

Child Care Scholarship Program

Informal Child Care Monitoring Inspections



First letter of the provider's last name.

Posted January 2024

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 01/06/2023	Time	In: 1:30PM	Time Out: 2:35P	M Result: Passed
Informal Care			200	
Type of Care (check one): ☐ Non-re	lative Info	rmal Provider C	are ⊠Relative	Informal Provider Care
Provider Information				
First Name: Katherine Provider ID	Last	Name: Sale	7	Provider ID: 504083 Email:
Care Location inspected				
Street Address: City: Address Verified? Yes		County:	State	Zip Code:
Name of Children in Care (add pages if ne	eeded)	Scholarship	Date of Birth	Age / Present (Y/N)
the sign of the second section of	array is a second		4/11/2021	20 Months / Yes
and the second statements				
			and the contract of the contra	kanari yan saman sayang di akari Makanariki mik masikingi akir ali hasili hasikan masikin akiri. Basari
Safety of the Home		the disc		
Directions: Review and determine compliance pages may be used for comments.		ch standard. Note		orrective actions needed. Additional D – Discussed, n/a – Not Applicable
Health and Safety Training:	and the second	i in december to server Vitalist to pl	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Basic Health and Safety Training Complete	ed?		Y	Certificate Submitted
Home is free of health and safety hazard	ds:		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Is in good repair	bands)		Y	THE RESIDENCE CONTRACT SPACE OF THE
 Is free of insect or rodent infestati 	ion		Y	No Sign of Infestation
Is well-lit and well-ventilated	Constitution of the	Equipment by A.C.	Y	
Has hot and cold running water	1 N N		Y	Steam Observed
Has a working inside toilet	F-18 (7) 31	Applied with the	Y	Flush observed
 Has utilities for cooking, lighting a 	ind heating	g interpretation	$(p_{i},p_{$, we approximate the section of the (g,h) -specified to the constraint states where μ
 Has a working and safe heating s 	ystem	Carlotte and the	Y	
 Has a working refrigerator and sto 	ove	ers activities	Υ	
Has a working telephone	Contractor Contractor	low something proteins a briefly	nan mar in the state of the	Make A Call
 Has operational smoke detector(s 	s)		Y	
Has first aid kit/supplies	and the best	eries proposition	Y 83 to	Cold pack, gauze, tape, ointment, band-aids, tweezers, alcohol pads
 Has protective coverings on any e accessible to children 	electrical o	outlet that is	Y	Covered, in use or behind furniture
Harmful items are stored appropriately a children:	and away	from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Sharp or pointed items	(12) (12)		Y	Locked Drawer
Medications of any kind			Y	In basket on top of fridge
Matches, lighters and flammable in the second	products	97.77419VA	Y	
Alcoholic beverages			Y	High shelf
• Guns			Y	
Cleaning agents		- A.C A.C.	Y	Locked under kitchen sink

Poisonous substances

Other than medications and cleaning solutions

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Assign /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 sihe has a solled 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.	*	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if recorded
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	¥	
A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child.	*	
A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment		
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	

○ Change of clothes

☑Blanket(s)

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

⊠Thermometer

Medications 1

Items in the Disaster Supply Kit are clean, organiz	red, and usable (Y/N)?	Y	
Emergency Ready-to-Go Pack is available and ea	asily accessible in the e	vent of an emergency (Y/N)? Y
Location of The Emergency Ready to go Pack	: In the dining room		
Item Specification (if needed): 4 D batteries, 1 pants, 1 shirts, 1 sox, 2 16oz bottles of water, 2 protein bars, can of san Band aids, gauze, tape, alcohol wipes, tweezers Items to review on xx/xx/xxxx if needed: N/A	dines, crackers, almon	i butter	
Emergency Documents			
⊠Informal Provider Emergency Prepared	[19]전 : [1] : [2] [2] [2] [2] [2] [2] [2] [2] [2] [2]	eted form)	
⊠Authorization for emergency medical ca	ire		
Planning and Maintenance			And the second s
Person responsible for updating the Disaster Su First Name Katherine		gency Documents regular	ly:
riist Name Nathenne	Last Name Sale		
three window and one doors. Depending on the care location and immediately after they are seed if they couldn't shelter at the primary location, the grab the emergency bag, gather then proceed the location. The provider will call before letting small windows and one door. If the need should of the situation if time allows, the provider will call evacuation location.	er the child, put the bawill call to severity of the situation cure in the evacuation bey will go to the alternated to the provider's value on arise the provider will	by in the stroller before wance at the location, they wan if time allows the providuocation. ate evacuation location ehicle where she will shelte use plastic and tape to se	alking to the primary evacuation location, will shelter in the which has er will call the parents before leaving the The provider will are the baby in car seat, before driving to er in the that has two eal the shelter. Depending on the severity
Signatures & Date			
Acknowledgement: By signing below the parties a been discussed. The parties also acknowledge to pop up visit which will be conducted virtually or in	hat, if approved, the h		
PROVIDER			INSPECTOR
	SALE	Printed Name:	
Signature:		Signature:	
Date: 1/9/23 Phone:		Date: 01/09/2023	Phone: 1-877-227-0125

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

Return to: ccs.informalproviders@maryland.g

Inspection Date: 03/16/2023 Time in: 10:30AM Time Out: 11:35AM Result: Did not pass. Follow-up required. Follow-up Inspection Date: 03/28/2023 Time In: 11:50AM Time Out: 12:00PM Result: PASSED Informal Care Type of Care (check one): □ Non-relative Informal Provider Care ⊠ Relative Informal Provider Care Provider Information First Name: Maritza Provider ID: 483522 Last Name: Sala Martinez Provider ID #: Email: Care Location Inspected Street Address: City: County: State Zip Code: Address Verified? Yes. Name of Children in Care (add pages if needed) Scholarship Date of Birth Age /

	(07/07/2021)	1yr. / Y
Safety of the Home		
make the section of the fact that the section of th		
Directions: Review and determine compliance with each standard pages may be used for comments:	Note any comments or a Y – Yes, N – No.	Directive actions needed: Additional D - Discussed, n/a - Not Applicable
riealth and Safety Training:	Standard Met	
Basic Health and Safety Training Completed?	Y/N.	Corrective Action /Timeframe if needed Relative Informal Care – Certificate Submitted
	Standard Met	Comments/Notes
lome is free of health and safety hazards:	Y/N	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	Y	All lights were turned on and natural window lighting
Has hot and cold running water	Y	Tested by provider and steam observed on camera
Has a working inside toilet	Y	Flushed by provider and observed, lock on the bathroom door
Has utilities for cooking, lighting and heating	Y	
Has a working and safe heating system	Υ	Corrective Action Completed: Heating/Cooling system repaired and tested by provider and parer
Has a working refrigerator and stove	Υ	Tested by provider and observed
Has a working telephone	Y	Outbound call made to provider's phone
Has operational smoke detector(s)	Υ	Observed and tested by provider
Has first aid kit/supplies	Y	Stored in drawer in the family (Ointment, Band- Aids, Alcohol, Gauze)
 Has protective coverings on any electrical outlet that is accessible to children 	Y	All outlets were covered with coverings and/or occupied
armful items are stored appropriately and away from hildren:	Standard Met Y/N	Comments/Notes
Sharp or pointed items	. Y	Corrective Action /Timetraine if needed
Medications of any kind	Y	Stored in upper level kitchen cabinet in knife holde Stored in upper level kitchen cabinet
Matches, lighters and flammable products	Y	Lighter moved to high level cabinet
Alcoholic beverages	Y	Stored in upper level kitchen cabinet
• Guns	Y	Does not own
Cleaning agents	Y	Cleaning agents stored under the sink cabinet with lock
Poisonous substances	Y	Does not own
ENERAL CLEANLINESS STÄNDARDS	Standard Met	Comments/Notes

	YIN	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.	Υ	Diapering materials in changing area
Handwashing procedures are followed. Provider and child's han 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 STANDARD	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:	or 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.

H	⊠Flashlight	⊠Bottled water	⊠Folder or binder for EPP documents
- 8	⊠Batteries for Flashlight	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
20	⊠Portable First Aid Kit	⊠ Diapers	⊠Consider special toys or games
88 10	⊠Thermometer	⊠Change of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
- 15 - 25	⊠Medications	⊠ Blanket(s)	

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

Emergency Ready-to-Go Pack is available and ea	asily accessible in th	e event of an emergency (Y/N)? Y
Location of The Emergency Ready to go Pack	: Living room near	front door out	
Item Specification (if needed):			
- 1 flashlight, 1 pk of AA batteries, 1 thermo	ometer, no specific	medications, 2 bottled wate	rs, 1 canned food, 1 pk of baby food, 2
onesies, 3 diapers & 1 pk of wipes, 1 first duct tape, 3 heavy duty trash bags, folder	ald kit. I small blar	iket. 1 duffle bag (carrying c	ase), 1 toy, 1 pair of scissors, 1 roll of
tems to be reviewed on 03/20/2023; Corrected	& Reviewed on 03	28/2023	19
- Proper functioning thermostat(heating/co			
Emergency Documents		and the second second	
⊠Informal Provider Emergency Prepared	ness Plan (this com	pleted form)	
⊠Authorization for emergency medical ca			
Planning and Maintenance			
Person responsible for updating the Disaster Sur	oply Kit and the Em	ergency Documents regularly	y:
First Name Maritza	Last Name		×
	Sala Martinez		
Description of how the Emergency Ready-to-Go Shefter In Place Procedure:	Pack will be transpo	offed to an evacuation location	on: carried by the provider.
The provider will account for the child in care and	d arah the emergen	ou have and based into the	afan badaasaa (A. daasaa a saasaa saasa
need should asize the broylder Mill Cover the MIUC	dows and doors with	n tape and sealing plastic. Th	ster bedroom (1 door 4 windows). If the ne provider will call the parents
illoughout the emergency.			parento
Evacuation Procedures:			
Primary: The provider will account for the child in	1 care and then grain	b the emergency bag before	leaving the home and will call a taxi to
ransport them to the evacuation location. The pro Provider and child will gain entry	Upon entry the	e child in the car seat and the will shelter in the	
will call the parent once they are secured.	- open entry the	y will offened in the	(1 door 1 window). The provider
Litarnatar If they pould not seem the			
Alternate: If they could not access the primary to bag. When the taxi arrives the provider will see	ocation, the provide cure the child in her	r will call a taxi and then gath	ner the child and grab the emergency to-
The provider and child will either det acces	ss via	to.	all and head to enter. They will shelter in the
1 door 1 window). The provider will call the parer	nt at the beginning a	and end of the emergency.	
Olynatures & December 1991			
Acknowledgement: By signing below the parties at	cknowledge that all	standards have been review	ed and any corrections if peopled have
peen discussed. The parties also acknowledge the popular visit which will be conducted virtually or in-	at. II approved, the r	nome in which care is provide	ed is subject to random, unannounced
PROVIDER	POI OUII.		INSPECTOR:
Printed Name: Maritza Sola Mo	/c.		
	irthe Z	Printed Name	
Signature:		Signature:	
Date: 3/30/23 Phone:		Date: 03/28/2023	Phone: 1-877-227-0125

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

INSPECTION CHECKLIST

Return to: ccs.informalproviders@maryland.gov

In	spection Date: 04/01/2022	Time In: 3:45	pm	Time Out: 4:34 pm	Result: Passed
200				- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
	formal Care		(l. (j. 47		MODERATE HOUSE BELLEVILLE
	po or ours (or ours)	ive Informal Pr	ovider Ca	re ⊠Relative Info	rmal Provider Care
P	royider information				D 100500
	rst Name: Maritza	Last Name:	Sala Marti	nes,	Provider ID: 483522 Email:
house	rovider ID#: are Location Inspected				Ettiali.
San San San		City:	State:	County:	Zip Code:
	ddress Verified?: Yes	J., 1			
Ň	ame of Children In Care (add pages if need	ded) Scho	larship	Date of Birth	Age / Present (Y/N)
				7/7/2021	8 mos /Y
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L					
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-					1
L_			-		/
ķ	afety of the Home	while	h sir i ji		a publicación de la propieda de la como de l

Health and Safety Training:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Basic Health and Safety Training Comple	eted? N/A	
Home is free of health and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Is in good repair	Y	
Is free of insect or rodent infestation	Y	
Is well-lit and well-ventilated	Y	-
Has hot and cold running water	Y	Temp. taken. Water 100 degrees
Has a working inside toilet	Y	Flush observed
Has utilities for cooking, lighting and hea	ting Y	*
Has a working and safe heating system	Y	Temp turned up from 60 degrees to 72 degrees
Has a working refrigerator and stove	Y	All burners turned on. Refrigerator lights observe
Has a working telephone	Y	Outbound call made
Has operational smoke detector(s)	Y	Test button pressed
Has first aid kit/supplies	Y	Peroxide, spray antiseptic,, bandages
Has protective coverings on any electrical accessible to children	al outlet that is	
armful items are stored appropriately and aw hildren:	ray from Standard Met. Y/N	Comments/Notes Corrective Action /Timeframe if needed
Sharp or pointed items	Y	Moved to a high cabinet
Medications of any kind	Y	V 3
Matches, lighters and flammable product	ts Y	Moved to a high cabinet
Alcoholic beverages	Y	
• Guns	Y	
Cleaning agents	Y	

Poisonous substances	Y	
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Pull out drawer in the kitchen
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:	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.	γ .	

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 centains enough supplies for each child in care. Also that the items are clean, organized, and usable. Comment and note below if needed.

Contains enough supplies or each child in cale. Assistant in learns are clear, organized, and disable comment and not occur in code.

☐ 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
☐ Thermometer ☐ Change of clothes ☐ Heavy Duty Scissors, Duct Tape/

		Packing Tape & Sea Bags	ing Plastic/ Trash
	□Medications N/A ⊠Blanket(s)	5095	
i	ems in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y	
E	mergency Ready-to-Go Pack is available and easily accessible in the	event of an emergency (Y/N)?Y	27400 A. A. A
-	coation of Emergency Ready to go Pack: In the closet near the from Specification (if needed): Red flashlight AAA Batteries Scissors, gauze, alcohol pads, ice pack, bandages Forehead scanning thermometer 1 Mixed vegatables, 3 Jars of food, extra milk. 3 Diapers & wipes	nt door	
	Onsie outfit Blanket(Pink) Rattle Toy Large soissors, duct tape and trash bags(a roll)	,	
]	o be observed for compliance on :		
En	tergency Documents		
	⊠Informal Provider Emergency Preparedness Plan (this com	pleted form)	and the second s
	⊠Authorization for emergency medical care		
Pl	nning and Maintenance	1. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
	rson responsible for updating the Disaster Supply Kit and the Eme st Name Last Name	ergency Documents regularly:	
	scription of how the Emergency Ready-to-Go Pack will be transp	orted to an evacuation location:	
Sh	etter in Place Procedures:	,	
	e Provider will contact the Parent to inform her of the emergency. room(1 door 4 windows).	She will then grab the baby and the ERTGB and ic	ock themselves in
Εv	acuation Procedures:		a a
tal po thi tal	e Provider will first contact the parent to inform her of the emerger a cab to the police station. The child will be secured in her car sice station to inform them of their arrival. The Provider will shelter a location she will first contact the parent to inform her of the emerger a cab to where she will gain entry with the key condow).	eat. On the way to the police station the Provider vin the station (2 doors 8 windows). If the Provider	will contact the cannot shelter in ency to go bag and
Si	matutos & Date		
Ac be	knowledgement: By signing below the parties acknowledge that all sta en discussed. The parties also acknowledge that, if approved, the hor p up visit which will be conducted virtually or in-person.	andards have been reviewed, and any corrections if no ne in which care is provided is subject to random, una	eeded have innounced
	PROVIDER	INSPECTOR	
	nted Name: Marifza Sala Merkinoz	Printed Name:	
Si	gnature:	Signature:	

Phone:

Date:04/01/2022

Phone: 1-877-227-0125

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

Return to: ccs.informalproviders@maryland.g ov

1000	tion Date: 01/06/2023	Time In: 1:30PM	Time Out: 2:35P	PM Result: Passed
Infor	nal Care			
Type of	Care (check one):	ative Informal Provide	er Care ⊠Relative	Informal Provider Care
Provid	er Information			and the state of t
First Na Provide	ame: Katherine er ID	Last Name: Sale		Provider ID:
Care L	ocation Inspected			
	Address: City: S Verified? Yes	County:	State	Zip Code:
Name	of Children in Care (add pages if ne	eded) Scholars	ip Date of Birth	Age / Present (Y/N)
	e ago tigo per anti-richi	May 10 A. P. A. S. Ser	4/11/2021	20 Months / Yes
T. Tel	A second distance			
- 11				3
	The state of the s		comments of the designation of the state of	A strategie of the strategie of agree of the strategie and strategies and a strategies and an experience of
Bod of				
	and the Kindows bucker and ma	gas wa koo dide		
377		September 1985 Annual		
Safet	y of the Home	an antara ang karangan ang karang di manakan and kalang ang kalang Karang karang karang pang kalang ang kalang ang kalang ang kalang karang kalang kalang ang kalang kalang kalang		Some things on the transfer was the second
Directio	ns: Review and determine compliance	a with anch standard	lata	
	may be used for comments.			D - Discussed, n/a - Not Applicable
pages r				
pages r Health	nay be used for comments.	nt siath fascart cases t angears s' automosti	Y - Yes, N - No, Standard Met	D - Discussed, n/a - Not Applicable Comments/Notes
pages r Health Basic F	and Safety Training:	ent clark gargert and B.C. Sentgener it verper by p	Y - Yes, N - No, Standard Met Y/N	D - Discussed, n/a - Not Applicable Comments/Notes Corrective Action /Timeframe if needed
pages r Health Basic H	nay be used for comments. and Safety Training: Health and Safety Training Complete	ent clark gargert and B.C. Sentgener it verper by p	Y - Yes, N - No, Standard Met Y/N Y Standard Met	D - Discussed, n/a - Not Applicable Comments/Notes Corrective Action /Timeframe if needed Certificate Submitted Comments/Notes
pages r Health Basic H	nay be used for comments. and Safety Training: Health and Safety Training Complete is free of health and safety hazard	ent shat share says as entgrast a durant says ed? !s:	Y - Yes, N - No, Standard Met Y/N Y Standard Met Y/N	D - Discussed, n/a - Not Applicable Comments/Notes Corrective Action /Timeframe if needed Certificate Submitted Comments/Notes
pages r Health Basic H Home	nay be used for comments. and Safety Training: Health and Safety Training Complete is free of health and safety hazard Is in good repair	ent shat share says as entgrast a durant says ed? !s:	Y - Yes, N - No, Standard Met Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y	D - Discussed, n/a - Not Applicable Comments/Notes Corrective Action /Timeframe if needed Certificate Submitted Comments/Notes Corrective Action /Timeframe if needed
pages r Health Basic F Home	and Safety Training: Health and Safety Training Complete is free of health and safety hazard Is in good repair Is free of insect or rodent infestation	ent shat share says as entgrast a durant says ed? !s:	Y - Yes, N - No, Standard Met Y/N Y Standard Met Y/N Y Y Y Y	D - Discussed, n/a - Not Applicable Comments/Notes Corrective Action /Timeframe if needed Certificate Submitted Comments/Notes Corrective Action /Timeframe if needed
pages r Health Basic H Home	and Safety Training: Health and Safety Training Complete is free of health and safety hazard Is in good repair Is free of insect or rodent infestations well-lift and well-ventilated Has hot and cold running water	ent shat share says as entgrast a durant says ed? !s:	Y - Yes, N - No, Standard Met Y/N Y Standard Met Y/N Y Y Y Y Y	D - Discussed, n/a - Not Applicable Comments/Notes Corrective Action /Timeframe if needed Certificate Submitted Comments/Notes Corrective Action /Timeframe if needed No Sign of Infestation
pages r Health Basic H Home	and Safety Training: Health and Safety Training Complete is free of health and safety hazard Is in good repair Is free of insect or rodent infestation Is well-lift and well-ventilated Has hot and cold running water Has a working inside toilet	ad? ds:	Y - Yes, N - No, Standard Met Y/N Y Standard Met Y/N Y Y Y Y Y Y Y	D - Discussed, n/a - Not Applicable Comments/Notes Corrective Action /Timeframe if needed Certificate Submitted Comments/Notes Corrective Action /Timeframe if needed No Sign of Infestation Steam Observed
pages r Health Basic H Home	and Safety Training: Health and Safety Training Complete is free of health and safety hazard Is in good repair Is free of insect or rodent infestation Is well-lift and well-ventilated Has hot and cold running water Has a working inside toilet Has utilities for cooking, lighting an	ed? ds:	Y - Yes, N - No, Standard Met Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y	D - Discussed, n/a - Not Applicable Comments/Notes Corrective Action /Timeframe if needed Certificate Submitted Comments/Notes Corrective Action /Timeframe if needed No Sign of Infestation Steam Observed
pages r Health Basic H Home	and Safety Training: Health and Safety Training Complete Is free of health and safety hazard Is in good repair Is free of insect or rodent infestation Is well-lift and well-ventilated Has hot and cold running water Has a working inside toilet Has utilities for cooking, lighting and	ed? ds: on hd heating	Y - Yes, N - No, Standard Met Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y	D - Discussed, n/a - Not Applicable Comments/Notes Corrective Action /Timeframe if needed Certificate Submitted Comments/Notes Corrective Action /Timeframe if needed No Sign of Infestation Steam Observed
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pages r Health Basic l Home	and Safety Training: Health and Safety Training Complete is free of health and safety hazard Is in good repair Is free of insect or rodent infestation Is well-lift and well-ventilated Has hot and cold running water Has a working inside toilet Has utilities for cooking, lighting and Has a working and safe heating symmetric has a working refrigerator and stote Has a working telephone Has operational smoke detector(s	ad? ds: and heating ystem ystem	Y - Yes, N - No, Standard Met Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	D - Discussed, n/a - Not Applicable Comments/Notes Corrective Action /Timeframe if needed Certificate Submitted Comments/Notes Corrective Action /Timeframe if needed No Sign of Infestation Steam Observed Flush observed Make A Call
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pages r Health Basic H Home	and Safety Training: lealth and Safety Training Complete is free of health and safety hazard Is in good repair Is free of insect or rodent infestation Is well-lift and well-ventilated Has hot and cold running water Has a working inside toilet Has utilities for cooking, lighting at Has a working and safe heating sy Has a working refrigerator and sto Has a working telephone Has operational smoke detector(s) Has first aid kit/supplies Has protective coverings on any eaccessible to children ut Items are stored appropriately at	ad? ds: on hd heating ystem ove lectrical outlet that is	Y - Yes, N - No, Standard Met Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	D - Discussed, n/a - Not Applicable Comments/Notes Corrective Action /Timeframe if needed Certificate Submitted Comments/Notes Corrective Action /Timeframe if needed No Sign of Infestation Steam Observed Flush observed Make A Call Cold pack, gauze, tape, ointment, band-aids, tweezers, alcohol pads Covered, in use or behind furniture

Alcoholic beverages

Cleaning agents

•

•

Guns

Matches, lighters and flammable products

Y

Y

Y

Y

High shelf

Locked under kitchen sink

Other than medications and cleaning solutions

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Assign /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 sihe has a solled 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.	*	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if recorded
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	¥	
A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child.	*	
A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment		
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	

○ Change of clothes

☑Blanket(s)

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

⊠Thermometer

Medications 1

Items in the Disaster Supply Kit are clean, organiz	zed, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is available and ea	asily accessible in the	event of an emergency (Y/N)? Y
Location of The Emergency Ready to go Pack	: In the dining roon	1	
Item Specification (if needed): 4 D batteries, 1 pants, 1 shirts, 1 sox, 2 16oz bottles of water, 2 protein bars, can of sar Band aids, gauze, tape, alcohol wipes, tweezers Items to review on xx/xx/xxxx if needed: N/A	dines, crackers, almo	nd butter	
Emergency Documents		and the second second second	
⊠Informal Provider Emergency Prepared		pleted form)	
⊠Authorization for emergency medical ca	ire		
Planning and Maintenance			and the second second second second
Person responsible for updating the Disaster Su First Name Katherine	pply Kit and the Eme Last Name Sale	ergency Documents regular	y:
Touro Teausille	rast Hattle Sale		
Evacuation Procedures: The provider will grab the emergency bag, gather which is three window and one doors. Depending on the care location and immediately after they are seen if they couldn't shelter at the primary location, the grab the emergency bag, gather then procedure the location. The provider will call before letting small windows and one door. If the need should of the situation if time allows, the provider will call evacuation location.	er the child, put the a will call to aler severity of the situa cure in the evacuation may will go to the alter ed to the provider's know they are of	helter. The provider will call baby in the stroller before was Once at the location, they was ton if time allows the providen location. I was evacuation location of the way was the will secut their way. They will shelt will use plastic and tape to se	alking to the primary evacuation location, vill shelter in the living room which has er will call the parents before leaving the The provider will are the baby in car seat, before driving to er in the basement room that has two eal the shelter. Depending on the severity
Signatures & Date	- almondadas 4-s	I adamada ada bassa b	
Acknowledgement: By signing below the parties been discussed. The parties also acknowledge to pop up visit which will be conducted virtually or in	hat, if approved, the		
PROVIDER			INSPECTOR
	SALE	Printed Name:	
Signature:		Signature:	
Date: 1/9/23 Phone:	S. etc. J. address property of a copie.	Date: 01/09/2023	Phone: 1-877-227-0125

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

Return to: ccs.informalproviders@maryland.g. ov

Inspection Date: 10/26/2023 Follow-up Inspection Date: 10/30/2023 Follow-up Inspection Date: 10/30/2023	Time In: 3:00PM Time In: 2:30PM Time In: 4:00PM	Time Out: 4:00PM Time Out: 2:43PM Time Out: 4:27PM	Result: Follow-up Required. Follow-up Result: Follow-up Required. Final Result: PASSED
Informal Care			
Type of Care (check one): ☐ Non-re	lative Informal Provider C	are Relative Inf	formal Provider Care
Provider Information			Massiane aless 1831
First Name: Roselynn	Last Name: Sample-	Blick	Provider ID: <u>533234</u>
Provider ID #:	,		Email:
Care Location Inspected			
Street Address: City	County:	State	Zip Code:
		State Date of Birth	Zip Code: Age / Present (Y/N)

Safety of the Home		
Directions: Review and determine compliance with each standard. No pages may be used for comments.	te any comments or or 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 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	All areas were clean
Is free of insect or rodent infestation	Y	No evidence of infestation
Is well-lit and well-ventilated	Y	All lights were turned on and natural window lighting
Has hot and cold running water	Y	Tested by provider and steam observed on camera via bathroom shower and mirror
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 phone
Has operational smoke detector(s)	Y	Tested by provider and observed
Has first aid kit/supplies	Y	Stored in the medicine cabinet above the toilet (alcohol, Band-Aids, ointment)
 Has protective coverings on any electrical outlet that is accessible to children 	Y	Corrective Action Completed: All outlets covered or occupied need for (kitchen and bathroom)
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	Corrective Action Completed: Lock added to cabinet
Medications of any kind	Υ	Stored in the medicine cabinet above the toilet and high shelf in kitchen cabinet
Matches, lighters and flammable products	Υ	Corrective Action Completed: Lock added to cabinet

Alcoholic beverages	Y	Stored in locked kitchen cabinet
Guns	Y	Does not own
Cleaning agents	Y	Cleaning products in locked bathroom and kitcher cabinet and on high shelf in basement storage room
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	Changing station inside pack and play in living room
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Taken out daily via outside trash can
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	Changing station had all needed supplies
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 The provider immediately reports any suspected child abuse,	Υ	
neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	

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

Disaster Supply Kit

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

⊠Flashlight

⊠ Bottled water

⊠Folder or binder for EPP documents

⊠Batteries for Flashlight	⊠Non-perishable food	SBackpack(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	⊠Blanket(s)	
Items in the Disaster Supply Kit are clean,	organized, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is available	and easily accessible in the event of an e	mergency (Y/N)? Y
general medication only, 5 bottled duct tape, 1 pair of scissors, 1 hear Items to be reviewed on 10/30/2023 Locks for sharps drawer and lighte Outlet coverings for bathroom and Lock to basement door ERTG: Folder w/ updated EPP and mergency Documents Informal Provider Emergency Press	kit, 1 large blanket, 1 flashlight, 1 pk of waters, 1 canned food, 2 diapers, 1 pk of yy duty trash bag, 1 pk of sealing plastic: Corrected & Reviewed on 10/30/2023 or drawer kitchen ECMA docs/ Description of Evacuation eparedness Plan (this completed form)	
	dical care	
Planning and Maintenance		
Person responsible for updating the Disas	ster Supply Kit and the Emergency Docu	ments regularly:
First Name	Last Name	
Roselynn	Sample-Blick	E. L. House and the the consider
Description of how the Emergency Ready Shelter In Place Procedure:	v-to-Go Pack will be transported to an ever	acuation location: carried by the provider.
from ERTG to seal the door and windows will initially call the parent and then text the Evacuation Procedures Primary: The provider will gather the chile	if needed. Then store the scissors back ne parent throughout with emergency upon d and ERTG and head to the provider's v	ows). The provider will use the sealing plastic and tape into the bag and away from child's reach. The provider dates and then call the parent once everything is clear. The provider will secure the child in his rear-
	Upon arrival and entry the provide	s vehicle. The provider will secure the child in his rear- er will receive instruction from the
Signatures & Date Acknowledgement: By signing below the page of the parties also acknowledge op up visit which will be conducted virtual	ledge that, if approved, the home in which	ve been reviewed, and any corrections if needed have a care is provided is subject to random, unannounced
PROVIDER		INSPECTOR
Printed Name:	Printed Nar	
Signatu	Signature:	
Date: 11/2/2023 Phone:	Date: 10/30	0/2023 Phone: 1-877-227-0125

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 07/14/2022	Time In	: 9:30AM	Time Out: 10:24 AM	Result: AP	PROVED
Informal Care		ille first			
Type of Care (check one): ⊠ N	on-relative Inform	nal Provider Ca	are □Relative l	nformal Provide	r Care
Provider Information					
First Name: Keenen	Last Na	me: Scott		Provider II	D: 440147
Provider ID #:				Email:	
Care Location Inspected					
Street Address: Address Verified? Yes.	City		County	State	Zip Code
Name of Children in Care (add page	s if needed)	Scholarship	Date of Birth	Age /	Present (Y/N)
			(12/27/2009)	12yr / Y	
			(04/17/2011)	11yr / Y	
				/	
				1	
				1	
				1	

Directions: Review and determine compliance with each standard. Note pages may be used for comments.	e any comments or c Y – Yes, N – No, D	orrective actions needed. Additional - 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	
Home is free of health and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Is in good repair	Y	Generally clean	
Is free of insect or rodent infestation	Y	No evidence of infestation	
Is well-lit and well-ventilated	Y	All light fixtures working properly and all areas well-lit	
Has hot and cold running water	Y	Observed and tested by provider	
Has a working inside toilet	Y	Toilet flushed by provider	
Has utilities for cooking, lighting and heating	Υ		
Has a working and safe heating system	Y	Observed and tested by provider	
Has a working refrigerator and stove	Y		
Has a working telephone	Y	Everyone has working cellphones	
Has operational smoke detector(s)	Y	Observed and tested by provider	
Has first aid kit/supplies	Y	Medical supplies in hallway closet	
Has protective coverings on any electrical outlet that is accessible to children	Y	Does not need due to age of children	
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	Provider moved to top of fridge area	
Medications of any kind	Y	Stored on high shelf in hallway closet	
Matches, lighters and flammable products	Y	Does not own	
Alcoholic beverages	Y	Does not own	
• Guns	Υ	Does not own	

Cleaning agents	Y	Stored under kitchen cabinet
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.	Υ	No diaper age children.
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	No diaper age children.
Diapering procedures are followed.	Υ	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	Y	
A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child.	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	

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

Disaster Supply Kit

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

⊠Flashlight

⊠Bottled water

⊠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

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y, stored in living room closet Emergency Documents	⊠Thermometer	⊠Change of clothes	☑Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags			
Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y, stored in living room closet Emergency Documents @Informal Provider Emergency Preparedness Plan (this completed form) @Authorization for emergency medical care Planning and Maintenance Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly: Last Name Last Name Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: Itemized List (if needed): - No diaper age children, 1 flashlight, pk of AAA batteries, 1 high voltage battery, 1 first aid kit, 1 thermometer, ADAHD Medicine back-ordered-daily dosage required), 3 bottled waters, 4 canned foods, 1 outlit per child, 3 Shelter-in-Place Procedures: Provider will count and gather the children along with the to-go bag and go to basement area (1 patio door, 0 windows). Will get sealing plastic from the emergency kit to tape windows and doors to make sure all areas are safe. Provider will call or text the parent of the emergency, during and after. Evacuation Location (s): Primary – Provider will gather and count the children, grab the emergency bag, send the parent a text or call about the emergency and they will go into the homeowner's front room/living room (1 door 1 window). Alternate – Provider will gather and count the children, grab the emergency bag, Alternate – Provider will gather and count the children, grab the emergency bag, Alternate – Provider will gather and count the children, grab the emergency bag, Alternate – Provider will gather and count the children, grab the emergency bag, Bernature – Provider will gather and count the children, grab the emergency bag, Alternate – Provider will gather and count the children, grab the emergency bag, Bernature – Provider will gather and count the children, grab the emergency bag, Bernature – Provider will gather and count the children in the emergency bag. Bernature – Provider will gather printer the emergency bag, Be	⊠Medications	⊠Blanket(s)				
Emergency Documents Sulthorization for emergency Preparedness Plan (this completed form) Sulthorization for emergency medical care Planning and Maintenance Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly: First Name Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: Itemized List (if needed): No diaper age children, 1 flashlight, pk of AAA batteries, 1 high voltage battery, 1 first aid kit, 1 thermometer, ADAHD Medicine Dack-ordered-daily dosage required), 3 bottled waters, 4 canned foods, 1 outlit per child, 3 blankets, 1 toy and cellphones, Folder will EPP & ECMA per child. Shelter-in-Place Procedures: Provider will count and gather the children along with the to-go bag and go to basement area (1 patio door, 0 windows). Will get sealing plastic from the emergency kit to tape windows and doors to make sure all areas are safe. Provider will call or text the parent of the emergency, during and after. Evacuation Location (s): Primary - Provider will gather and count the children, grab the emergency bag, send the parent a text or call about the emergency and head out the door. Will the parent of the emergency and head out the door. Will the will go into the homeowner's front room/living room (1 door 1 window). Alternate - Provider will gather and count the children, grab the emergency bag, and taxt the parent before, during and after the emergency. Provider has spare key to enter the evacuation location, they will go into the basement area (1 door, 1 sliding door/window). Signatures & Date Printed Name: Provider will gather and count the children, grab the emergency bag. He will call and text the parent before, during and after the emergency bag. He will call and text the parent before, during and after the emergency bag. He will call and text the parent before, during and after the emergency bag. He will call the parent before, during and after the emergency bag. He will call the parent before, duri	Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y					
Signature Signature Signature Signature	Emergency Ready-to-Go Pack is available and easil	y accessible in the event of an emergend	cy (Y/N)? Y, stored in living room closet			
Planning and Maintenance Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly: Last Name Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: Itemized List (if needed): - No diaper age children, 1 flashlight, pk of AAA batteries, 1 high voltage battery, 1 first aid kit, 1 thermometer, ADAHD Medicine back-ordered-daily dosage required), 3 bottled waters, 4 canned foods, 1 outlit per child, 3 blankets, 1 toy and cellphones. Folder w/ EPP & ECMA per child. Shelter-in-Place Procedures: Provider will count and gather the children along with the to-go bag and go to basement area (1 patio door, 0 windows). Will get sealing plastic from the emergency kit to tape windows and doors to make sure all areas are safe. Provider will call or text the parent of the emergency, during and after. Evacuation Location (s): Primary — Provider will gather and count the children, grab the emergency bag, send the parent a text or call about the emergency and head out the door. Will The via buzz/ring camera entry and they will go into the homeowner's front room/living room (1 door 1 window). Alternate — Provider will gather and count the children, grab the emergency bag. Alternate — Provider will gather and count the children, grab the emergency bag. Alternate — Provider will gather and count the children, grab the emergency bag. Alternate — Provider will gather and count the children, grab the emergency bag. Alternate — Provider will gather and count the children, grab the emergency bag. Alternate — Provider will gather and count the children, grab the emergency bag. Alternate — Provider will gather and count the children, grab the emergency bag. Alternate — Provider will gather and count the children, grab the emergency bag. Alternate — Provider will gather and count the children, grab the emergency bag. Alternate — Provider will gather and count the children, grab the emergency bag. Alternate — Provider will gather and count the chi	Emergency Documents					
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Signature: Signature:			INSPECTOR			
Signature: Signature:	Printed Name: Keenen Scott	Printed Name:				
Date: 7/15/2-> Phone: Date: 07/14/2022 Phone: 1-877-227-0125		Signature:				
	Date: 7/15/2-> Phone:	Date: 07/14/2022	Phone: 1-877-227-0125			

✓ Virtual Inspection

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

Fol	llow-up Inspection Date: 08/13/2021	Time In: 1:30 PM	Time Out: 2:00	PW
Inf	formal Care			
ype o	of Care (check one): Non-relativ	e Informal Provider Ca	re Relativo	e Informal Provider Care
Pro	ovider Information			
Fin	st Name: Keenen			Provider ID: 440147
	-	Last Name: Scott		Email:
Ca	re Location Inspected			
Str	reet Address:	City:	County:	State: Zip Code:
			[+	
Na	me of Children in Care (add pages if nee	eded) Scholarship	Date of Birth	Age / Present (Y/N)
ļ			12/27/2009	11 /Y
			04/17/2011	10 /Y
				1
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Sa	Directions: Review and determine or	ompliance with each star	ndard. Note any cor	mments or corrective actions needed.
	Directions: Review and determine con Additional pages may be used for con Applicable	ompliance with each star mments.	Y - Yes, N - No	Comments/Notes
	Directions: Review and determine con Additional pages may be used for con Applicable realth and Safety Training:	mments.	Y - Yes, N - No Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
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Ho	Directions: Review and determine or Additional pages may be used for con Applicable Palth and Safety Training: Basic Health and Safety Training Come is free of health and safety hazards Is in good repair Is free of insect or rodent infestation Is well-lit and well-ventilated Has hot and cold running water Has a working inside toilet Has utilities for cooking, lighting and Has a working and safe heating sy Has a working refrigerator and store Has operational smoke detector(s) Has first aid kit/supplies Has protective coverings on any eleaccessible to children	completed? s: d heating stem /e ectrical outlet that is	Y - Yes, N - No Standard Met Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	Comments/Notes Corrective Action /Timeframe if needed Non-Relative Informal Care Comments/Notes Corrective Action /Timeframe if needed Opened the cabinet door Ran hot and cold water Flushed the toilet Heated stove & light Showed temp on thermostat Cell phone and house phone
Ho	Directions: Review and determine or Additional pages may be used for con Applicable Palth and Safety Training: Basic Health and Safety Training Come is free of health and safety hazards Is in good repair Is free of insect or rodent infestation Is well-lit and well-ventilated Has hot and cold running water Has a working inside toilet Has utilities for cooking, lighting and Has a working and safe heating sy Has a working refrigerator and store Has operational smoke detector(s) Has first aid kit/supplies Has protective coverings on any eleacessible to children ful items are stored appropriately and	completed? s: d heating stem /e ectrical outlet that is	Y - Yes, N - No Standard Met Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	Comments/Notes Corrective Action /Timeframe if needed Non-Relative Informal Care Comments/Notes Corrective Action /Timeframe if needed Opened the cabinet door Ran hot and cold water Flushed the toilet Heated stove & light Showed temp on thermostat Cell phone and house phone Tested the smoke detectors
Ho	Directions: Review and determine or Additional pages may be used for con Applicable Basic Health and Safety Training: Basic Health and Safety Training Or I safe of health and safety hazards Is in good repair Is free of insect or rodent infestation Is well-lit and well-ventilated Has hot and cold running water Has a working inside toilet Has utilities for cooking, lighting and Has a working and safe heating sy Has a working refrigerator and store Has operational smoke detector(s) Has first aid kit/supplies Has protective coverings on any el accessible to children ful items are stored appropriately and ren:	completed? s: d heating stem /e ectrical outlet that is	Y - Yes, N - No Standard Met Y/N Y Standard Met Y/N Y Y Y Y Y Y Y Y Y Y Y Y Y	Comments/Notes Corrective Action /Timeframe if needed Non-Relative Informal Care Comments/Notes Corrective Action /Timeframe if needed Opened the cabinet door Ran hot and cold water Flushed the toilet Heated stove & light Showed temp on thermostat Cell phone and house phone Tested the smoke detectors Covered by port or another item Comments/Notes

Matches, lighters and flammable products	Υ	None of these items
Alcoholic beverages	Υ	None in the home
Guns	Y	No guns
Cleaning agents	Y	Latch on cabinet and a fire extinguisher
Poisonous substances	Y	None in 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.	Υ	Showed living area and dining room
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.		Clean, taken out daily
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	Laundry
Diapering procedures are followed.	Yes, but N/A	N/A
Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting. Diapering. Before food preparation and eating. After playing outdoors; and At other times when necessary to prevent the spread of disease.	Y	Agreed, bathroom and kitchen area clean sinks w/ soap
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:	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, that the items are clean, organized, and usable. Comment and note below if needed.

✓ Flashlight

Bottled water

√ Folder or binder for EPP documents

1	Batteries	4	Non-perishable food	✓	Backpack(s) or carrying case(s)				
1	Portable First Aid Kit	✓	Diapers	1	Consider special toys or games				
1	Thermometer	√	Change of clothes	✓	Scissors, tape & sealing plastic				
✓	Medications	1	Blanket(s)						
Iter	ns in the Disaster Supply Kit are clean, orga	nizec	l, and usable (Y/N)? Y						
Em	Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y								
Dis	Disaster Supply Kit Comments/Notes: In the follow-up inspection the provider had all necessary items and was very well-organized.								
Eme	rgency Documents		7.00						
✓ Informal Provider Emergency Preparedness Plan (this completed form) ✓ Authorization for emergency medical care									
Plan	ning 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: Transportation via the provider as he walks with the children to the evacuation location and will walk to the alternative location if family member is not home at the first location. He has access to both locations with his keys as well.									
				. 01					

Signatures & Date						
Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed.						
	PROVIDER	INSPECTOR				
Printed Name: Keenen	Scott	Printed Name:				
Signature:		Signature:				
Date: 08/15/2021	Phone	Date: 08/13/2021	Phone: 1-877-227-0125			

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 04/12/2022 Follow up 04/13/2022	Time 11:0	e In: 3:30PM 0AM	Time Out: 4:27Pn 11:10AM		low-up Scheduled. returned by 5:00PM on		
Informal Care	R L C						
Type of Care (check one):	on-relative Infe	ormal Provider Ca	re ⊠Relative	Informal Provider	Care		
Provider Information							
First Name: Stanley	Last	Name: Scott		Provider ID	Provider ID: 432836		
Provider ID #:				Email:	Email:		
Care Location Inspected							
Street Address: Address Verified? Yes	City	Cou	nty	State	Zip Code		
Name of Children in Care (add pages	s if needed)	Scholarship	Date of Birth	Age /	Present (Y/N)		
			07/13/2012	9 / No			
			07/09/2016	5 / No			
			07/09/2016	5 / No			

Safety of the Home		
Directions: Review and determine compliance with each standard. No pages may be used for comments.	te any comments or c 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?	N/A	
Home is free of health and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Is in good repair	Y	
 Is free of insect or rodent infestation 	Y	None observed
Is well-lit and well-ventilated	Υ	
 Has hot and cold running water 	Υ	Steam observed
 Has a working inside toilet 	Y	Flush observed
 Has utilities for cooking, lighting and heating 	Y	Gas burners operational
 Has a working and safe heating system 	Υ	
 Has a working refrigerator and stove 	Y	
Has a working telephone	Y	Call Observed
 Has operational smoke detector(s) 	Υ	Alarm sounded
Has first aid kit/supplies	Y	Hydrogen peroxide, Rubbing Alcohol and Band Aids
 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	Y	Locked cabinet
Matches, lighters and flammable products	Y	None
Alcoholic beverages	Y	None
Guns	Y	None
Cleaning agents	Y	Locked cabinet
Poisonous substances	Y	Other than medications and cleaning solutions

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Υ	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Υ	
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	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	

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

Disaster Supply Kit

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

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

⊠Medications (N/A)	⊠Blanket(s)		
Items in the Disaster Supply Kit are clean, organi	zed, and usable (Y/N	I)? Y	
Emergency Ready-to-Go Pack is available and e	asily accessible in th	e event of an emergency (Y/I	N)? Y
Location of The Emergency Ready to go Pack	: Hook on hallway	to basement	
Item Specification (if needed): Extended life battery flash light 3 of each Under wares, socks, pants, shirts,			
Tablets for each child and balls,			
Multiple bags of Chips, 3 large cans of Chef E	Boyardee, 2 cans o	f Vienna sausage, 6 pack o	f 16oz. water bottles
First Aid - Wipes , band aids, gauze, tape			A TRANSPORT
Items to review on 04/13/2022 if needed: Obse	erved		- 0 "- 4
First aid kit for emergency to go bag, Blankets need to be in the bag or a smaller bag.			
Emergency Documents			
⊠Informal Provider Emergency Prepared	ness Plan (this com	pleted form)	
⊠Authorization for emergency medical ca	ire		
Planning and Maintenance			
Person responsible for updating the Disaster Su First Name	pply Kit and the Em Last Name	nergency Documents regula	rly:
Description of how the Emergency Ready-to-Go	Pack will be transo	orted to an evacuation loca	tion: It will be carried.
Shelter In Place Procedure: The provider will call the children by name, get to doors. Soon as they are secure in the basement tape the windows with plastic.	hem, grab the eme	rgency bag and head to the ontact parent. If the need to	basement. Two small windows and 2 seal the shelter should arise, provider will
Evacuation Procedures:			
Call out the children's names and get the childre buckled in their seats with seatbelts before driving using a spare key and proceed to the basement cannot shelter at the primary they will go to they are all buckled in their seats before driving the basement where they will shelter. Provider will shelter.	ng to where they will she to the location. Pro	Once the Provider will call paren that is the alternate low vider will gain access using	e at the location the provider will gain entry t once secure at the location. If they cation. Where the provider will make sure
Signatures & Date			
Acknowledgement: By signing below the parties been discussed. The parties also acknowledge to pop up visit which will be conducted virtually or in	hat, if approved, the	Il standards have been revie home in which care is prov	ewed, and any corrections if needed have ided is subject to random, unannounced
PROVIDER			INSPECTOR
Printed Name: Stanley Scott		Printed Name:	
Signature:		Signature:	
Date: 4/13/2022 Phone:		Date: 04/13/2022	Phone: 1-877-227-0125

✓ Virtual Inspection

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

	Inspection Date: 09/16/2021 Follow-up inspection Date: 09/24/2021		In: 2:00 PM In: 4:00 PM	Time Out: 3:24 Time Out: 4:16		Result: Denied Follow-up Result: Approved
	Informal Care					
Τ	ype of Care (check one):	ve Inform	nal Provider Car	e Relative	Info	mal Provider Care
	Provider Information	學就被			er.	· 蒙世 图 3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
_	First Name: Stanley	Last	Name: Scott			Provider ID: 432836
						Email:
	Care Location Inspected	-	6			
	Street Address:	City:	Cou	unty: State		Zip Code:
71.5	Name of Children in Care (add pages if no	eded)	Scholarship	Date of Birth	H.	ge / Present (Y/N)
				07/09/2016	5/	Y
		AUT		07/09/2016	5/	Y
				07/13/2012	9 /	Υ
				37	1	
					1	
					1	
-	Directions: Review and determine Additional pages may be used for control Applicable Health and Safety Training:				D-	Discussed, n/a – Not Timents/Notes Trective Action /Timeframe if needed
	Basic Health and Safety Training	Comple	ted?	N/A		Relative Informal Care
	Home is free of health and safety hazar	ds:		Standard Met Y/N		mments/Notes rective Action /Timeframe if needed
	Is in good repair			Y	Sh	owed living room, kitchen and dining area; all areas clean
	 Is free of insect or rodent infestat 	ion		Y		No indications of infestation
	Is well-lit and well-ventilated			Y		Vell-lit and windows in all common areas ith windows (air conditioner in window as well) and celling fans
	Has hot and cold running water			Y		Test the water with a thermometer and displayed high/low and showed 91.6
	Has a working inside toilet			Y		Flushed the toilet properly, soap area, common medicines and toothpaste in cabinet above the toilet
	Has utilities for cooking, lighting a	and heat	ing	Y		chen utensils in draws and lower cabinets, but had no locks on cabinet Corrective Action (9/24): Provider added locks to cabinet/drawers etc.
	Has a working and safe heating a	system		Y	_	hermostat was working, moved temp up and down-heat only no central air
	Has a working refrigerator and st	ove		Υ		Opened the fridge/freezer and tested the tove by putting the burner on (gas stove)

Has a working telephone	Υ	Has a working house phone and cell phone
Has operational smoke detector(s)	Υ	Tested both smoke detectors working
Has first aid kit/supplies	Y	properly Had a home first aid supplies but used it as to-go kit
Has protective coverings on any electrical outlet that is accessible to children	Υ	Showed accessible outlets with the outlets occupied. One outlet was not covered in the kitchen Corrective Action (9/24): Outlet was covered up
Harmful items are stored appropriately and away from children:	Standard Met	Comments/Notes Corrective Action /Timeframe if needed
Sharp or pointed items	Υ	No locks on cabinets/drawers/knives stored on countertop in knife holder Corrective Action (9/24): Locked placed on cabinet a drawer
Medications of any kind	Υ	Medications in cabinet above the toilet, no lock Corrective Action (9/24): Lock placed on upper cabi in bathroom
Matches, lighters and flammable products	Υ	Does not own
Alcoholic beverages	Υ	In a separate room, upstairs on top of mini fridge
Guns	Υ	Does not own
Cleaning agents	Υ	Cleaning agents in the kitchen cabinet and bathroo sink cabinet, but no locks on the cabinets Corrective Action (9/24): Lock placed on cabinets
Poisoneus substances	Y	Does not own
GENERAL CLEANLINESS STANDARDS	Standard Met	Comments/Notes Corrective Action /Timeframe If needed
All areas of the home are kept clean, including diapering area.	Y	Yes, all areas including bedroom were clean and organized. No diaper age children
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	N/A	No diaper age children but trash can area was clean appropriately stored
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	Yes, if wet clothing or bedding
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: Tolleting. Diapering. Before food preparation and eating. After playing outdoors; and At other times when necessary to prevent the spread of disease.	Y	Displayed kitchen and bathroom soap stations, bo areas very clean and had soap dispensers
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	Yi
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 MSDE OCC Informal Care Inspection Checklist 2020-03-26 Page 2 of 4	Υ	

 Shouting, Cursing, Shaming, Ridicu Washing a child's mouth with soap Putting pepper or other spicy or dist child's mouth Requiring a child to stand on one for 	asteful items in a			
Tying child to a cot or other equipment	ent			
The provider immediately reports any sus neglect or mistreatment by calling 911 and Department of Social Services Child Prote	pected child abuse, d your <u>local</u>	Y		
Emergency Ready-to-Go Pack			多1、 图 40、图4	
The Emergency Ready-to-Go Pack must needed medications) <u>and</u> Emergency Do	be available and easily accer ocuments.	ssible in the event of an er	пergency. This contains a Disaste	r Supply Kit (includi
Disaster Supply Kit			· · · · · · · · · · · · · · · · · · ·	· 法 · · · · · · · · · · · · · · · · · ·
Directions: Review and determine that e enough supplies for each child in care. A				
✓ Flashlight	✓ Bottled water		✓ Folder or binder for EP	P documents
Batteries (N/A)	✓ Non-perishable	food	✓ Backpack(s) or carrying	g case(s)
✓ Portable First Aid Kit	Diapers (N/A)		 ✓ Consider special toys of Scissors, tape & sealing 	
✓ Thermometer	✓ Change of cloth	ies		
✓ Medications	✓ Blanket(s)			
Items in the Disaster Supply Kit are clean, org	panized, and usable (Y/N)?	Υ		
Emergency Ready-to-Go Pack is available an			/N)? Y	
Bottled water Canned food ravioli and sausages No diaper age children No change of clothes only night clothes/under 2 blankets No EPP forms-stated may have the Backpack/tote bag 3 tablets/1 per child kitchen scissors, tape & trash bags	rwear (Corrective Action (9/24).	•		
Emergency Documents	740 OF	18 1 No. 18 18		1. 发展。
 Informal Provider Emergency Prepared Authorization for emergency medical cr 	, ,	i form)		
Planning and Maintenance	第一点 1 平面 6 图	的一个工艺等等	。 福·加州首都	144
Person responsible for updating the Disaster	Supply Kit and the Emerg	gency Documents regul	arty:	
First Name	Last Name			
Description of how the Empress Description	Co Book will be too one		atlana	
Description of how the Emergency Ready-to- Evacuation Primary: Grab the kids and the gets in the car, will call or tex	to-go bag, head to the ba the living room (2 window	ckdoor, get inside the c		
Evacuation Alternate: Get the kids, grab the extreme emergency go into the basement as 1 window in the front of the basement, contains	well, Living room (2 wind	lows in the living room a		

	ill standards have been reviewed, and any corrections if needed have					
been discussed. PROVIDER INSPECTOR						
Printed Name: Stanley Scott	Printed Name					
Signature	Signature:					
Date: 9/24/21 Phone:	Date: 09/24/2021 Phone: 1-877-227-0125					

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 06/12/2023 Follow-up Inspection Date: 06/15/2023	Time In: 1:30PM Time In: 9:00AM	Time Out: 2:32PM Time Out: 9:07 AM						
Informal Care								
Type of Care (check one):	ative Informal Provider C	are ⊠Relative In	formal Provider Care					
Provider Information								
First Name: Carly	Last Name: Seibel		Provider ID: <u>516800</u>					
Provider ID #:			Email:					
Care Location Inspected								
Street Address: City: County: State Zip Code: Address Verified? Yes.								
Name of Children in Care (add pages if ne	eded) Scholarship	Date of Birth	Age / Present (Y/N)					
		(11/09/2022)	7mos. / Y					

	(11/03/2022)	711105.71		
Safety of the Home				
Directions: Review and determine compliance with each standard. Note lages may be used for comments.	e any comments or c Y - Yes, N - No,	corrective actions needed. Additional D – Discussed, n/a – Not Applicable		
lealth and Safety Training:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Basic Health and Safety Training Completed?	Υ	Relative Informal Care - Certificate Submit		
dome is free of health and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Is in good repair	Y	All areas were clean		
 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		
Has hot and cold running water	Υ	Tested by provider and steam observed on camera		
Has a working inside toilet	Υ	Flushed by provider and observed		
 Has utilities for cooking, lighting and heating 	Υ			
Has a working and safe heating system	Y	Thermostat tested by provider for cooling heating		
 Has a working refrigerator and stove 	Υ	Tested by provider and observed		
 Has a working telephone 	Y	Outbound call made to provider's phone		
 Has operational smoke detector(s) 	Y	Tested by provider and observed		
Has first aid kit/supplies	Y	Medical Supplies in hallway closet (Band-Ai gauze, alcohol wipes, and ointment) and first kit stored in provider's bathroom		
 Has protective coverings on any electrical outlet that is accessible to children 	N	Corrective Action Required: Outlet coverings needed for all upper areas)		
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	Stored in knife holder on back of kitchen counter		
Medications of any kind	Y	Does not own		
 Matches, lighters and flammable products 	Y	Does not own		
Alcoholic beverages	Y	Does not own		
• Guns	Y	Does not own		
Cleaning agents	Y	Cleaning agents stored in high kitchen cabinet above stove		
 Poisonous substances 	Y	Does not own		

ENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
l areas of the home are kept clean, including diapering area.	Υ	Changing station living room area
ash, garbage and wet and soiled diapers are disposed of in a anitary manner.	Υ	Diapers taken out daily
hild is changed immediately when s/he has a soiled or wet aper, clothing or bedding.	Υ	
plapering procedures are followed.	Υ	All diapering supplies available near changing pad
Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease.	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	Y	Contective Action / Timetrame if needed
A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm;		
 Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give provide.	Y	

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

Directions: Review and determine that each 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	items are clean, organized, and usable. Commen Bottled water	t. Be certain that the Disaster Supply Kit contains t and note below if needed.
⊠ Batteries for Flashlight	⊠Non-perishable food	⊠Folder or binder for EPP documen
☑ Portable First Aid Kit	⊠Diapers	Backpack(s) or carrying case(s)
⊠Thermometer		⊠Consider special toys or games
	□ Change of clothes	⊠Heavy Duty Scissors duet
⊠Medications		packing tape & sealing plastic/trash
DE OCC Informal Care Inspection Checklist	⊠Blanket(s)	

5	
	ed, and usable (Y/N)? Y sily accessible in the event of an emergency (Y/N)? Y Stored in living room near exit
vit are clean, organize	ed, and usable (1714)
Items in the Disaster Supply Kit are clean,	sily accessible in the event
Emergency Ready-to-Go Pack is available and each Location of The Emergency Ready to go Pack: Secrification (if needed):	Stored in living room near exit Stored in living room near exit id kit, 1 thermometer, no spec meds, 6 bottled waters, 2 canned foods, 1 can of b vipes, 6 diapers, 1 outfit (top/bottom), 2 sleeper onesies, 2 blanket, bag of small to ssors and folder w/ EPP and ECMA docs
Beady to go Pack:	Stored in living room near exit id kit, 1 thermometer, no spec meds, 6 bottled waters, 2 canned foods, 1 can of D vipes, 6 diapers, 1 outfit (top/bottom), 2 sleeper onesies, 2 blanket, bag of small to ssors and folder w/ EPP and ECMA docs
Location of The Emergency Ready	thermometer, no spec meds, o sleeper onesies, 2 plants
Item Specification (if needed): Item Specification (if needed):	d kit, 1 therms, 1 outfit (top/bottom)
- 2 flashlights, 1.5 V pk of w	rooms and folder w/ EPP and ECNIA GERNAL
Item Specification (if needed). 2 flashlights, 1.5 v pk of batteries, 1 first ai 6 food, 1 duffle bag (carrying case), 1 pk of w 7 roll of duct tape, 4 trash bags, 1 pair of scis	3015 4112
roll of duct tabe,	ted & Reviewed on 06/15/2025
roll of duct tape, 4 trash bags, 1 pair of control of duct tape, 4 trash bags, 1 pair of control of duct tape, 4 trash bags, 1 pair of control of control of control of trash bags, 1 pair of control	t. droom)
- Items to ze	bathroom, bedroom
Outlet coverings need in all areas (kitchen,	ordering Supp
- Page 5 of EPP required	
- Page 5 of EFF reguments	(fem)
Emergency Documents	ss Plan (this completed form)
Dravider Emergency Fleparouni	
a subscipation for emergency	
Planning and Maintenance Person responsible for updating the Disaster Supply	Fundaments regularly:
Planning and Maintenance	y Kit and the Emergency Document
Person responsible for updating the Disaster La	ast Name
First Name Se	eibel (Provider)
Carly	ck will be transported to an evacuation location: carried by the provider.
the Emergency Ready-to-Go Page	ck will be transported to an overse
Description of how the Emergency	The provider will grab the ERTG bag
	Marwindows The Drovider Will 9
Shelter In Place Procedure:	Id lock front and back doors and/or windows. The provider win guestier she and the
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The provider will gather the child in care and her child and head to the basement. The provider will seal the children are secured she will call or text the parents of the children are secured she will call or text the parents of the children are secured she will call or text the parents of the child in calculation. The provider will account for the child in calculation of the child in calculation of the child in calculation. The provider and children will go the evacuation location, which will be the could go into the master bedroom (1 door 2 windows before, during and after the emergency if it is safe to a children will go the convenience are facing car seat and drive to the location, which is gain access into the building from there she will recept the provider will contact the parent before, during the provider will contact the parent before, during the convenience are Hours: **The provider**	Id, lock front and back doors and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the car as when the emergency has ended. If a provide and she will secure the children in their rear-facing car seats and upon arrival the provider has key access into the home, after entry the provider will contact by call or text the parent do so. If a provider will gather the child in care and her child and ERTG. There will be a provider and children will go to the vehicle and secure the children in their upon arrival the provider will call the point of contact, we instruction of where she and the children will shelter. Once secured in the uring and after the emergency if it is safe to do so. If a provider she and the children will shelter. Once secured in the uring and after the emergency if it is safe to do so.
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Shelter In Place Procedures. The provider will gather the child in care and her child and head to the basement. The provider will seal the children are secured she will call or text the parents of the children are secured she will call or text the parents of the children are secured she will call or text the parents of the children are secured she will call or text the parents of the children are secured she will account for the child in call of the children will go the convenience. The provider and children will go the to the evacuation location, which will be convenienced to the evacuation location, which will be contact the parent before, during and after the emergency if it is safe to the convenience of the convenience o	Id, lock front and back doors and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the car as when the emergency has ended. If a provide and she will secure the children in their rear-facing car seats and upon arrival the provider will contact by call or text the parent do so. If a provider will gather the child in care and her child and ERTG. There will be a provider and children will go to the vehicle and secure the children in their upon arrival the provider will call the point of contact, where the entry is and after the emergency if it is safe to do so. If a provider will standards have been reviewed, and any corrections if needed have approved, the home in which care is provided is subject to random, unannounced in.
Shelter In Place Procedures. The provider will gather the child in care and her chil and head to the basement. The provider will seal the children are secured she will call or text the parents of the children are secured she will call or text the parents of the children are secured she will account for the child in care well for convenience. The provider and children will grive to the evacuation location, which will be would go into the master bedroom (1 door 2 windows before, during and after the emergency if it is safe to be would go into the master bedroom (1 door 2 windows before, during and after the emergency if it is safe to be would go into the master bedroom the primary location additional ERTG in the car as well for convenience ear-facing car seat and drive to the location, which is gain access into the building from there she will recept action, the provider will contact the parent before, during the parent before, during the parent before, during the parties also acknowledge that, if a provisit which will be conducted virtually or in-person provider. PROVIDER The provider will seat the child in care and her chil	Id, lock front and back doors and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the car as when the emergency has ended. If a door will gather the child in the entry the parent do so. If a provider will gather the child in the care and her child and ERTG. There will be an entry the entry the provider and children will go to the vehicle and secure the children in their provider and children will go to the vehicle and secure the children in their entry the entry the provider will call the point of contact. If a provider and the emergency if it is safe to do so. In the provider will standards have been reviewed, and any corrections if needed have approved, the home in which care is provided is subject to random, unannounced in the provider will be an additional ERTG in the care is provided in the provider will call the point of the provider will be an additional ERTG in the care and the children will set the parent will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in the care and the children will be an additional ERTG in th
Shelter In Place Procedures. The provider will gather the child in care and her chil and head to the basement. The provider will seal the children are secured she will call or text the parents of the children are secured she will call or text the parents of the children are secured she will call or text the parents of the children will call or text the parents of the children will get will account for the child in call well for convenience. The provider and children will get will go into the master bedroom (1 door 2 windows before, during and after the emergency if it is safe to call the c	Id, lock front and back doors aintown as entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry way of the basement and windows if the need arises. After she and the entry when when the emergency has ended. In a distinct the provider and additional ERTG in the car as a seats and the provider will call the parent do so. In a distinct the provider will gather the child in care and her child and ERTG. There will be a the provider and children will go to the vehicle and secure the children in their arises. The provider and children will go to the vehicle and secure the children in their arises are and the children will shelter. Once secured in the aring and after the emergency if it is safe to do so. INSPECTOR Printed Name:

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

INFORMAL CARE INSPECTION CHECKLIST

Return to: ccs.informalproviders@maryland.g

		Time Out: 10:54 AM Time Out: 8:47 AM		D NOT PASS Result: APPROVED
ative Info	rmal Provider C	are □Relative Inf	ormal Provide	r Care
Last Name: Sheffey		Provider ID: 483014		
			Email:	
	City	County	State	Zip Code
eded)	Scholarship	Date of Birth	Age /	Present (Y/N)
		(09/27/2021)	8mos. / Y	
3 7 1		(08/14/2020)	1yr /Y	
		(07/04/2018)	3yr /Y	
			1	
			1	
			1	
	Time	Last Name: Sheffey City	Time In: 8:30 AM Time Out: 8:47 AM ative Informal Provider Care Relative Informal Provider Care Relati	AM Time Out: 8:47 AM Follow-up ative Informal Provider Care

Safety of the Home			
Directions: Review and determine compliance with each standard. Not pages may be used for comments.	e any comments or c Y - Yes, N - No, D	orrective actions needed. Additional - Discussed, n/a - Not Applicable	
Health and Safety Training:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed Non-Relative Informal Care Comments/Notes Corrective Action /Timeframe if needed	
Basic Health and Safety Training Completed?	Y Standard Met Y/N		
Home is free of health and safety hazards:			
Is in good repair	Y	Generally clean	
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		
Has utilities for cooking, lighting and heating	Y		
Has a working and safe heating system	Y		
 Has a working refrigerator and stove 	Y		
Has a working telephone	Y	Only working cellphones	
Has operational smoke detector(s)	Y		
Has first aid kit/supplies	Y	Observed all home medical supplies	
 Has protective coverings on any electrical outlet that is accessible to children 	Y	All outlets 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 high cabinet in the kitchen	
Medications of any kind	Y	High shelf in hallway closet	
Matches, lighters and flammable products	Υ	Does not own	
Alcoholic beverages	Y	Does not own	

Guns

Does not own

Cleaning agents	Υ	High shelf in hallway closet	
Poisonous substances	Y Standard Met Y/N	Does not own Comments/Notes Corrective Action /Timeframe if needed	
GENERAL CLEANLINESS STANDARDS			
All areas of the home are kept clean, including diapering area.	Υ	Changing area clean and organized	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Diapers taken out at the end of each day	
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:	Y		
A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment	Y		
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> <u>Department of Social Services Child Protective Services Unit.</u>	Y		

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
 ⊠Folder or binder for EPP documents

 ⊠Batteries for Flashlight
 ⊠Non-perishable food
 ⊠Backpack(s) or carrying case(s)

 ⊠Portable First Aid Kit
 ⊠Diapers
 ⊠Consider special toys or games

⊠Thermometer

Medications (N/A)

⊠Blanket(s)

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

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

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:

Item Specification (if needed):

1 toy, 2 tablets, 1 thermometer, no medications, 3 outlits (1 per child), 1 flashlight, 1 pk of AA batteries, 1 big blanket, 1 first aid kit, diapers and wipes, canned food & baby food, 4 bottled waters, roll of tape, scissors, trash bags, and folder of EPP and ECMA for each child

Shelter-in-Place Procedures: Provider will call the parents, get the to-go and the children, will walk into the master bedroom closet, will seal the door, if necessary, will stay there until safe to exit and call their parents when the emergency is over.

Evacuation Locations:

Primary – Provider will call or text the parents, gather the children and the to-go bag, will load the kids in their car seats and drive

Provider will have access via her spare key, will go into the basement area, no outside doors, or windows (1 entry door 0 windows), and will contact the parents via call or text once they are settled in.

Alternate – Provider will gather the kids and to-go bag, load them into their car seats and put the to-go bag into the trunk, she will drive to and provider has a spare key to access the home. Upon arrival she and the children will go into the basement foyer area (1 door 0 windows), once settled in she will call the parents and inform them of the emergency.

Items to be reviewed on 06/08/2022: Items corrected and reviewed on 06/08/2022

- First Aid Kit for the home
- Basket or bag to hold the supplies for the diaper changing area
- Battery-operated flashlight and extra batteries
- Folder of the most recent Emergency Preparedness Plan and Emergency Care & Medication forms for each child

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 Printed Name: Signature Signature: Date: 6/8/22 Phone: 1-877-227-0125

\boxtimes	
□Virtual Inspection	
In-person Inspectio	n

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 01/04/2023	Time In: 1:30PM	Time Out: 2:35P	M Result: Did not pass. Follow up needed
Follow Up Inspection: 01/05/2023	Time In: 10:00AN	Time Out:10:22A	
Informal Care			
Type of Care (check one): ☐ Non-	relative Informal Provide	er Care ⊠Relative	Informal Provider Care
Provider Information			
First Name: Jacqueline	Last Name: Simr	nonds	Provider ID:
Provider ID			Email:
Care Location Inspected			
Street Address: Address Verified? Yes	City:	County:	State Zip Code:
Name of Children in Care (add pages if	needed) Scholarsh	ip Date of Birth	Age / Present (Y/N)
		12/08/2021	1 / Yes
		09/16/2011	11 / No, At School

Name of Children in Care (add pages if needed)	Scholarship	Date of Birth	Age / Present (Y/N)
		12/08/2021	1 / Yes
		09/16/2011	11 / No, At School
Safety of the Home			
Directions: Review and determine compliance with eapages may be used for comments.	ch standard. Note		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?		Υ	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	
 Is free of insect or rodent infestation 		Y	No sign of infestation
 Is well-lit and well-ventilated 		Y	
 Has hot and cold running water 		Y	Steam from shower observed in bathroom
 Has a working inside toilet 		Y	Listerine must be moved to higher location
 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 when door was opened.
 Has a working telephone 		Y	Provider's cell called
 Has operational smoke detector(s) 		Y	
Has first aid kit/supplies		Y	observed band aids, alcohol swabs, gloves, ointment, tape, gauze
 Has protective coverings on any electrical accessible to children 	outlet that is	Y	Covered, in use or behind furniture
larmful items are stored appropriately and away :hildren:	from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Sharp or pointed items		Υ	Back of counter
 Medications of any kind 		Υ	Upper cabinet in Kitchen
 Matches, lighters and flammable products 		Υ	
 Alcoholic beverages 		Υ	Was moved to high shelf in closet
• Guns		Υ	
Cleaning agents		Υ	Cabinet lock observed
Poisonous substances		Υ	Other than medications and cleaning solutions
		1 / L V - 1 1 1 1 1 1 1 1 1	

Comments/Notes

Standard Met

	Y/N	Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Υ	
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:	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 The provider immediately reports any suspected child abuse,	Y	
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

	⊠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	⊠Consider special toys or games
	⊠ Thermometer	⊠ Change of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
	⊠Medications	⊠Blanket(s)	
Iten	ns in the Disaster Supply Kit are clean, organized,	and usable (Y/N)? Y	

Emergency Ready-to-Go Pack is available and ea	Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y			
Location of The Emergency Ready to go Pack: In the Dining room				
Item Specification (if needed):				
8 D batteries, 1 Onesies, 2 shirts, 3 pair pants, 1	Undershirt, 3 sox, 3 u	nder wears,1 hoodie,		
Band aids, gauze, tape, .q-tips, gloves, alcohol w Uno. 8 Diapers, Wipes, 2 16oz bottles of water, 2				
Items to review on 01/05/2023 if needed: Observed	erved			
Safety lock on cabinet under sink with cleaning as detergent up to Parent's closet, Band-Aids, gauze the baby, duct tape,				
Emergency Preparedness Plan and Emergency	are and Medication A	uthorization in the Emergency b	ag.	
Emergency Documents				
⊠Informal Provider Emergency Prepared	ness Plan (this comp	eleted form)		
		,		
Planning and Maintenance				
Person responsible for updating the Disaster Su	pply Kit and the Eme	rgency Documents regularly:		
First Name Jacqueline	Last Name Simmo	nds		
Description of how the Emergency Ready-to-Go	Packwill he transno	rted to an evacuation location:	Rolled or Carried	
Description of new the Emergency Ready to Ge	T dok will be transpe	rica to an evacuation location.	Troiled of Carried	
Shelter In Place Procedure:				
The provider will grab ERTB and gather the child	Iren and head to the	bathroom. The room has one	door no window. If the need should	
arise the provider will use plastic and tape to sea				
Evacuation Procedures:				
The provider will grab the baby and the older chi				
floor and out to the provider's vehicle where she block to the primary evacuation location,			to let her know they are on	
their way or use a spare key to gain entry. Once				
the need should arise the provider will use plasti	c and tape to seal th			
location and after they are secure in the evacuat		_		
If they couldn't shelter at the primary location, the			The provider will	
grab the baby and the older child, emergency ba provider's vehicle where she will get the stroller				
Once at the location the provider will ask where				
immediately after they are secure in the alternate	evacuation location).		
Signatures & Date				
Acknowledgement: By signing below the parties a been discussed. The parties also acknowledge the pop up visit which will be conducted virtually or in	nat, if approved, the l			
PROVIDER		IN	ISPECTOR	
Printed Name: Jacqueline Sim	monds	Printed Name:		
Signature: Signature:			·	
Date: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Date: 01/05/2023	Phone: 1-877-227-0125	

☑Virtual Inspection☐In-person Inspection

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 12/22/2023	Time In: 9:30AM	Time Out: 10:26A	M Result: PASSED	
Informal Care				
Type of Care (check one):	on-relative Informal Provide	r Care □Relative	Informal Provider Care	
Provider Information				
First Name: Heather	Last Name: Slagie		Provider ID: <u>537159</u>	
Provider ID #:	Last Name. Olagie		Email:	
Care Location Inspected				
Street Address: City: County: State Zip Code: Address Verified? Yes.				
Name of Children in Care (add page	s if needed) Scholarsh	p Date of Birth	Age / Present (Y/N)	
		(04/27/2012)	11yr. / Y	

	(04/27/2012)	11yr. / Y
Safety of the Home		
Directions: Review and determine compliance with each standard. Not pages may be used for comments.	e 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?	Υ	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	All areas were clean
 Is free of insect or rodent infestation 	Y	No evidence of infestation
Is well-lit and well-ventilated	Y	All lights were turned on and natural window lighting
 Has hot and cold running water 	Y	Tested by provider and observed steam from sink
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	Band-Aids, Alcohol and Peroxide under bathroom sink
 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	Knife holder and block on back of kitchen counter
Medications of any kind	Y	Stored in both medicine cabinets
Matches, lighters and flammable products	Y	Moved to container on top of fridge
Alcoholic beverages	Y	Does not own
Guns	Y	Does not own
Cleaning agents	Y	All cleaning products moved to top shelf of laundrich closet and hallway closet
Poisonous substances	Y	Does not own

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

⊠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	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
⊠Medications (N/A)	⊠Blanket(s)	

Items in the Disaster Supply Kit are clean, organiz		
Emergency Ready-to-Go Pack is available and ea	asily accessible in the event of an emergency (Y/	N)? Y
Location of The Emergency Ready to go Pack 1 duffle bag (carrying case), 1 flashlight, waters, 3 canned foods/2 pk noodles, 1 or pair of scissors, 1 roll of duct tape and 2 flashlights tems to be reviewed on xx/xx/xxxx: N/A	1 bag of AA batteries, 1 first aid kit, 1 thermonutfit (top/bottom), 1 large blanket, folder w/ EF	neter, no specific medications, 2 bottled P and ECMA docs per child, 1 book, 1
Emergency Documents		
⊠Informal Provider Emergency Prepareda ⊠Authorization for emergency medical ca		
Planning and Maintenance		
Person responsible for updating the Disaster Sup	oply Kit and the Emergency Documents regula	rly:
First Name Natasha	Last Name Summers	,.
Description of how the Emergency Ready-to-Go	Pack will be transported to an evacuation loca	tion: carried by the provider.
Shelter in Place Procedure:		
The provider will gather the child, and the ERTG windows). If needed the provider will use the sea text the parent to relay emergency updates.	and go into the master bedroom (2 doors 2 wi aling plastic and tape to seal the doors, window	ndows) or master bathroom (1 door 0 as and vents. The provider will call then
Primary: The provider will gather child and the Esafety seat belt and then drive to Once secured the provider will call and Alternate: If they could not access the primary I Provider will ensure the child is secured in his sareceive shelter instructions from updates. Care Hours:	Upon arrival, the provider will receive text the parent to relay the emergency update ocation, the provider will gather child and the lefty seat belt and then drive to	shelter instructions from es. ERTG and walk the child to her vehicle.
Signatures & Date		
Acknowledgement: By signing below the parties a been discussed. The parties also acknowledge the pop up visit which will be conducted virtually or in	nat, if approved, the home in which care is prov	ewed, and any corrections if needed have ided is subject to random, unannounced
PROVIDER		INSPECTOR
Printed Name: Heather Slaa	Printed Name:	
Signature:	Signature:	
Date: 1 D - 29 - 23 Phone:	te: 12/22/2023	Phone: 1-877-227-0125

⊠Virtual Inspection
□In-person Inspection

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 12/28/2022	Time	In: 10:30AM	Time Out: 12:00P	M Result: PASSED
Informal Care				
Type of Care (check one):	on-relative Info	ormal Provider C	are ⊠Relative	nformal Provider Care
Provider Information				
First Name: Glendora Provider ID #:	Last	Name: Small		Provider ID:
Care Location Inspected				
Street Address: Address Verified? Yes	City:	County		State Zip Code:
Name of Children in Care (add pages	s if needed)	Scholarship	Date of Birth	Age / Present (Y/N)
			3/9/2022	9 Months

Safety of the Home		
Directions: Review and determine compliance with each standard, No pages may be used for comments,	te any comments or o	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	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 	Y	No sign of infestation
Is well-lit and well-ventilated	Y	
 Has hot and cold running water 	Y	Steam Observed
Has a working inside toilet Look under sink	Y	Flush observed
 Has utilities for cooking, lighting and heating 	Y	
Has a working and safe heating system	Y	
Has a working refrigerator and stove	Y	
Has a working telephone	Y	Provider's cell called
Has operational smoke detector(s)	Y	
Has first aid kit/supplies	Y	Band aids, Neosporin, Antiseptic wipes
 Has protective coverings on any electrical outlet that is accessible to children 	Y	Covered in use or behind furniture
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	Back of counter
Medications of any kind	Y	
Matches, lighters and flammable products	Y	None
Alcoholic beverages	Y	None
Guns	Y	None
Cleaning agents	Y	Locked in cabinet
Poisonous substances	Y	Other than medications and cleaning solutions

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

⊠Flashlight	⊠Bottled water	
⊠Batteries 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
	⊠Blanket(s)	

Items in the Disaster Supply Kit are clean, organi	ized, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is available and e	easily accessible in the event of an emergency (Y/N)? Y
Location of The Emergency Ready to go Pack	g: Bedroom Closet	
Item Specification (if needed): 4 D batteries, Gloves, cold pack, alcohol wipes b 2 16oz bottles of water, one container each of a Items to review on xx/xx/xxxx if needed: N/A	and-aids tape gauze, ointment, Onesies, 1 pant ople sauce, beef baby food, carrots, Cookie sna	t, 1 top, sox, 6 diapers cks, toy phone, toy car, book
Emergency Documents		
⊠Informal Provider Emergency Prepared	ness Plan (this completed form)	
	are	
Planning and Maintenance		
Person responsible for updating the Disaster Su	pply Kit and the Emergency Documents regul	larly:
First Name Glendora	Last Name Small	
Shelter In Place Procedure: The provider will grab the baby, grab the ERTB arise the provider will use plastic and tape to sea are and secure. Evacuation Procedures: The provider will call Lyft car service then grab to will secure the baby in his rear facing car seat be at the location, they will shelter in the bedroom we care location and immediately after they are secure they couldn't shelter at the primary location, they may be considered they couldn't shelter at the primary location, they secure the baby in his rear facing car seat, before location to let her know they are on their way. The arise the provider will use plastic and tape to sea they are secure in the alternate evacuation location.	and head to the bathroom. The room has one at the shelter. The provider will call the parent the emergency bag and diaper bag, gather the effore being driven to the primary evacuation to which has 2 windows and two doors. The provider in the evacuation location. Bey will go to the alternate evacuation location gency bag and diaper bag, gather the baby, the being driven to the location. The provider will shelter in the bathroom that has no wind the shelter. The provider will call the parents	door and no window. If the need should before going to shelter and then after they be baby, then proceed to the Lyft where she ocation, which is the life call the parents before leaving the care indow and one door. If the need should
Cianaturas & Data		
Acknowledgement: By signing below the parties a been discussed. The parties also acknowledge the pop up visit which will be conducted virtually or in	at, if approved, the home in which care is prov	ewed, and any corrections if needed have pided is subject to random, unannounced
PROVIDER		INSPECTOR
Printed Name: Glendorg SMG !!	Printed Name:	
	Signature:	
Date: /2/29/2022 Phone	Date: 12/28/2022	Phone: 1-877-227-0125

⊠Virtual Inspection
□In-person Inspection

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 06/22/2023	Time In: 10:30AM	Time Out: 11:32AM	M Result: PASSED
Informal Care			
Type of Care (check one):	on-relative Informal Provider C	Care ⊠Relative In	formal Provider Care
Provider Information	N. P. St. Barrier		
First Name: Angle	Last Name: Smith		Provider ID: <u>515494</u>
Provider ID #:			Email:
Care Location Inspected			
Street Address: Address Verified? Yes.	City: County:	State	Zip Code:
Name of Children in Care (add page	s if needed) Scholarship	Date of Birth	Age / Present (Y/N)
		(07/21/2022)	11mos. / Y

Name of Children in Care (add pages if needed)	Scholarship	Date of Birth	Age / Present (Y/N)
		(07/21/2022)	11mos. / Y
Safety of the Home			Mark Commence of the Commence
Directions: Review and determine compliance with each pages may be used for comments.	standard. Note	any comments or or 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 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		Y	All lights were turned on and natural window lighting
Has hot and cold running water		Y	Tested by provider and steam observed on camera
Has a working inside toilet		Y	Flushed by provider and observed
 Has utilities for cooking, lighting and heating 		Y	
Has a working and safe heating system	a seema no	Υ	Thermostat tested by provider for cooling & heating
Has a working refrigerator and stove		Υ	Tested by provider and observed
Has a working telephone		Υ	Outbound call made to provider's phone
Has operational smoke detector(s)	yran.	Υ	Tested by provider and observed
Has first aid kit/supplies		Υ	Stored on in drawer in bathroom (Band-Aids, Gauze, Ointment)
Has protective coverings on any electrical ou accessible to children	tlet that is	Υ	All outlets covered or occupied
Harmful Items are stored appropriately and away f children:	rom	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Sharp or pointed items		Υ	Stored in knife holder on back of counter
Medications of any kind	U.	Υ	Stored on high shelf in kitchen cabinet
Matches, lighters and flammable products		Υ	Moved to high kitchen cabinet
Alcoholic beverages		Υ	Does not own
Guns		Υ	Does not own
Cleaning agents		Υ	Cleaning products stored in locked kitchen and bathroom cabinets
Poisonous substances		Υ	Does not own
SENERAL CLEANLINESS STANDARDS		Standard Met	Comments/Notes

	Y/N	Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	Provider has pack & play in upstairs room or changes child on changing pad downstairs in living room
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Diapers taken out daily via diaper genie or outside trash can
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	All diapering supplies available in child's bedroom
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.	Yes you Yes you	
A child in care is not subjected to mistreatment, 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 Trying 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.	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

⊠Flashlight	⊠Bottled water	
		⊠Backpack(s) or carrying case(s)
	⊠Diapers	□ Consider special toys or games
⊠Thermometer	⊠Change of clothes	☑Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags

⊠Medications	⊠Blanket(s)		
Items in the Disaster Supply Kit are clear	n, organized, and usable (Y/N)?	Υ	
Emergency Ready-to-Go Pack is availab)? Y
Location of The Emergency Ready to Item Specification (if needed): 1 flashlight, 2 additional AA batte bag (carrying case), no spec med diapers, 2 outfits(top/bottom), 1 b Items to be reviewed on xx/xx/xxx	ories in baggie, 1 first aid kit, 1 re ds, 3 baby bottles, 3 canned food blanket, 1 pair of scissors, 4 sma	oll of duct tape, 1 roll of ds, 4 dried pk foods, 3 ba	trash bags, 6 bottled waters, 1 duffle aby foods/formula, 1 pk of wipes and P and ECMA docs
Emergency Documents			
National Provider Emergency P	reparedness Plan (this complete	ed form)	
	edical care		
Planning and Maintenance			
Person responsible for updating the Dis-	aster Supply Kit and the Emerge	ncy Documents regularly	<i>t</i> :
First Name Shelby	Last Name Smith		
Description of how the Emergency Read	dy-to-Go Pack will be transported	to an evacuation location	on: carried by the provider.
Shelter In Place Procedure:			
sealing plastic and tape to seal the door they inside and safe. Evacuation Procedures Primary: The provider will account for the sealing plastic and tape to seal the door they inside any sealing plastic and tape to seal the door they inside any sealing plastic and tape to seal the door they inside any sealing plastic and tape to seal the door they inside any sealing plastic and tape to seal the door they inside any sealing plastic and tape to seal the door they inside any sealing plastic and tape to seal the door they inside any sealing plastic and tape to seal the door they inside and safe.	the child and grab the ERTG. The eprovider will receive instruction ere. primary location, the provider will secure the child in the rear-faci	e provider will secure the from from from from from from from from	child in the rear-facing car seat and then the to shelter and then contact the parent d grab the ERTG. The provider and
Signatures & Date			NAME OF THE PARTY
Acknowledgement: By signing below the been discussed. The parties also acknowled upon up visit which will be conducted virtue.	wledge that, if approved, the homually or in-person.		
PROVIDER			INSPECTOR
Printed Name: Angie Sm	1th Pr	rinted Name:	
Signature:	Si	gnature:	
Date: 6 22 2023 Phone:	D	ate: 06/22/2023	Phone: 1-877-227-0125

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

Return to: ccs.informalproviders@maryland.g

	10	or comon or	ILONE I	The second
Inspection Date: 04/14/2022	Time	In: 1:45PM	Time Out: 3:32PM	Result: Passed If form is returned by 5:00Pm on 4/15/2022
Informal Care				White and the second
Type of Care (check one):	on-relative Info	ormal Provider Ca	are ⊠Relative I	nformal Provider Care
Provider Information				
First Name: Belinda	Last	Name: Smith		Provider ID: 484899
Provider ID #:		EVE OVE TOTAL		Email:
Care Location Inspected		7		
Street Address: Address Verified? YES	City		County	ate Zip Code
Name of Children in Care (add pages	if needed)	Scholarship	Date of Birth	Age / Present (Y/N)
		m) permits	8/21/2009	12 / Yes
			4/13/2015	7 / Yes
Maria Cara Alexandra			6/22/2016	5 / Yes
			11/6/2018	3 / Yes

Safety of the Home	1. Mar	
Directions: Review and determine compliance with each standard, Note pages may be used for comments.	e 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?	N/A	0 = 0
Home is free of health and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Is in good repair	Υ	
Is free of insect or rodent infestation	Υ	No sign of infestation
Is well-lit and well-ventilated	Y	Bright and sunny
Has hot and cold running water	Y	Steam observed from shower
Has a working inside toilet	Y	Flushed
Has utilities for cooking, lighting and heating	Y	Gas top was operational
Has a working and safe heating system	Y	
Has a working refrigerator and stove	Y	
Has a working telephone	Y	Call observed
Has operational smoke detector(s)	Y	Alarm sounded
Has first aid kit/supplies	Y	The second secon
 Has protective coverings on any electrical outlet that is accessible to children 	Υ	Covered, in use or behind furniture
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 higher cabinet
Medications of any kind	Y	Hall closet
Matches, lighters and flammable products	Y	None
Alcoholic beverages	Y	None
Guns	Y	None
Cleaning agents	Υ	Moved to laundry

Poisonous substances	Y	Out.
ENERAL CLEANLINESS STANDARDS	Standard Met	Other than medications and cleaning solutions Comments/Notes
all areas of the home are kept clean, including diapering area.	Y/N	Corrective Action /Timeframe if needed
Printed to the Colonian Street Colonian Street	Υ	
rash, garbage and wet and soiled diapers are disposed of in a anitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet liaper, clothing or bedding.	Υ	Wind transfer
Diapering procedures are followed.		
Handwashing procedures are followed as	Υ	
Toileting; Diapering;	rint mark	West states of
below food preparation and eating:	Υ	
 After playing outdoors; and At other times when necessary to prevent the spread of disease. 	manage in the	Part of the second
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:	.,,,,	Corrective Action / Ilmetrame if needed
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	another building the second se
A child in care is not subjected to mistreatment, including:		
 Any deliberate act that hurts a child physically or 		Ebring the property of the compared to the com-
 Any deliberate act that hurts a child physically or emotionally, including: 		
 Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking 		
 Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline 		definition of the broadcast to contain a be-
 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 	Υ	definition of the bosonic control of the
 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 	Υ	definition of the broadcast to contain a be-
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	Υ	control of control one state of control one of cont
 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 	Υ	Self-tegrel relate byte officers to constitute on the self-tegrel between the constitute on the self-tegrel between the self-t
 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 	Υ	Set team of the box electric control c

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

⊠Flashlight	⊠Bottled water ⊠Folder or binder		□ Folder or binder for EPP documents
⊠Batteries for Flashlight	⊠Non-perishable food		Backpack(s) or carrying case(s)
⊠Portable First Aid Kit	⊠Diapers		⊠Consider special toys or games

	24	1,000	y Duty Scissors, duct tape/ y tape & sealing plastic/trash
⊠Thermometer	□ Change of clothes	bags	, mps a series
Medications N/A	⊠Blanket(s)		
tems in the Disaster Supply Kit are cle	ean, organized, and usable (Y/N)?	Y avana v	
Emergency Ready-to-Go Pack is avail	lable and easily accessible in the ev	ent of an emergency (Y/N)?	
Location of The Emergency Ready	to go Pack: In the office		
Item Specification (if needed):		CPR/AED, alcohol wipes, Q-tips of	ntments, Tylenol
Tweezers, scissors, band aid, wou 3 C batteries, 3 Pull ups, 4 Shorts	nds and burn kit, gauze ite patk 4 shirts 4 under 4 ware 4 t- shirt, p	ants, 2 large blankets	
A toys dinosaurs, 4 books and tab	lets		
4 16oz. Water bottles, tuna, chef B	oyardee, crackers, beans,		
Items to review on xx/xx/xxxx if ne	eded: N/A		
Items to review on ANAMARA II III			
Emergency Documents			
The state of the s	cy Preparedness Plan (this comple	ted form)	
⊠Authorization for emergence			
Planning and Maintenance			
Person responsible for updating the	Disaster Supply Kit and the Emerg	jency Documents regularly:	
First Name	Last Name		
Description of how the Emergency	Deady to Co Book will be transport	red to an evacuation location:	
Description of how the Emergency	Ready-to-Go Pack will be transport	ed to all evaddation results.	
Obelias la Diago Procedura:			
Shelter In Place Procedure:			
The provider will gather the children where she will do a roll call to make windows with plastic if the need are	and the everyone is accounted for. To see. Once secure the provider will of	emergency to go bag and head to the family room has a patio window tall the parent.	ne family room in the basement and provider will seal the
Evacuation Procedures:			
		to be and bond to H	no ans where the will cooure the
The provider will gather the childre children in car seat, booster seat a		emergency to go bag and head to the	to enter through the garage and
head to base	ement. If the need arose to they wo	uld seal the windows with plastic. If	they could not go to the primary
location, they will go to alternate e	vacuation location to	, which is walking distance	ce. Once let in
they will go to the basement to she	elter. Provider will contact parent or	ice they are secure.	
Signatures & Date			
Acknowledgement: By signing held	ow the parties acknowledge that all	standards have been reviewed, and	any corrections if needed have
been discussed. The parties also a pop up visit which will be conducted	acknowledge that, if approved, the h	nome in which care is provided is sub	pject to random, unannounced
	/IDER	INSPEC	CTOR
Printed Name: Delinda O	Smills	Printed Name:	
Signature	, Online	Signature:	
		digitature.	

Date:

Date: 04/14/2022

Phone: 1-877-227-0125

✓ Virtual Inspection

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

	Inspection Date: 08/24/2021	Time	In: 2:00 PM	Time Out: 2:46	PM F	Result: FA	ILED
	Informal Care				_		
1	Type of Care (check one): Non-relative	Inform	mal Provider Ca	re Relative	e Inform	al Provide	r Care
Ė	Provider Information					211101100	3010
	First Name: Jacqueline	Last	Name: Smith		F	Provider II	D: 445275
License #:					E	mail:	
	Care Location Inspected						
	Street Address:	C	ity:	County:		State:	Zip Code
÷	Name of the last o						
_	Name of Children in Care (add pages if nee	ded)	Scholarship	Date of Birth	Age		Present (Y/N)
_			-	05/12/2016	5	/Y	
				11/13/2007	13	/Y	
						1	
						1	
ŀ						1	
						1	
	Safety of the Home						
	Directions: Review and determine con Additional pages may be used for con Applicable	mplian	ce with each star i.	ndard. Note any cor Y - Yes, N - No			
	Health and Safety Training:			Standard Met Y/N		ents/Not	es on /Timeframe if needed
	Basic Health and Safety Training C	omple	ted?	N/A	Relative Informal Care		ative Informal Care
	Home is free of health and safety hazards	:		Standard Met Y/N		nents/Note	es on /Timeframe if needed
	Is in good repair			Y			an, but slightly cluttered (apartment)
Ä	 Is free of insect or rodent infestation 	1		Y			
	Is well-lit and well-ventilated			Y	Well	lit in the	common area, bedrooms and kitchen
	Has hot and cold running water			Y	Used	the then	mometer to test hot and cold water
	 Has a working inside toilet 			Y		Tollet	flushed by provider
	 Has utilities for cooking, lighting and 	d heati	ing	Y	Sho	wed entir	e kitchen and all appliances
	 Has a working and safe heating sys 	tem		Y		Tested t	he thermostat, heat/cool
	Has a working refrigerator and stove	е		Y			e, turned on the stove top and e refrigerator and freezer
	 Has a working telephone 			Y	Prov	ider pres	sed talk and played dial tone out loud
	Has operational smoke detector(s)			Y	View	ed it blink	ing, but smoke detectors too high to reach
Has first aid kit/supplies			V		Show	and the kit in comes	

Has protective coverings on any electrical outlet that is		If outlet was not being used there was an
accessible to children	Y	outlet cover-up on it
Harmful items are stored appropriately and away from children:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe If needed
Sharp or pointed items	Υ	They were placed toward the back of the counter i knife holders
Medications of any kind	Y	In the bathroom cabinet of the mother's room
 Matches, lighters and flammable products 	Υ	
Alcoholic beverages	D	Stated yes, but they were sitting on the backend of kitchen counter
• Guns	D	Stored away properly, but provider could not access ensure the storage location
Cleaning agents	Υ	Latch on the cabinet door
Poisonous substances	Y	Does not own any products
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	Diapering area in the room of the 4-year-old
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Two trash cans for disposable item, specific diape receptacle
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Υ	
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:	Y	
A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> <u>Department of Social Services Child Protective Services Unit.</u>	Y	

The Emergency Ready-to-Go Pack must be available and easily accessible in the event of an emergency. This contains a Disaster Supply Kit (Inneeded 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 ontain enough supplies for each child in care. Also, that the Items are clean, organized, and usable. Comment and note below if needed recough supplies for each child in care. Also, that the Items are clean, organized, and usable. Comment and note below if needed in care. Also, that the Items are clean, organized, and usable. Comment and note below if needed in care. Also, that the Items are clean, organized and usable (Tomment and note below if needed in care. Also, that the Items in the Items in the Items in the Disaster Supply Kit are clean, organized. Items in the Disaster Supply Kit are clean, organized, and usable (V/N)? Y Disaster Supply Kit Comments/Notes: Oxytrol medical patch for an overactive bladder (Laylah) Emergency Documents Informal Provider Emergency Preparedness Plan (this completed form) Authorization for emergency medical care Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly: Einst Name Last Name Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: The providers SUV truck. Planstures & Date Coknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. PROVIDER NSPECTOR	Em	ergency Ready-to-Go Pa	ck		
Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contain enough supplies for each child in care. Also, that the Items are clean, organized, and usable. Comment and note below if needed. Flashlight		The Emergency Ready-to-Go P needed medications) and Emer	ack must be availa gency Documents.	ble and easily accessible in the e	vent of an emergency. This contains a Disaster Supply Kit (incl
enough supplies for each child in care. Also, that the items are clean, organized, and usable. Comment and note below if needed. Flashlight Non-perishable food Batteries Non-perishable food Backpack(s) or carrying case(s). Portable First Aid Kit Diapers Consider special toys or games Scissors, tape & sealing plastic Thermometer Medications Blanket(s) Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (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: Oxytrol medical patch for an overactive bladder (Layleh) 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: The providers SUV truck, Bignatures & Date Non-perishable food Provider Supply Signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. PROVIDER INSPECTOR	Disa	aster Supply Kit			
Batteries		Directions: Review and determ enough supplies for each child it	ine that each item in care. Also, that the	s adequately included in the Disa ne items are clean, organized, an	ster Supply Kit. Be certain that the Disaster Supply Kit contains d usable. Comment and note below if needed.
Portable First Aid Kit Diapers Consider special toys or games Scissors, tape & sealing plastic Thermometer Change of clothes Blanket(s) Elems 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 Disaster Supply Kit Comments/Notes: Oxytrol medical patch for an overactive bladder (Laylah) 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: The providers SUV truck. Bignatures & Date Coknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. PROVIDER INSPECTOR	√	Flashlight	- √ E	Bottled water	✓ Folder or binder for EPP documents
Thermometer		Batteries	✓ N	Non-perishable food	✓ Backpack(s) or carrying case(s)
Medications Jean-line 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 Disaster Supply Kit Comments/Notes: Oxytrol medical patch for an overactive bladder (Laylah) Emergency Documents Jenformal 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 Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: The providers SUV truck. Bignatures & Date Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. PROVIDER INSPECTOR	√	Portable First Aid Kit	√ C	Diapers	
Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y Disaster Supply Kit Comments/Notes: Oxytrol medical patch for an overactive bladder (Laylah) Emergency Documents Informal Provider Emergency Preparedness Plan (this completed form) Authorization for emergency medical care Planning and Maintenance Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly: Last Name Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: The providers SUV truck. Signatures & Date Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. PROVIDER INSPECTOR	1	Thermometer	√ (Change of clothes	
Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y Disaster Supply Kit Comments/Notes: Oxytrol medical patch for an overactive bladder (Laylah) 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: The providers SUV truck. Signatures & Date Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. PROVIDER INSPECTOR	1	Medications	✓ E	Blanket(s)	
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: The providers SUV truck. Bignatures & Date Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. PROVIDER INSPECTOR	Ite	ms in the Disaster Supply Kit are o	lean, organized, a	and usable (Y/N)? Y	
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: The providers SUV truck. Bignatures & Date Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. PROVIDER INSPECTOR	En	nergency Ready-to-Go Pack is ava	ilable and easily a	accessible in the event of an en	nergency (Y/N)? Y
Planning and Maintenance Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly: First Name Last Name Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: The providers SUV truck. Signatures & Date Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. PROVIDER INSPECTOR	√	Informal Provider Emergency F	·	n (this completed form)	
Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: The providers SUV truck. Signatures & Date Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. PROVIDER INSPECTOR			edical care		
Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. PROVIDER INSPECTOR	First	t Name	Las	t Name	
PROVIDER INSPECTOR					
	Ackr beer	nowledgement: By signing below n discussed.	the parties ackno	owledge that all standards have	e been reviewed, and any corrections if needed have
Printed Name: Jacqueline Smith Printed Name:		PROVIDI	ER		INSPECTOR
	Prin	ted Name: Jacqueline Smith		Printed Nam	9:

Printed Name: Jacqueline Smith Printed Name: Signature: Signature: Date: 8/ 24 / 2021 Phone: Date: 08/24/2021 Phone: 1-877-227-0125

⊠Virtual Inspection
☐In-person Inspection

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

Return to: ccs.informalproviders@maryland.g ov

Parricad 10/2021

Inspection Date: 11/08/2022 Follow Up inspection: 11/14/2022	Time In: 10:30AM Time In: 9:00AM	Time Out: 11:54AM Time Out: 9:28AM	The state of the s
Informal Care		Time out, 0.207il	Result. PASSED
Type of Care (check one): ☐ Non-relat	ive Informal Provider C	are ⊠Relative In	nformal Provider Care
Provider Information			ioninal Provider Care
First Name: Katherine Provider ID #:	Last Name: Smith		Provider ID: 417460
Care Location Inspected			Email:
Street Address: City: Address Verified? Yes		County:	State Zip Code:
Name of Children in Care (add pages if need	led) Scholarship	Date of Birth	Age / Present (Y/N)
		3/16/2010	12 / No At school
		5/5/2012	10 / No At school
		11/30/2015	6 / No At school
0-6-4			

Safety	OF	the	Hon	-
Salety	01	uie	поп	165

Directions: Review and determine compliance with each standard. Note any comments or corrective actions needed. Additional pages may be used for comments.

Y - Yes, N - No, D - Discussed, n/a - Not Applicable

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?	Y	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	Y	No Sign infestation
Is well-lit and well-ventilated	Y	
Has hot and cold running water	Y	Steam observed
Has a working inside toilet	Y	Flush observed
Has utilities for cooking, lighting and heating	Y	
Has a working and safe heating system	Y	Thermostat dialed up
Has a working refrigerator and stove	Y	
Has a working telephone	Y	Provider phone called
Has operational smoke detector(s)	Y	
Has first aid kit/supplies	Y	Band aids, Hydrogen peroxide,
 Has protective coverings on any electrical outlet that is accessible to children 	Y	Covered, in use or 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	Knives moved to higher cabinet
Medications of any kind	Y	and the second section of the second second
Matches, lighters and flammable products	Y	all the later was a trial color or are are
Alcoholic beverages	Y	None
Guns	Y	None
Cleaning agents	Y	Must be moved to locked room
Poisonous substances	Y	Other than medications and cleaning solutions

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	N/A
Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease.	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	Y	
A child in care is not subjected to any form of neglect, including:	Y	
A child in care is not subjected to mistreatment, including:	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	The world wife, have been to early the or of the control of the co

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

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

Items in the Disaster Supply Kit are clean, organized	I, and usable (Y/N)? Y					
Emergency Ready to Go Pack is available and easily		Y 10				
Location of The Emergency Ready to go Pack: C	Location of The Emergency Ready to go Pack: On shelf in basement					
Item Specification (If needed): 2 Short steeve shift, 2 long steeve shift, 2 Jeans pai Band-Akis, tape, burn cream, first aid cream, alcohol 8 (Noz-bottles of water, 3 C batteries, 2 AA batteries Boogle game, linger puppels, logos, 9 books, books	i wipes, cold pack, tweezers, pain relief s, 3 cups mac & cheese, can of corn, green ber					
Items to review on 11/14/2022 If needed: Observe	H8 YY/14/2022					
Outlet covers in dining room, hallway, Family room, Emergency Care & Medication for all the children in Cleaners moved out from under kitchen sink & bath moved higher shelf,	the bag, Heavy duty sosseors,	block moved higher, paints in basement				
Emergency Documents						
SInformal Provider Emergency Preparedne	sss Plan (this completed form)					
SAuthorization for emergency medical care						
Planning and Maintenance						
Person responsible for updating the Disaster Supp		rhy:				
First Name	Last Name					
The provider will gather the children and go down the need should arise the provider will use plastic parent once they are situated and secure in the lateral once they are situated and secure in the lateral once they are situated and secure in the lateral once the provider will grab the emergency bag, have the sure all the children are buckled in their seat belts. Once at the location, they will shelter in the family know and also have their situation. If they couldn't shelter at the primary location, the provider will grab the emergency bag, the children buckled in their seatbelts, before driving to the location of their way. They will shelter in the den that plastic and tape to seal the shelter. The provider elevacuation location.	and tape to seal the shelter door, there are numby room. The children grab their bag packs, and head to before driving to the primary evacuation location which has one window and one door. It know they are on the way. Provider will period will go to the alternate evacuation location on, then proceed to the provider's vehicle when attom. The provider will call thes two small windows and one door. If the new	the provider's vehicle where she will make alton. The provider will call the parent to let her odically call the parent to update her on which is a she will make sure the children are are in the car to let her know they seed should arise the provider will use				
Signatures & Date						
Acknowledgement: By signing below the parties a been discussed. The parties also acknowledge the pop-up visit which will be conducted virtually or in-	at, If approved, the home in which care is pro-	ewed, and any corrections if needed have vided is subject to random, unannounced				
PROVIDER		INSPECTOR				
Printed Name: Kar Megine LC	Printed Name:					
Signature	Signature:					
Date: Phone	Date: 11714/2022	Phone: 1-577-227-2125				
MSDE (XX Informal Care Inspection Checkles)	Panishis	David (0.50)				

□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 ov

Inspection Date: 11/02/2023	Time	In: 3:30PM	Time Out: 4:45PM	Result: PASSED
Informal Care				
Type of Care (check one):	n-relative Info	rmal Provider C	are ⊠Relative	Informal Provider Care
Provider Information				
First Name: Klm	Last N	Name: Smith		Provider ID: <u>532806</u>
Provider ID #:				Email:
Care Location Inspected				
Street Address: City: Address Verified? Yes.		County:	State	Zip Code:
Name of Children in Care (add pages	if needed)	Scholarship	Date of Birth	Age / Present (Y/N)
			(06/05/2014)	9yr. / N
			(05/14/2010)	13yr. / Y

Safety of the Home		
Directions: Review and determine compliance with each standard. Note pages may be used for comments.	e 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	Y	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 via kitchen sink
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 phone
Has operational smoke detector(s)	Y	Tested by provider and observed
Has first aid kit/supplies	Y	First aid kit stored in parent's bedroom
Has protective coverings on any electrical outlet that is accessible to children	Y	All outlets 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	Stored on top of kitchen cabinet in knife holder
Medications of any kind	Y	Does not own
Matches, lighters and flammable products	Y	Does not own
Alcoholic beverages	Y	Does not own
• Guns	Y	Does not own
Cleaning agents	Y	All cleaning products moved to top shelf of hallwadeless.
Poisonous substances	Y	Does not own
- I distribus substantous	Dece 1 of 2	Revised 10/2021

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

⊠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	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
⊠Medications	⊠Blanket(s)	

Items in the Disaster Supply Kit are clean, organic	zed, and usable (Y/N)? Y				
Emergency Ready-to-Go Pack is available and e		/N)? Y			
Location of The Emergency Ready to go Pack Item Specification (if needed):		bottled waters, 1 pk of noodles, 2 canned			
Emergency Documents	新年。1915年, 伊藤 龙中是建筑。				
⊠Informal Provider Emergency Prepared					
⊠Authorization for emergency medical ca	re				
Planning and Maintenance					
Person responsible for updating the Disaster Su	pply Kit and the Emergency Documents regula	rly:			
First Name Sykeena	Last Name Mitchell				
Description of how the Emergency Ready-to-Go		tion: carried by the provider.			
Shelter in Place Procedure:					
The provider will gather the children and ERTG a plastic and tape to seal the door and window if nupdates. Evacuation Procedures Primary: The provider will gather both children, arrival the provider will email the parent if needed with emergency update and the parent if needed with emergency update. If they could not access the primary hand-holding to specifically. Once secured the provider will call, to care Hours:	the ERTG and secure the children by hand-hol tes. ocation, the provider will gather both children, to arrival the provider	ding to			
Cinnatura 9 Data					
Acknowledgement: By signing below the parties a been discussed. The parties also acknowledge the pop up visit which will be conducted virtually or in	at, if approved, the home in which care is provide	wed, and any corrections if needed have ded is subject to random, unannounced			
PROVIDER		INSPECTOR			
Printed Name: Kim Smith	Distant Name:				
Signature: Signature:					
Date: 11/2/23 Phone:	Date: 11/02/2023	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 INSPECTION CHECKLIST

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 1/25/2023 Follow Up Scheduled: 1/26/2023		In: 1:30PM In: 9:00AM	Time Out: 2:35PN Time Out 9:05AM	
Informal Care				
Type of Care (check one):	relative Info	rmal Provider Ca	are ⊠Relative l	nformal Provider Care
Provider Information				
First Name: Roslyn	Last	Name: Smith		Provider ID: 280068
Provider ID				Email:
Care Location Inspected				
Street Address: Address Verified? Yes	City:	County:	Sta	te Zip Code:
Name of Children in Care (add pages if	needed)	Scholarship	Date of Birth	Age / Present (Y/N)
			8/20/2008	14 / No, At School
63,300			4/17/2010	12 / No, At School
			9/26/2013	9 / No, At School
			1/19/2015	8 / No, At School

Safety of the Home		
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	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 	Y	No sign of Infestation
Is well-lit and well-ventilated	Υ	
Has hot and cold running water	Y	Steam observed
Has a working inside toilet	Y	Flush Observed
 Has utilities for cooking, lighting and heating 	Y	
Has a working and safe heating system	Y	Digital thermostat dialed up
Has a working refrigerator and stove	Y	
Has a working telephone	Y	Provider's cell called
Has operational smoke detector(s)	Y	
Has first aid kit/supplies	Y	Band aids, aquaphor, q-tips, Rubbing Alcohol
 Has protective coverings on any electrical outlet that is accessible to children 	Υ	In use or behind furniture
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	Back of counter
Medications of any kind	Y	
Matches, lighters and flammable products	Y	None
Alcoholic beverages	Y	None
Guns	Y	
Cleaning agents	Y	Cabinet must be locked in kitchen and bathroom Observed
Poisonous substances	Y	Other than medications and cleaning solutions

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Υ	
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.	Y	N/A
Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease.	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	Y	
A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child.	Y	
A child in care is not subjected to mistreatment, including:	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protocure 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

⊠Medication	ons	⊠Blanket(s)	
⊠Thermon	neter	⊠ Change of clothes	
⊠Portable	First Aid Kit	⊠Diapers N/A	⊠Consider special toys or games
⊠Batteries	for Flashlight	⊠Non-perishable food	⊠ Backpack(s) or carrying case(s)
⊠Flashligh	t	⊠ Bottled water	

F	and usable (Y/N)? Y
Emergency Ready-to-Go Pack is available and easily	accessible in the event of an emergency (Y/N)? Y
Location of The Emergency Ready to go Pack: By	the front
Item Specification (if needed): 2 AA batteries, 3 sweat pants, 1 pair Jeans, 4 shirts, 3	large blanket
Band aids, bandages, peroxide, ointment, gauze, tape	
Puzzles, Board games Jumanji,, checkers, chess, tic t	ac toe.
4 16oz bottles of water, 2 cans of tuna, Soup, Fruit coo	ktail, 4 large ramen soup bowls
Items to review on 1/26/2023 if needed: Observed 0	11/26/2023
Lock cabinet with cleaning supplies in the kitchen and	the upstairs bathroom,
Emergency Documents	
	Plan (this completed form)
Planning and Maintenance	Ch., 1th. Farmer Drawwath wouldn't
Person responsible for updating the Disaster Supply	
First Name Roslyn Las	t Name Smith
Description of how the Emergency Ready-to-Go Pack	will be transported to an evacuation location: Carried
Shelter In Place Procedure:	
windows. The emergency bags are already stored in	downstairs and shelter to the foyer of the home by the front door which has no the foyer. If the need should arise the provider will use plastic and tape to seal the
windows. The emergency bags are already stored in door. The provider will call the parent as soon as the parent every 15 minutes.	the downstairs and shelter to the foyer of the home by the front door which has no the foyer. If the need should arise the provider will use plastic and tape to seal the provider's knows that there is a shelter in place emergency and will keep update the
windows. The emergency bags are already stored in door. The provider will call the parent as soon as the parent every 15 minutes. Evacuation Procedures: The provider will call all the children by name and the in their booster seats and which is Dince at the location, they will shelter in the living roor eaving the care location and immediately after they a	the foyer. If the need should arise the provider will use plastic and tape to seal the
windows. The emergency bags are already stored in door. The provider will call the parent as soon as the parent every 15 minutes. Evacuation Procedures: The provider will call all the children by name and the in their booster seats and which is Before leaving the conce at the location, they will shelter in the living roor eaving the care location and immediately after they a minutes. The alternate evacuation location is then proceed to the provider's vehicle where she will be seatbelts before driving to the location. The provider within a room that has two window and one door. If the residence of the provider was a standard one door. If the residue was a standard one door.	the foyer. If the need should arise the provider will use plastic and tape to seal the provider's knows that there is a shelter in place emergency and will keep update the minimum, grab the 3 emergency bags, and proceed to the provider's vehicle where she will in the older children their seatbelts, before driving to the primary evacuation location, care location the provider will know they are on their way. In which has two windows and one door. The provider will call the parents before the secure in the evacuation location the will keep updating the parent every 15. The provider will grab the emergency bags, gather the children, in their booster seats and the older children their.
windows. The emergency bags are already stored in door. The provider will call the parent as soon as the parent every 15 minutes. Evacuation Procedures: The provider will call all the children by name and the in their booster seats and Before leaving the Procedure at the location, they will shelter in the living roor eaving the care location and immediately after they a minutes. The alternate evacuation location is then proceed to the provider's vehicle where she will be eatbelts before driving to the location. The provider will grow that has two window and one door. If the provider will call the parents before leaving the care location will keep updating the parent every 15 minutes.	the foyer. If the need should arise the provider will use plastic and tape to seal the provider's knows that there is a shelter in place emergency and will keep update the provider's knows that there is a shelter in place emergency and will keep update the many grab the 3 emergency bags, and proceed to the provider's vehicle where she will the older children their seatbelts, before driving to the primary evacuation location, which has two windows and one door. The provider will call the parents before resecure in the evacuation location the will keep updating the parent every 15. The provider will grab the emergency bags, gather the children, in their booster seats and the older children their know they are on their way. They will shelter in the level should arise the provider will use plastic and tape to seal the shelter. The cation and immediately after they are secure in the alternate evacuation location.
windows. The emergency bags are already stored in loor. The provider will call the parent as soon as the parent every 15 minutes. The provider will call all the children by name and the in their booster seats and before leaving the care location, they will shelter in the living roor eaving the care location and immediately after they an inutes. The alternate evacuation location is the eatherts before driving to the location. The provider wing room that has two window and one door. If the provider will call the parents before leaving the care location will call the parent every 15 minutes. Signatures & Date Cocknowledgement. By signing below the parties acknowledge that, if	the foyer. If the need should arise the provider will use plastic and tape to seal the provider's knows that there is a shelter in place emergency and will keep update the provider's knows that there is a shelter in place emergency and will keep update the many and the older children their seatbelts, before driving to the primary evacuation location, care location the provider will know they are on their way. In which has two windows and one door. The provider will call the parents before resecure in the evacuation location the will keep updating the parent every 15. The provider will grab the emergency bags, gather the children, in their booster seats and the older children their know they are on their way. They will shelter in the need should arise the provider will use plastic and tape to seal the shelter. The cation and immediately after they are secure in the alternate evacuation location whedge that all standards have been reviewed, and any corrections if needed have approved, the home in which care is provided is subject to random, unannounced
windows. The emergency bags are already stored in foor. The provider will call the parent as soon as the farent every 15 minutes. The provider will call all the children by name and the finitheir booster seats and the finitial seats and the finitheir booster seats and the finitheir bo	the foyer. If the need should arise the provider will use plastic and tape to seal the provider's knows that there is a shelter in place emergency and will keep update the provider's knows that there is a shelter in place emergency and will keep update the many and the older children their seatbelts, before driving to the primary evacuation location, care location the provider will know they are on their way. In which has two windows and one door. The provider will call the parents before resecure in the evacuation location the will keep updating the parent every 15. The provider will grab the emergency bags, gather the children, in their booster seats and the older children their know they are on their way. They will shelter in the need should arise the provider will use plastic and tape to seal the shelter. The cation and immediately after they are secure in the alternate evacuation location whedge that all standards have been reviewed, and any corrections if needed have approved, the home in which care is provided is subject to random, unannounced
windows. The emergency bags are already stored in door. The provider will call the parent as soon as the parent every 15 minutes. Evacuation Procedures: The provider will call all the children by name and the in their booster seats and Before leaving the Procedure of the living roor eaving the care location and immediately after they an inutes. The alternate evacuation location is then proceed to the provider's vehicle where she will eastbelts before driving to the location. The provider wing room that has two window and one door. If the provider will call the parents before leaving the care location will keep updating the parent every 15 minutes. Signatures & Date Cocknowledgement: By signing below the parties acknowledge that, if the provider will which will be conducted virtually or in-persistence of the provider of the parties also acknowledge that, if the provider will which will be conducted virtually or in-persistence of the provider will also acknowledge that, if the provider will which will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persistence of the provider will be conducted virtually or in-persist	the foyer. If the need should arise the provider will use plastic and tape to seal the provider's knows that there is a shelter in place emergency and will keep update the provider's knows that there is a shelter in place emergency and will keep update the many ended to the provider's vehicle where she will the older children their seatbelts, before driving to the primary evacuation location, care location the provider will know they are on their way. In which has two windows and one door. The provider will call the parents before resecure in the evacuation location the will keep updating the parent every 15. The provider will grab the emergency bags, gather the children, in their booster seats and the older children their know they are on their way. They will shelter in the need should arise the provider will use plastic and tape to seal the shelter. The cation and immediately after they are secure in the alternate evacuation location whedge that all standards have been reviewed, and any corrections if needed have approved, the home in which care is provided is subject to random, unannounced on
windows. The emergency bags are already stored in door. The provider will call the parent as soon as the parent every 15 minutes. Evacuation Procedures: The provider will call all the children by name and the in their booster seats and which is Before leaving the care location, they will shelter in the living roor eaving the care location and immediately after they aminutes. The alternate evacuation location is then proceed to the provider's vehicle where she will be seatbelts before driving to the location. The provider wiring room that has two window and one door. If the provider will call the parents before leaving the care lower will keep updating the parent every 15 minutes. Signatures & Date Acknowledgement: By signing below the parties acknowledge that, if opp up visit which will be conducted virtually or in-persistence of the provider virtually or in-persistence.	the foyer. If the need should arise the provider will use plastic and tape to seal the provider's knows that there is a shelter in place emergency and will keep update the provider's knows that there is a shelter in place emergency and will keep update the many provider that are location that the older children their seatbelts, before driving to the primary evacuation location, care location the provider will know they are on their way. In which has two windows and one door. The provider will call the parents before resecure in the evacuation location the will keep updating the parent every 15. The provider will grab the emergency bags, gather the children, in their booster seats and the older children their know they are on their way. They will shelter in the level should arise the provider will use plastic and tape to seal the shelter. The cation and immediately after they are secure in the alternate evacuation location. Wedge that all standards have been reviewed, and any corrections if needed have approved, the home in which care is provided is subject to random, unannounced on. INSPECTOR

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

Inspection Date: 07/30/2021 Follow-up Inspection: 08/02/2021	The second secon	In: 3:00 PM In: 10:30 AM	Time Out: 3:48 Pl Time Out: 10:45 AM	W Re	sult: Pa	ssed	
Informal Care							
Type of Care (check one): ☐ Non-r	elative Info	rmal Provider Ca	are ⊠Relative I	nformal	Provide	r Care	
Provider Information							
First Name: Katherine	Last	Name: Smith		Pro	vider IC	0: 417460	
2000 F-1000 F				Em	ail:		
Care Location Inspected	1					10)-110	
Street Address:	City:	Coun	ty:	State		Zip Code:	
Name of Children in Care (add pages if r	needed)	Scholarship	Date of Birth	Age	1	Present (Y/N)	
		12.1	03/16/2010	11	/Y		
			05/05/2012	9	/Y		
	201		11/30/2015	5	/Y		
					1	-	
					1		
					1		

Safety of the Home		
Directions: Review and determine compliance with each s Additional pages may be used for comments.	tandard. Note any comm Y - Yes, N - No,	nents or corrective actions needed. D - Discussed, n/a - Not Applicable
Health and Safety Training:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Basic Health and Safety Training Completed?	N/A	Relative Informal Care
Home is free of health and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Is in good repair	Y	Home improvement in the basement
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	
Has utilities for cooking, lighting and heating	Y	
Has a working and safe heating system	Y	
Has a working refrigerator and stove	Y	
Has a working telephone	Y	
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	All outlets are covered with furniture or bein used by other items
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	Top shelf, out of reach
Medications of any kind	Y	Top cabinet also
Matches, lighters and flammable products	Y	No of these items in household
Alcoholic beverages	Y	
Guns	Y	No guns in household

Cleaning agents	Υ Υ	In bottom cabinet with safety latch on it
Poisonous substances	Υ	
SENERAL 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	No diapering area, but everything is clean
rash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	No diapers, trash stored away appropriately until trash/recycling day
Child is changed immediately when s/he has a soiled or wet liaper, clothing or bedding.	Y	
Diapering procedures are followed.	N/A	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	They wash their hands consistently
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	Time out only
The provider immediately reports any suspected child abuse, reglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	

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

Directions: Review and determine that each item is adequately included in the Disaster Supply Kit. Be certain that the Disaster Supply Kit contains enough supplies for each child in care. Also 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 (N/A)
 ⊠ Consider special toys or games

⊠Thermometer		Scissors, tape & sealing plastic
⊠Medications	⊠Blanket(s)	
Items in the Disaster Supply Kit are clea	n, organized, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is available	ble and easily accessible in the event of an em	tergency (Y/N)? Y
Disaster Supply Kit Comments/Notes: R Preparedness and Medical Emergency t	eschedule EPP documents review on Monday form on 8/2 @ 10:45 am.	y, speak with Completed review of Ernergency
Emergency Documents		
⊠Informal Provider Emergency P	Preparedness Plan (this completed form)	
⊠Authorization for emergency me		
Planning and Maintenance		
Person responsible for updating the Dis-	aster Supply Kit and the Emergency Docum	nents regularly:
First Name	Last Name	
Description of how the Emergency Read	dy-to-Go Pack will be transported to an evac	cuation location: Providers Vehicle (Van)
Signatures & Date		
Acknowledgement: By signing below the been discussed.	parties acknowledge that all standards have	e been reviewed, and any corrections if needed have
PROVIDER		INSPECTOR
		INDI EUTOR

Signature:

Date: 07/30/2021

Phone: 1-877-227-0125

Phone:

Signature:

Date: 08/11/2021

☑Virtual Inspection ☐In-person Inspection

Maryland State Department of Education/Office of Child

Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST

Return to: ccs.informalproviders@maryland.gov

Inspection Date 01/19/2022	Time In: 1:30pm	Time Out: 2:30 p	Result Approved		
Informal Care					
Type of Care (check one)	n-relative Informal Provider	Care Maletine	Information and the second		
Provider Information	- TOTAL TITOTHE	Cale WRelative	Informal Provider Care		
First Name: Roslyn	Last Name O. in				
	Last Name; Smith		Provider ID: 280068		
Care Location Inspected			Email:		
Street Address	City	Court			
Address Verified? Yes		Count	y State Zip Code		
Name of Children in Care (add pages	if needed) Scholarshi	p Date of Birth	Age / Present (V/k)		
			. 102011 (1714)		
		01/19/2015	6 Years / y		
		04/17/2010	11 Years /y		
		09/26/2013	8 Years /y		
		08/20/2008	13 Years /y		
		and the second			
Safety of the Home					
Health and Safety Training:	العميرا معرودات	Y - Yes, N - No. ! Standard Met	pents or corrective actions needed. D - Discussed, n/a - Not Applicable Comments/Notes		
Basic Health and Safety Train	ning Completed?	N/A	Corrective Action /Timeframe if needed		
Home is free of health and safety ha	zards:	Standard Met	N/A		
Is in good repair		Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Is free of insect or rodent infe	station	Y			
Is well-lit and well-ventilated		Y			
Has hot and cold running war	ler				
Has a working inside toilet		Y	Steam in the cup observed.		
Has utilities for cooking, light	ing and heating	Y	Observed Flush		
Has a working and safe heat	ng system	Y	4 Operational Burners observed		
Has a working refrigerator an	d stove	Y	Thermostat turned up		
Has a working telephone		Y	Reingerator light turned on Ereas		
Has operational smoke detection	dor(s)	Y	Illade ID provider on "		
Has first aid kit/supplies		Y			
Has protective coverings on	any electrical outlet that is	Y	Gauze, bandages, peroxide, thermometer,		
accessible to children			No exposed outlets		
Harmful items are stored appropria children:	tely and away from	Standard Met Y/N	Comments/Notes		
Sharp or pointed items		Y	Corrective Action /Timeframe if needed		
 Medications of any kind 		Y	Think block on the kitchen country to		
 Matches, lighters and flamma 	able products	Y	Medicine cabinet in the bathroom upstairs Not kept in the home		
Alcoholic beverages		Y	Not kept in the home		
Guns		Y	Not kept in the home		
			are nonig		

Kept under cabinet in upstairs bathroom (locked)

Poisonous substances	Y	Not kept in the home
ENERAL CLEANLINESS STANDARDS	Standard Mot Y/N	Comments/Notes Corrective Action /Timeframe if needed
il areas of the home are kept clean, including diapering area.	Y	Clutter was removed from the home. Home is clear of safety hazards.
rash, garbage and well and soiled diapers are disposed of in a anitary manner.	Y	Trash can kept in the kitchen
hild is changed immediately when s/he has a soiled or wet liaper, clothing or bedding.	Y	No children in diapers
Diapering procedures are followed.	Y	No children in diapers
landwashing procedures are followed. Provider and child's hands vashed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease.	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	Y	The state of the s
A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. A child in care is not subjected to minimum.	Y	
A child in care is not subjected to mistreatment, including:	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> <u>Department of Social Services Child Protective Services Unit.</u>	Y	

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

Batteries

⊠ Diapers

⊠Portable First Aid Kit.

☑Change of clothes

☑ Folder or binder for EPP documents

Backpack(s) or carrying case(s)

☑Consider special toys or games

☑ Heavy Duty Scissors, Duct Tape/

			Bags
© Medications	☑Blankel(s)		
trems in the Disaster Supply Kit are clean, orga	anized, and usable (Y/N)?		
Emergency Ready-to-Go Pack is available and	easily accessible in the e	vent of an emergency	(Y/N)?
Location of Emergency Ready to go Pack: Itom Specification (if needed):			ad scapping thermometer.
First Aid Kit: Scissors, cold compress Blue Jeans Blue Jacket W Blue Jeans, White Tshirt Blue Jeans, Green long	hite and black polks dot	shirt	au southing treatment of
Dark blue Jeans and a bat Nonperishable Foods: Canned tuna Bottled Water: 4 16.9 oz waters Children aren't in diapers		of Ramen.	
4 Large Blankets Red and Lantern style flash light 3 AA Batteries			
 Game: Chess, Checkers, Tic Tac T Red Scissors, White Duct Tape, 41 ECMA: 		Jumanji Board Gam	05.
Emergency Documents			
☐Informal Provider Emergency Prep ☑Authorization for emergency medic	, ,	eted form)	
Planning and Maintenance		BAILE IN	
Person responsible for updating the Disastr First Name	er Supply Kit and the Eme	gency Documents re	gularly
Description of how the Emergency Ready-tender In Place Procedures: The Provider will contact the parent via em			location:
Stieller in the loyer(1 door o windows)	,		ing, grap the CRTGP, count out each child and
front seat. The provider will then put the Et their arrival. Prior to arrival the provider will shelter in the foyer(1 door 0 windows). If the number and have them meet in the foyer, children in the booster seat and the 2 older than the trunk and drive to	RTGB in the trunk and driv il contact the parent to info ne provider cannot shelter Grab the ERTGB and go to st in the seat belt. The olde	e to m her of their relocati n this location the pro the 6 passenger val est child will be in the	or, Grab the ERTGB and go to the 6 passenger the seat belt. The oldest child will be in the and call him to inform him of on. Upon arrival the children and provider will vider will call each child by name, age and popen all doors and put the 2 youngest front seat. The provider will then put the neltering at her home. The provider will call the dren will shelter in the living room (1 door 2
Ot - store & Date			
Signatures & Date Acknowledgement. By signing below the parties discussed. The parties also acknowled pop up visit which will be conducted virtually		ndards have been revi ne in which care is prov	swed, and any corrections if needed have ided is subject to random, unannounced
PROVIDER	1		INSPECTOR
Printed Name Koglun K-mi	th.	Printed Name	

Signatur	Signature:	
Date 1/19/23 () Phone:	Date 01/19/2022	Phone: 1-877-227-0125

V	Virtual Inspection
In-	person Inspection

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

Inspection Date: 5/19/2021	Time 10:0	e In: 0 AM	Time Out: 12:00 PM	Result: APPROVED	
Informal Care				148.434.44	
Type of Care (check one):	Non-relative Inf	ormal Provider Ca	are 🗹 Relative	e Informal Provider Care	N
Provider Information					
First Name:	Last	Name:		Provider ID: 2800	68
Roslyn	Smit	h		Email:	
Care Location Inspected					
Street Address:		City	Count	y State	Zip Code
		19 19 19			
Name of Children in Care (add pag	es if needed)	Scholarship	Date of Birth	Age / Pres	ent (Y/N)
			1/19/2015	6/ Y	
L	***		9/26/2013	7/ Y	
			4/19/2010	11/Y	
100			8/20/2008	12/Y	
				Y	
				N	
	70-1			N	_

Safety	of the Home		
	Directions: Review and determine compliance with each stan Additional pages may be used for comments.	dard. Note any comm Y – Yes, N – No,	nents or corrective actions needed. D – Discussed, n/a – Not Applicable
Health a	nd Safety Training:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
	Basic Health and Safety Training Completed?	Y	
Home is	free of health and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
	Is in good repair	Y	
•	Is free of insect or rodent infestation	Y	
•	Is well-lit and well-ventilated	Y	
	Has hot and cold running water	Y	
	Has a working inside toilet	Y	
	Has utilities for cooking, lighting and heating	Y	
	Has a working and safe heating system	Y	
	Has a working refrigerator and stove	Y	
. •	Has a working telephone	Y	Mobile phones
•	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 children:	Items are stored appropriately and away from :	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
	Sharp or pointed items	Y	
	Medications of any kind	N/A	No daily medication given
•	Matches, lighters and flammable products	Y	
	Alcoholic beverages	Y	
	Guns	N/A	No protection/ no weapon in the home
	Cleaning agents	Y	

Poisonous substances	Y	
SENERAL 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	
rash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Υ	
Child is changed immediately when s/he has a soiled or wet liaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
Handwashing procedures are followed. Provider and child's hands vashed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease.	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
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	
 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 Department of Social Services Child Protective Services Unit.	Υ	Provider verbally agreed to report any type of abuse.

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

☑ Medications ☑ Blanket(s)				
Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y				
Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y				
Disaster Supply Kit Comments/Notes:				
The Ready- to- Go pack will be stored in the pantry near the back door. There are 2 tote bags filled with all mandatory items and are easy accessible to the provider in case of an emergency. Both bags have wide straps for carrying on shoulders or holding in hand.				
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: The Ready-to-Go Pack will be retrieved and carried by the Provider. The Ready-to-go kit will be stored by the exit so it is easily accessible during an emergency. Provider will collect the children and make the signal so the children are aware of the emergency. Then the Provider will complete a head count to ensure all children are present before contacting the Parent by phone. Then everyone will leave out the back door with the Ready-to-Go kit and get in the vehicle and will be secured by a traditional seat belt, however and will be seated and secured in a booster seat. The booster seat will already be in the vehicle. After completing another head count, the Provider will drive less than 5 minutes to for the first evacuation location. The Provider will keep the Parent informed via text and calls using her smartphone. If the emergency requires the Provider and children to leave the neighborhood, they will relocate to where they will stay until they are reunited with the Parent once the emergency status is lifted.				
Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: The Ready-to-Go Pack will be retrieved and carried by the Provider. The Ready-to-go kit will be stored by the exit so it is easily accessible during an emergency. Provider will collect the children and make the signal so the children are aware of the emergency. Then the Provider will complete a head count to ensure all children are present before contacting the Parent by phone. Then everyone will leave out the back door with the Ready-to-Go kit and get in the vehicle and will be secured by a traditional seat belt, however and will be seated and secured in a booster seat. The booster seat will already be in the vehicle. After completing another head count, the Provider will drive less than 5 minutes to will keep the Parent informed via text and calls using her smartphone. If the emergency requires the Provider and children to leave the neighborhood, they will relocate to				

Signatures & Date			
Acknowledgement: By signin been discussed.	g below the parties acknow	wledge that all standards have been revie	ewed, and any corrections if needed have
PROVIDER INSPECTOR			
Printed Name:		Printed Name:	
Signature:		Signature:	
Date:	Phone:	Date: 5/19//2021	Phone: 410-767-7832

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 09/19/2023 Time In: 3:00PM Result: Follow-up Required. Time Out: 4:13PM Follow-up Inspection Date: 09/20/2023 Time In: 9:45AM Time Out: 9:52AM Follow-up Result PASSED Informal Care Type of Care (check one): ☐ Non-relative Informal Provider Care ⊠Relative Informal Provider Care Provider Information First Name: Shambria Last Name: Smith Provider ID: 525894 Provider ID #: Email: Care Location Inspected Street Address: County: State Zip Code: Address Verified? Yes. Name of Children in Care (add pages if needed) Scholarship Date of Birth Present (Y/N) Age (06/21/2021) 2yr. / N (01/07/2018) 5yr. / N (12/02/2013) 9yr. / Y

Directions: Poview and determine compliance with such standard Net		
Directions: Review and determine compliance with each standard. Not 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?	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	Y	All areas were clean
 Is free of insect or rodent infestation 	Y	No evidence of infestation
Is well-lit and well-ventilated	Y	All lights were turned on and natural window lighting
Has hot and cold running water	Υ	Tested by provider and observed the ice melt in the clear glass
Has a working inside toilet	Y	Flushed by provider and observed
Has utilities for cooking, lighting and heating	Y	1 - 1 X40 - 1
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 phone
 Has operational smoke detector(s) 	Y	Tested by provider and observed
Has first aid kit/supplies	Y	First aid kit stored in hallway closet
 Has protective coverings on any electrical outlet that is accessible to children 	Y	Corrective Action completed: 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	Knife holder stored on back of kitchen counter
Medications of any kind	Y	Stored in hallway closet moved to higher shelf
Matches, lighters and flammable products	Y	Does not own
Alcoholic beverages	Y	Stored on bar counter but moved to top shelf of laundry room for safety

Guns	Y	Does not own
Cleaning agents	Y	Cleaning products stored in locked kitchen cabina
Poisonous substances	Y	Bug/Weed Killer moved to top shelf on laundry rad
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	No diaper age children in care
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Trash thrown away daily via trash cans
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	211-10
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.	Υ	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	Y	
A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a 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:	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	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.

⊠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)	

			⊠ Heavy Duty Scissors, duct tape/
⊠Thermometer .	⊠Change of clo	thes	packing tape & sealing plastic/trash bags
⊠Medications (N/A)	⊠Blanket(s)		
Items in the Disaster Supply Kit are clean, organi			
Emergency Ready-to-Go Pack is available and e Location of The Emergency Ready to go Pack Item Specification (if needed): 2 backpacks (carrying case), 3 flashlights waters, 6 canned foods and additional smoutfits(top/bottom), 1 bag of toys and fold: Items to be reviewed on 09/20/2023: Corrected: ERTG: Change of Clothes for Ea. Child: Toys or Games for children Emergency Documents Authorization for emergency medical care	asily accessible in the Stored in hallway of Stored	event of an emergency (Y/N)? closet patteries, 1 first aid kit, 1 therrency blanket, 1 roll duct tape, A docs per child, n 09/20/2023	nometer, no specific meds, 5 bottled
Planning and Maintenance			
Person responsible for updating the Disaster Su	nnly Kit and the Eme	rgency Documents regularly:	
First Name Shambria	Last Name Smith	rgency Documents regularry.	
Shelter In Place Procedure: The provider will account for the children and gradoors and windows. The provider will use the se will call and text the parent with emergency update. Evacuation Procedures Primary: The provider will account for the children other's hands. The provider will secure the young child in her car seat belt. The provider will drive to once inside the provider and children would parent with emergency updates. Alternate: If they could not access the primary the provider's vehicle, all while holding each other the middle child in a booster and oldest child in him will door 1 window). Once secured the provider will consider the provider will be provided the provide	aling plastic and tape ates. en, grab the ERTG b gest child in his forward to the shelter in a shelter car's hands. The provider car seat belt. The	ags and will head to the provi ard-facing car seat and the management of the provider will (1 door 1 window). Once so will account for the children, der will secure the youngest of provider will drive to the provider and children and children and children are the provider and children and children and children and children are the provider and children and children and children and children are the provider and children and children and children are the provider are the provider and children are the provider are the provider and children are the provider are the provide	der's vehicle, all while holding each hiddle child in a booster seat and oldest secured the provider will call or text the grab the ERTG bags and will head to child in his forward-facing car seat and The provider
Signatures & Date			
Acknowledgement: By signing below the parties a been discussed. The parties also acknowledge th pop up visit which will be conducted virtually or in-	at, if approved, the h	standards have been reviewed nome in which care is provided	d, and any corrections if needed have d is subject to random, unannounced
PROVIDER			NSPECTOR
Printed Name: Shambria S	nith	Printed Name:	

Phone:

Date: 10-01-2023

Signature:

Date: 09/20/2023

Signature:

Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection

Maryland State Department of Education/Office of Child Care

Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST

Return to: ccs.informalproviders@maryland.gov

Inspection Date: 12/28/2021	Time	In: 3:30 pm	Time Out: 4:20pm	Res	ult: App	roved if returned by 5:30 pm
Informal Care						400
Type of Care (check one): ☐ Non-re	lative Info	rmal Provider Ca	are ⊠Relative In	formal P	rovider	Care
Provider Information						
First Name: Cecilia	Last	st Name: Solomon		Prov	Provider ID: 462624	
	TIST Name. Gedina		ane. Solomon		Email: Email:	
Care Location inspected						
Street Address: Address Verified?: Yes		City	County		State	Zip Code
Name of Children in Care (add pages if no	eded)	Scholarship	Date of Birth	Age	1	Present (Y/N)
			11/30/2018	3	Yes	
			02/15/2013	8	Yes	
					1	
The state of the s					1	
					1	
			Kare		1	

Safety of the Home	
	ch standard. Note any comments or corrective actions needed.
Additional pages may be used for comments.	Y - Yes, N - No, D - Discussed, n/a - Not Applicable

Health and Safety Training:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Basic Health and Safety Training Completed?	N/A		
Home is free of health and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Is in good repair	Y		
Is free of insect or rodent infestation	Y		
Is well-lit and well-ventilated	Y	Natural and artificial lighting	
Has hot and cold running water	Y	Bathroom mirror steamed	
Has a working inside toilet	Y	Observed the flush	
Has utilities for cooking, lighting and heating	Y	4 electric burners. Refrigerator and freezer observed,	
Has a working and safe heating system	Y	Temp turned up from 73 degrees to 76 degrees	
Has a working refrigerator and stove	Y		
Has a working telephone	Y	Outbound call made.	
Has operational smoke detector(s)	Y	Test button pressed	
Has first aid kit/supplies	Y	Neosporin, Bandages, Benadryl,	
 Has protective coverings on any electrical outlet that is accessible to children 	Y	6 Outlet covers	
Harmful items are stored appropriately and away from children:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
Sharp or pointed items	Υ	Kept in a locked drawer in the kitchen	
Medications of any kind	Υ		
 Matches, lighters and flammable products 	Y	Kept in a high cabinet.	
 Alcoholic beverages 	Y	Not kept in the home.	
Guns	Y	Not kept in the home	

Cleaning agents	Y	Kept in the laundry room with the door shut at all times.		
Poisonous substances	Υ	Moth balls kept in the laundry room.		
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	Child is being potty trained.		
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.	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: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y			
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y			

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

Disaster Supply Kit

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

⊠Flashlight

Bottled water

□ Folder or binder for EPP documents

⊠Batteries

⊠Backpack(s) or carrying case(s)

⊠Diapers

⊠Consider special toys or games

□ Change of clothes

☑ Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags

⊠Blanket(s)

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

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

Location of Emergency Ready to go Pack: On step near front door

Item Specification (if needed):

- · Trash bags, black duct tape, red scissors
- First Aid: Gauze, Bandages, Alcohol pads, antiseptic toilettes, mask, cold pad, tweezers and tongue depressor.
- Flashlight
- 10 AA Batteries
- Puzzles and top laptop
- 2 White and blue blankets
- Medication: Motrin
- 3 16 ounce bottles
- 4 diapers
- Change of clothes: Srey bottoms purple heart top)
 Grey sweatpants and sweat suit with underwear)
- Blood pressure cuff
- 2 Canned soup, canned corn beef, crackers, cookies, canned sardines.
- Thermometer

Emergency Documents

☑Informal Provider Emergency Preparedness Plan (this completed form)

Planning and Maintenance

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

First Name Cecilia

Last Name Solomon

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

Shelter In Place Procedures:

The Provider will count the children and ensure their safety then grab the ERTG bag and upstairs in the bedroom(2 doors 3 windows). The provider will contact the parent once secured.

Evacuation Procedures:

The Provider will count the children and ensure their safety then grab the ERTG bag. The provider will ensure it's safe to take the children outside then head to the car where the children will be secured in the car seats and seat belts. The provider will drive to her daughters home and call to inform her that she will be sheltering at her home. The provider and the children will shelter in a bedroom(1 door 2 windows). The provider will contact the parent upon arrival. If the provider cannot shelter at this location she will count the children, grab the ERTG bag and secure all children in the seat belts and car seats. The provider will then call her friend to inform her of their arrival. The provider and children will shelter in the basement (1 door 0 windows). The provider will contact the parent once the children are secured.

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.

pop up visit which will be conduct	ted virtually of in-per	SOII.		
PROVIDER		INSPECTOR		
Printed Name: CC	19501	omon	Printed Name:	
Signature:			Signature:	
Date: 12/28/2021	Phone: (301) 938-	-2506	Date:12/28/2021	Phone: 1-877-227-0125

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 12/5/2023 Follow-up Inspection Date: 12/7/2023	Time In: 10:30AM Time In: 11:15AM	Time Out: 11:44A Time Out: 11:42A	M Follow-up Result: PASSED		
Informal Care			TENERS ELLER		
Type of Care (check one): Non-re	lative Informal Provider C	Care ⊠Relative l	Informal Provider Care		
Provider Information					
First Name: Austine			Provider ID: 504527		
Provider ID #:	Last Name: Spriggs		Email:		
Care Location Inspected					
Street Address: Address Verified? Yes.	County:	State	Code:		
Name of Children in Care (add pages if ne	eded) Scholarship	Date of Birth	Age / Present (Y/N)		
		(03/07/2014)	9yr. / N		
		(11/18/2015)	7yr. / N		
		(04/17/2017)	6yr. / N		

Directions: Review and determine compliance with each standard. Not pages may be used for comments.	e any comments or c 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 Relative Informal Care – Certificate Submitted Comments/Notes Corrective Action /Timeframe if needed	
Basic Health and Safety Training Completed?	Standard Met		
Home is free of health and safety hazards:			
Is in good repair	Y	All areas were clean	
Is free of insect or rodent infestation	Y	No evidence of infestation	
Is well-lit and well-ventilated Y		All lights were turned on and natural window lighting	
Has hot and cold running water	Y	Tested by provider and observed the ice melted	
Has a working inside toilet	Y	Flushed by provider and observed	
Has utilities for cooking, lighting and heating	Y	SWETTERS AT A SECTION OF THE SECTION	
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 in kitchen cabinet	
 Has protective coverings on any electrical outlet that is accessible to children 	Y	Corrective Action Completed: All outlets were covered or occupied	
Harmful items are stored appropriately and away from shildren:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	

Alcoholic beverages

Sharp or pointed items

Medications of any kind

Matches, lighters and flammable products

Y

Y

Corrective Action Completed: 2 Knife holders

moved to back kitchen counter

Stored in top kitchen cabinet/ Locked provider's

bedroom

Does not own

Corrective Action Completed: Alcohol removed

from home

Guns	Y	Does not own	
Cleaning agents	Y	All cleaning moved to locked 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.	Υ	No diaper age children in care	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Υ	Thrown away daily in trash can	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y		
Diapering procedures are followed.	Υ	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:	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> 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	
⊠Batteries for Flashlight	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
⊠Portable First Aid Kit	⊠Diapers (N/A)	

⊠Thermometer	⊠Change of clothes	☑ Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags			
⊠Medications (N/A)	⊠Blanket(s)				
Items in the Disaster Supply Kit are clean	, organized, and usable (Y/N)? Y				
	e and easily accessible in the event of an emerg	gency (Y/N)? Y			
bottled waters, 4 canned foods, 3 2 card games and folder w/ EPP at Items to be reviewed on 12/7/2023: Co Outlet covering needed Alcohol moved to safe location Sharp knives moved to back of co	outfits (top/bottom), 1 large blanket, 1 pair of nd ECMA docs per child rrected & Reviewed on 12/7/2023	AAA batteries, 4 toys, no specific medications, 6 scissors, roll of sealing plastic 1 roll of duct tape,			
Emergency Documents					
⊠Informal Provider Emergency Pr	reparedness Plan (this completed form)				
	dical care				
Planning and Maintenance					
Person responsible for updating the Disa	ster Supply Kit and the Emergency Document	ts regularly:			
First Name Austine	Last Name Spriggs				
Description of how the Emergency Read	y-to-Go Pack will be transported to an evacua	tion location: carried by the provider.			
Shelter In Place Procedure: The provider will gather the children, gral window). If needed the provider will seal immediate emergency.	b the ERTG bag, lock all doors and windows a the door and vent with sealing plastic and tape	and head to the upstairs bathroom (1 door 0 e. The provider will call the parents or 911 if it is an			
Evacuation Procedures					
holding buddy system	Upon arrival the property will call the parent with emergency updates.	G. The provider and children will use the hand- ovider will receive instructions from			
The provider will use the hand-holding but		Idren, perform a head count and grab the ERTG. Upon arrival the provider will call the (1 door 0 window). Provider will call the			
ent with emergency updates.					

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: Sing Socials	Printed Name:	
Signa	Signature:	
Date: 1428123 Phone:	Date: 12/7/2023	Phone: 1-877-227-0125

Care Hours:

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 01/17/2023 Follow-up Inspection Date: 01/18/2023	Time In: 3:30PM Time In: 8:30AM	Time Out: 4:44PI Time Out: 8:54AI	
Informal Care			
Type of Care (check one):	ative Informal Provide	r Care Relative	Informal Provider Care
Provider Information			
First Name: Austine	Last Name: Sprig	gs	Provider ID: 504527
Provider			Email:
Care Location Inspected			
Street Address: City Address Verified? Yes.	County:	State	Zip Code:
Name of Children in Care (add pages if ne	eded) Scholarshi	p Date of Birth	Age / Present (Y/N)
		2/2/2011	11 / N
		3/7/2014	8 / N
		11/18/2015	7 /N
		4/17/2017	5 / N
		4/23/2019	3 /N

Safety of the Home		
Directions: Review and determine compliance with each standard. Not pages may be used for comments.	e any comments or o	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	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 	Y	No evidence of infestation
Is well-lit and well-ventilated	Y	Artificial and lots of natural light
Has hot and cold running water	Υ	Observed steam, tested by provider
Has a working inside toilet	Y	Observed and flushed by provider in all bathroom
Has utilities for cooking, lighting and heating	Y	Electric stove top smoke observed
Has a working and safe heating system	Y	Provider tested their heating/cooling on electric thermostat
Has a working refrigerator and stove	Y	
Has a working telephone	Υ	Provider made a call
Has operational smoke detector(s)	Υ	Observed and tested by provider
Has first aid kit/supplies	Y	Stored in hallway closet
 Has protective coverings on any electrical outlet that is accessible to children 	Y	Corrective Action Completed on 01/18/2023
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	Stored along back on the kitchen counter
Medications of any kind	Y	Stored in providers medicine cabinet in her personal bathroom
Matches, lighters and flammable products	Y	Husband is a smoker, lighter on high cabinet in room & on-person.

Alcoholic beverages	Y	Does not own
Guns	Υ	Does not own
Cleaning agents	Υ	Corrective Action Completed on 01/18/2023
Poisonous substances	Υ	Provider has grass weed killer in her shed outside 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.	Υ	No diaper age children in care
rash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Υ	No diaper age children in care
Child is changed immediately when s/he has a soiled or wet liaper, clothing or bedding.	Υ	
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:	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, necluding: 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	
 Achild in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Υ	
the provider immediately reports any suspected child abuse, eglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	

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

⊠Batteries for Flashlight

⊠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	⊠Blanket(s)		
Items in the Disaster Supply Kit are clean, org	anized, and usable (Y/N)? Y		
Emergency Ready-to-Go Pack is available and			Y
Location of The Emergency Ready to go Pa Item Specification (if needed): - 1 pack of AA batteries, 1 flashlight, 4 c	anned foods, powder milk, 1 ro diaper age children in care, 5 garnes, orrected & Reviewed on 01/18	oxit oll of sealing plastic, 1 pai outfits 1 per child, folder of	ir of scissors, 1 roll of duct tape, 1 w/ ECMA for all children and EPP forms,
Emergency Documents			
⊠Informal Provider Emergency Prepar ⊠Authorization for emergency medical		form)	
Planning and Maintenance			
Person responsible for updating the Disaster	Supply Kit and the Emergence	y Documents regularly:	
First Name	Last Name		
Austine Description of how the Emergency Ready-to-0	Spriggs		
Shelter In Place Procedure: The provider will gather the children and ERTO will use sealing plastic and tape to seal door if Evacuation Procedures: The provider will grab the emergency bag, gate from the home. Once if and then call 911 if necessary. If the provider and children cannot go to the provider will grab the ERTG bag and the children arrival, provider will have back door access to window) of the secure will the provider will have back door access to window) of the secure will the provider will have back door access to window) of the secure will the provider will have back door access to window) of the secure will be a secure will b	ther the children, utilizing the they enter the children at they enter they enter they will go to the they using the tren using the	vill call the parent to rel the alternate location w	lay the information that they are secure which i Jpon to the upstairs bathroom(1 door 1
Signatures & Date			
Acknowledgement: By signing below the parties been discussed. The parties also acknowledge pop up visit which will be conducted virtually or	that, if approved, the home i		
PROVIDER	LA TOTAL TOTAL		NSPECTOR
Printed Name: Austine Sprin	295 Print	ed Name:	Marie Sall
	Sign	ature:	
Date: 1/18/2023	Date	: 01/18/2023	Phone: 1-877-227-0125

⊠Virtual Inspection
□In-person Inspection

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

Return to: ccs.informalproviders@maryland.g ov

Inspection Date: 03/09/2022	Time	In: 3:30PM	Time Out: 4:06PN	M Result: Pas 3/10/2022	ssed if returned by 5:00PM on		
Informal Care							
Type of Care (check one): ☐ Nor	n-relative Infe	ormal Provider C	are ⊠Relative	Informal Provider	Care		
Provider Information							
First Name: Daniella	Last	Name: Stanley		Provider ID	Provider ID: 482992		
Provider ID #:				Email:	Email:		
Care Location Inspected							
Street Address: Address Verified? Yes	City	- 32	County	State	p Code		
Name of Children in Care (add pages	if needed)	Scholarship	Date of Birth	Age /	Present (Y/N)		
			11/23/2020	1 / Yes			

Safety of the Home	100	
Directions: Review and determine compliance with each standard. Not pages may be used for comments.		corrective actions needed. Additional D – Discussed, n/a – Not Applicable
Health and Safety Training:	Standard Met Y/N N/A	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	No sign of rodents or insects
Is well-lit and well-ventilated	Y	Well lit
 Has hot and cold running water 	у	Steam observed
Has a working inside toilet UNDER sink	У	Flush observed
 Has utilities for cooking, lighting and heating 	Y	Stove burners observed
Has a working and safe heating system	Y	Turned up
Has a working refrigerator and stove	Y	Refrigerator light and frozen food observed
Has a working telephone	Y	House phone. Outbound call observed.
 Has operational smoke detector(s) 	Y	Test button pressed. The alarm sounded.
Has first aid kit/supplies	Y	Ointments, gauze, tape, gloves band aids, tongue depressors, gauze, ice pack, Alcohol wipes,
 Has protective coverings on any electrical outlet that is accessible to children 	Y	In all rooms outlets that were not in use are 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	Knifes on the counter towards the back of counter.
Medications of any kind	Y	Medicine cabinet. Unreachable to child.
Matches, lighters and flammable products	Y	None in the house
Alcoholic beverages	Y	None in the house
• Guns	Y	None in the house
Cleaning agents	Y	Under sink locked
Poisonous substances	Y	None other than medications and cleaning solution

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: • Toileting; • Diapering; • Before food preparation and eating; • After playing outdoors; and • At other times when necessary to prevent the spread of disease.	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury	Y	
A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child.	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> 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) <u>and</u> 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	⊠Folder or binder for EPP documents
⊠Batteries for Flashlight	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
⊠Portable First Aid Kit	⊠Diapers	⊠Consider special toys or games
⊠Thermometer	⊠Change of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags

⊠Medications	⊠Blanket(s)
Items in the Disaster Supply Kit are clean, or	ganized, and usable (Y/N)? Y
Emergency Ready-to-Go Pack is available as	nd easily accessible in the event of an emergency (Y/N)? Y
Location of The Emergency Ready to go P	'ack: In the closet by the front door.
Item Specification (if needed):	
4 16oz water bottles, canned Beans, ravioli,	soup, pasta
	pes gauze, tape, tweezers, burn cream, gloves,
4 diapers & pack of baby wipes	
2 tops, 2 pants,	
Baby Tylenol , masks,	
2 AA batteries, 4 C batteries	
Bouncy ball, book	
Items to review on xx/xx/xxxx if needed:	N/A
Emergency Documents	
⊠Informal Provider Emergency Prepa	aredness Plan (this completed form)
⊠ Authorization for emergency medical	al care
Planning and Maintenance	
Person responsible for updating the Disaste	r Supply Kit and the Emergency Documents regularly:
First Name	Last Name
Description of how the Emergency Ready-to	G-Go Pack will be transported to an evacuation location: Carried.
States to Disco Decades	
Shelter In Place Procedure:	Control of the contro
down the stairs to the basement. The basen	te what's going on than grab the child and the emergency bag, unlock child gate and go nent has two small windows and two doors.
Evacuation Procedures:	
	e child and the emergency to go bag, Provider will then proceed to her vehicle where she will
secure the child in his car seat and drive to t	
Alternate Location:	
	and assessment has. The arguides will then assessed to her tablele where the will account the
child in his car seat and drive to the alternate can secure baby in stroller and walk down to	
can secure baby in stroller and wark down to	riocation.
Signatures & Date	
	ties acknowledge that all standards have been reviewed, and any corrections if needed have ge that, if approved, the home in which care is provided is subject to random, unannounced or in-person.
PROVIDER	INSPECTOR
Printed Name: Daniella Stanley	me:
Signature:	
Date: 03/09/2022 Phone:	Date: 03/09/2022 Phone: 1-877-227-0125