspected				
hild abuse, neglect or mistreatment by calling 11 and your local Department of Social Services	Y			
hild Protective Services Unit.				-
mergency Ready-to-Go Pack				
The Emergency Ready-to-Go Pack must be availal			event of an emergency. This contains a	
Disaster Supply Kit (including needed medications) isaster Supply Kit) <u>and</u> Emergency D	ocuments.		
Directions: Review and determine that each item is	is adequately includ	ed in th/e Dis	saster Supply Kit. Be certain that the	
Disaster Supply Kit contains enough supplies for eausable. Comment and note below if needed.	each child in care. A	lso, that the it	tems are clean, organized, and	
✓ Flashlight	✓ Bottled w	vater •	Folder or binder for EPP documents	V
✓ Batteries	✓ Non-peris	shable	Backpack(s) or carrying case(s)	~
✓ Dartable Eight Aid Vit	Diapers	_ TO	Consider special toys or games	V
✓ Portable First Aid Kit			Scissors, tape & sealing plastic	
✓ Thermometer	✓ Change of clothes			
✓ Medications	✓ Blanket(s)	5)		
Items in the Disaster Supply Kit are clean, organized, and	usable (Y/N)?	Υ		
Emergency Ready-to-Go Pack is available and easily acce	essible in the event	of an emerge	ency (Y/N)? Y	
Disaster Supply Kit Comments/Notes: 1 Flashlight				
Pack of Batteries Portable First Aid Kit Thermometer				
No prescribed medications/only common (i.e., Tylenol/Chile 4 Bottles of Water	ldren's Motrin)			
4 Bottles of Water 4 Pack of Tuna/Canned Sweet Potatoes Diapers (Does not apply)				1
3 outfits/ 1 per child 1 big blanket				1
1 tote bag as carrying case/separate bag for clothes & blar Cellphones, drawing book and book as special toy	nket			
Scissors, duct tape, heavy duty trash bags				
mergency Documents	NUMBER OF THE	Valuation -		,
	an (this complete	d form)		~
Informal Provider Emergency Preparedness Pla				
Informal Provider Emergency Preparedness Pla Authorization for emergency medical care				A
Informal Provider Emergency Preparedness Pla Authorization for emergency medical care lanning and Maintenance	Kit and the Emer	ency Docur	ments regulariv:	
Informal Provider Emergency Preparedness Pla Authorization for emergency medical care	Kit and the Emerg	gency Docur	ments regularly:	
Informal Provider Emergency Preparedness Pla				

Diaporing procedures are followed	100000		
Diapering procedures are followed.	N/A	No diaper age children.	
Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm			
unning water after:			
• Toileting.			
Diapering.	Y	Soap at the kitchen and bathroom soap station	
Before food preparation and eating. After playing outdoors; and			
At other times when necessary to prevent the			
spread of disease.			1
CHILD ABUSE, NEGLECT AND MISTREATMENT		Comments/Notes Corrective Action /Timeframe if needed	
A child is not subject to any form of abuse,		H INCOME.	
ncluding:			
Physical injury Any sexual abuse	Y		
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	Y		
child's health or welfare is harmed or placed at substantial risk of harm.			
Mental injury to a child, or a substantial risk of montal injury that is sayed by the failure to			
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,			
ncluding: • Any deliberate act that hurts a child physically			
 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	Υ		
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	34		-
211 and your local Department of Social Services	Y		
Child Protective Services Unit.			
Emergency Ready-to-Go Pack			
The Emergency Ready-to-Go Pack must be available	and pacify accordible	the event of an emergency. This contains a	
Disaster Supply Kit (including needed medications) a			
Disaster Supply Kit			
Directions: Review and determine that each item is a			
Disaster Supply Kit contains enough supplies for each usable. Comment and note below if needed.	r child in care. Also, that	ure items are clean, organized, and	
✓ Flashlight	1		
	✓ Bottled water	✓ Folder or binder for EPP documents	V
			V
✓ Batteries	✓ Bottled water ✓ Non-perishable food	✓ Folder or binder for EPP documents ✓ Backpack(s) or carrying case(s)	7
✓ Batteries	✓ Non-perishable food		\ \ \
	✓ Non-perishable	✓ Backpack(s) or carrying case(s)	\ \ \
✓ Batteries	✓ Non-perishable food Diapers ✓ Change of	 ✓ Backpack(s) or carrying case(s) ✓ Consider special toys or games 	<i>J</i>
✓ Batteries ✓ Portable First Aid Kit ✓ Thermometer	✓ Non-perishable food Diapers ✓ Change of clothes	 ✓ Backpack(s) or carrying case(s) ✓ Consider special toys or games 	<i>y</i>
✓ Batteries ✓ Portable First Aid Kit ✓ Thermometer ✓ Medications	✓ Non-perishable food Diapers ✓ Change of clothes ✓ Blanket(s)	 ✓ Backpack(s) or carrying case(s) ✓ Consider special toys or games 	<i>y</i>
✓ Batteries ✓ Portable First Aid Kit ✓ Thermometer ✓ Medications Items in the Disaster Supply Kit are clean, organized, and use	✓ Non-perishable food Diapers ✓ Change of clothes ✓ Blanket(s) able (Y/N)? Y	 ✓ Backpack(s) or carrying case(s) ✓ Consider special toys or games ✓ Scissors, tape & sealing plastic 	<i>y</i>
✓ Batteries ✓ Portable First Aid Kit ✓ Thermometer ✓ Medications Items in the Disaster Supply Kit are clean, organized, and use Emergency Ready-to-Go Pack is available and easily access	✓ Non-perishable food Diapers ✓ Change of clothes ✓ Blanket(s) able (Y/N)? Y	 ✓ Backpack(s) or carrying case(s) ✓ Consider special toys or games ✓ Scissors, tape & sealing plastic 	<i>y</i>
✓ Batteries ✓ Portable First Aid Kit ✓ Thermometer ✓ Medications Items in the Disaster Supply Kit are clean, organized, and use Emergency Ready-to-Go Pack is available and easily access Disaster Supply Kit Comments/Notes: 1 Flashlight	✓ Non-perishable food Diapers ✓ Change of clothes ✓ Blanket(s) able (Y/N)? Y	 ✓ Backpack(s) or carrying case(s) ✓ Consider special toys or games ✓ Scissors, tape & sealing plastic 	<i>y</i>
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Signatures & Date	200000000000000000000000000000000000000	
Acknowledgement: By signing below the partie have been discussed.	s acknowledge that all standards ha	ve been reviewed, and any corrections if needed
PROVIDER	INSPECTOR	
Printed Name: Betty Dunnock	rinted Name	
Signal	Signature:	
Date 9/28/ N ote:	Date: 09/24/2021	Phone: <u>1-877-227-0125</u>