

# Child Care Scholarship Program

# **Informal Child Care Monitoring Inspections**



First letter of the provider's last name.

Posted June 2025

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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: 03/17/2023	Time In: 1:30PM	Time Out: 2:30PI	M Result: PASSED
Informal Care			
Type of Care (check one): ☐ No	n-relative Informal Provider (	Care ⊠Relative	Informal Provider Care
Provider Information			Total Control Care
First Name: Rayluz	Last Name: Valdez	Nunez	Provider ID: 509854
Provider ID #:			Email:
Care Location Inspected			
Street Address: Address Verified? Yes.	City:	County:	State Zip Code:
Name of Children in Care (add pages	f needed) Scholarship	Date of Birth	Age / Present (Y/N)
		(09/10/2021)	1yr. / Y

Name of Children in Care (add pages if needed)	Scholarship	Date - CDI	
(add pages if ficeded)	ocholarship	Date of Birth	Age / Present (Y/N)
	1	(09/10/2021)	1yr./Y
Safety of the Home			
Directions: Review and determine compliance with ea pages may be used for comments.	ch standard. Note	any comments 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?		Υ	Relative Informal Care – Certificate Submitte
Home is free of health and safety hazards:		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Is in good repair		Υ	All areas were clean
<ul> <li>Is free of insect or rodent infestation</li> </ul>		Υ	No evidence of infestation
Is well-lit and well-ventilated		Υ	All lights were turned on and lots of natural window lighting
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, lock on the bathroom cabinet
Has utilities for cooking, lighting and heating	9	Y	
Has a working and safe heating system		Y	Provider tested thermostat and observed
Has a working refrigerator and stove		Y	Tested by provider and observed
Has a working telephone		Y	Outbound call made to provider's phone
Has operational smoke detector(s)		Y	Tested by provider and observed
Has first aid kit/supplies		Y	Stored in locked kitchen baby cabinet
<ul> <li>Has protective coverings on any electrical of accessible to children</li> </ul>		Y	All outlets were covered with coverings and/or occupied
larmful items are stored appropriately and away hildren:	from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Sharp or pointed items		Y	Stored in locked kitchen drawer
<ul> <li>Medications of any kind</li> </ul>		Υ	Stored in upper level kitchen cabinet
<ul> <li>Matches, lighters and flammable products</li> </ul>		Y	Stored in locked cabinet drawer
Alcoholic beverages		Υ	Does not own
Guns		Y	Does not own
Cleaning agents		Y	Cleaning agents stored in locked kitchen cabinet
Poisonous substances		Y	Does not own
ENERAL CLEANLINESS STANDARDS		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Il areas of the home are kept clean, including diape	ring area	Y	

Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Disposed regularly using diaper genie
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Υ	
Diapering procedures are followed.	Y	Diaper changing station has 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	Staper sharing station has all needed supplies
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.	Y	
<ul> <li>A child in care is not subjected to mistreatment, including:</li> <li>Any deliberate act that hurts a child physically or emotionally, including:</li> <li>Spanking, Biting, Hitting, Shaking</li> <li>Any other means of physical discipline</li> <li>Not attending to a child's physical needs</li> <li>Shouting, Cursing, Shaming, Ridiculing</li> <li>Washing a child's mouth with soap</li> <li>Putting pepper or other spicy or distasteful items in a child's mouth</li> <li>Requiring a child to stand on one foot as punishment</li> <li>Tying child to a cot or other equipment</li> </ul>	Y	
he provider immediately reports any suspected child abuse, eglect or mistreatment by calling 911 and your local partment 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	☑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, organized, and usable (Y/N)? Y

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

Location of The Emergency Beads to go Book	Channel in the release and the second			
Location of The Emergency Ready to go Pack: Stored in the playroom area near exit.				
Item Specification (if needed):				
	1 roll of duct tape, 1 pk of wipes and 4 diape	rs. 2 bottled waters 1 blanket 3 haby jare		
of baby food, 3 juice pouches, 2 canned for	oods, 2 thermometers, 1 flashlight, 1 pk of A	A batteries, 1 pair scissors, 3 heavy duty		
trash bags, no spec meds but added Tyler	nol and allergy medicine for general use, 1 s	tuffed animal and folder w/ EPP and ECMA.		
1 baby bag (carrying case)				
Items to be reviewed on xx/xx/xxxx: N/A				
Items to be reviewed our ANANAXX. IN/A				
Emergency Documents				
⊠Informal Provider Emergency Preparedr	ness Plan (this completed form)			
⊠Authorization for emergency medical car	CONTRACTOR			
Planning and Maintenance				
	1.10 10			
Person responsible for updating the Disaster Sup First Name		arly:		
Scarlet	Last Name			
Rayluz	Valdez (Parent) Valdez Nunez (Provider)			
Description of how the Emergency Ready-to-Go		ation: carried by the provider.		
Shelter in Place Procedure:		and an		
The provider will gather the child and the emerge	ncy han and head to the	window) for shelter. The provider will call		
the parent before or after they are secured in the	location depending on the emergency. She is	will secure the window and door with		
sealing plastic and tape if needed.	research deportantly of the entergency. One v	will secure the window and door with		
Evacuation Procedures:				
	and sother the shill and the CDTO and board	- t		
Primary: The provider will account for the child a her car seat and drive to	on entry the provider and child will either she			
window) or bathroom (1 door 1 window). The prov	wider will call the parent before or after donor	Iter in the (1 door 1		
The pro-	ridor will dall the parent before or after depen	ding on the seventy of the entergency.		
Alternate: If they could not access the primary lo	ocation, the provider will gather the child and	the FRTG secure the child in her car seat		
and then drive to Upon a	rrival the provider will call or text the parent to	be instructed of where to shelter within		
01				
Signatures & Date				
Acknowledgement: By signing below the parties at	cknowledge that all standards have been revie	ewed, and any corrections if needed have		
been discussed. The parties also acknowledge the pop up visit which will be conducted virtually or in-	at, it approved, the nome in which care is providerson.	ided is subject to random, unannounced		
PROVIDER		INSPECTOR		
Printed Name:				
haybuz Nicole Valde	ez Nune 7. Printed Name:			
Signature:				
Signature:				
Date: 03/18/2023 Phone:	Date: 03/17/2023	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

Time In: 9:30AM Time In: 8:30AM	Time Out: 10:58/ Time Out: 8:41A	
lative Informal Provider	Care ⊠Relative	Informal Provider Care
Last Name: Valent	ine	Provider ID: 449138 Email:
	THE WHITE EARLY	
County:	State	Zip Code:
eded) Scholarship	Date of Birth	Age / Present (Y/N)
	(01/31/2012)	11yr. / N
•	(12/07/2012)	10yr. / N
	(08/07/2018)	4yr. / N
	lative Informal Provider  Last Name: Valent  County:	Time In: 8:30AM  Time Out: 8:41A  lative Informal Provider Care   Relative  Last Name: Valentine  County: State  Peded) Scholarship Date of Birth (01/31/2012) (12/07/2012)

	(00,01,2010)	
Safety of the Home		
Directions: Review and determine compliance with each standard. Not pages may be used for comments.		orrective actions needed. Additional  D - Discussed, n/a - Not Applicable
Health and Safety Training:	Standard Met Y/N	Corrective Action /Timeframe if needed
Basic Health and Safety Training Completed?	Y	Relative Informal Care – Certificate Submitte
Home is free of health and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Is in good repair	Y	All areas were clean
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 in all 3 bathrooms
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 to provider's phone
Has operational smoke detector(s)	Y	Tested by provider and observed
Has first aid kit/supplies	Y	Medical Supplies: Band-Aids, Gauze, Alcohol, Peroxide moved to high shelf level in bathroom and First aid kit stored under locked bathroom sir
<ul> <li>Has protective coverings on any electrical outlet that is accessible to children</li> </ul>	Y	All outlets were occupied 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	Stored in high kitchen cabinet above the stove
Medications of any kind	Υ	Stored in high cabinet in bathroom
Matches, lighters and flammable products	Y	Stored onto of the fridge
Alcoholic beverages	Y	Corrective Action Completed: Locks added to alcohol cabinets

• Guns	Y	Provider open and locked safe, and moved lock box to a higher shelf above
Cleaning agents	Y	All cleaning agents stored under both bathroom cabinets with locks
Poisonous substances	Y	Does not own
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	No diaper age children in care
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	No diaper age children in care
Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after:  • Toileting;  • Diapering;  • Before food preparation and eating;  • After playing outdoors; and  • At other times when necessary to prevent the spread of disease.	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, including:	Y	
<ul> <li>A child in care is not subjected to any form of neglect, including:         <ul> <li>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;</li> <li>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.</li> </ul> </li> </ul>	*	
<ul> <li>A child in care Is not subjected to mistreatment, including:</li> <li>Any deliberate act that hurts a child physically or emotionally, including:</li> <li>Spanking, Biting, Hitting, Shaking</li> <li>Any other means of physical discipline</li> <li>Not attending to a child's physical needs</li> <li>Shouting, Cursing, Shaming, Ridiculing</li> <li>Washing a child's mouth with soap</li> <li>Putting pepper or other spicy or distasteful items in a child's mouth</li> <li>Requiring a child to stand on one foot as punishment</li> <li>Tying child to a cot or other equipment</li> </ul>	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

⊠Portable First Aid Kit

⊠Diapers (N/A)

□ Consider special toys or games

□ Change of clothes

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

Medications (N/A)

⊠Blanket(s)

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

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

# Location of The Emergency Ready to go Pack: Stored in the living room

Item Specification (if needed):

- 1 flashlight, 4 extra AAA batteries, 1 large heavy duty trash bag, 2 duffle bags (carrying case), gen med (Tylenol), 3 blankets, 1 pk of baby wipes, toys, 1 first aid kit, 1 bag of crayons/ 4 coloring books, 2 books, 1 pk of UNO cards, 3 outfits (top/bottom), 1 thermometer, 3 bottled water, and 6 pks of non-perishable food items, folder w/ EPP and ECMA per child, no spec meds, 1 pair of scissors, and 1 roll of duct tape

# Items to be reviewed on 04/14/2023: Corrected & Reviewed on 04/14/2023

- Locks added to both alcohol cabinets	
Emergency Documents	
☑Informal Provider Emergency Preparedn ☑Authorization for emergency medical car	
Planning and Maintenance	
Person responsible for updating the Disaster Sup	ply Kit and the Emergency Documents regularly:
First Name Shonta	Last Name Valentine
Description of how the Emergency Ready-to-Go	Pack will be transported to an evacuation location: carried by the provider.
Shelter In Place Procedure:	
The provider will gather the children and the ERT The provider would lock all doors and windows a them of the status of the emergency until it has e	nd seal them with sealing plastic as needed. The provider will call the parent and inform
Evacuation Location(s) Procedures:	
Primary: The provider will account for the children Upon entry they would go into the master bedroo call the parent to inform them of the emergency a	om (1 door 1 window). The provider will make sure they are secured within the room and

Alternate: If they could not access the primary location, the provide	er will gather the children and ERTG and carry them into her vehicle,
	ounger child in the front-facing car seat. The provider would inform the
parent via call about the emergency and head to	The provider also has key access, upon entry she and
the children would go into the master bedroom (1 door 1 window) an	nd stay in the location until the emergency has ended and she will call
the parent to inform her of the update.	

Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. The parties also acknowledge that, if approved, the home in which care is provided is subject to random, unannounced pop up visit which will be conducted virtually or in-person.			
INSPECTOR			
Printed Name:			
Signature:			
Date: 04/14/2023 Phone: 1-877-227-0125			

☑Virtual Inspection
☐In-person Inspection

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

Return to: ccs.informalproviders@maryland.g

Inspection Date: 04/19/2022 Follow up Inspection: 04/20/2022		In: 1:45PM In: 10:00AM	Time Out: 2:55PM Time Out: 10:19AM	
Informal Care			COLUMN TO STATE OF THE STATE OF	
Type of Care (check one):	elative Info	ormal Provider Co	are ⊠Relative In	nformal Provider Care
Provider Information				
First Name: Shonta	Last	Last Name: Valentine Pro		Provider ID: 449138
Provider ID #:				Email:
Care Location Inspected				
Street Address: III Address Verified? Yes	City I	Cou	inty State	Zip Code
Name of Children in Care (add pages if n	eeded)	Scholarship	Date of Birth	Age / Present (Y/N)
The state of the s	- 10		1/31/2012	10 / No atschool
			12/7/2012	9 / No at school
			8/7/2018	3 / Yes
	_	1		

#### Safety of the Home

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

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

Health and Safety Training:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Basic Health and Safety Training Completed?	N/A	
Home is free of health and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Is in good repair	Y	
Is free of insect or rodent infestation	Y	No sign of infestation
Is well-lit and well-ventilated	Y	
Has hot and cold running water	Y	Observed steam from shower
Has a working inside toilet Look under sink	Y	Moved to higher shelf
Has utilities for cooking, lighting and heating	Y	Gas stove operational
Has a working and safe heating system	Y	Heat turned up to 76
<ul> <li>Has a working refrigerator and stove</li> </ul>	Y	
Has a working telephone	Y	Called provider on cell phone
<ul> <li>Has operational smoke detector(s)</li> </ul>	Y	
Has first aid kit/supplies	Y	Tape, band aids, gauze, ointment, sprain bandages. CPR kit, gloves
<ul> <li>Has protective coverings on any electrical outlet that is accessible to children</li> </ul>	Y	Covered/in use/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	Out of reach in the back of the counter
Medications of any kind	Y	
<ul> <li>Matches, lighters and flammable products</li> </ul>	Y	
Alcoholic beverages	Y	Up on a high rack

MSDE OCC Informal Care Inspection Checklist

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Revised 10/2021

Guns	Y	Locked in a safe
Cleaning agents	Y	Moved to garage and higher shelf
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	
The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm;  Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child.	Y	
A child in care is not subjected to mistreatment, including:  Any deliberate act that hurts a child physically or emotionally, including:  Spanking, Biting, Hitting, Shaking  Any other means of physical discipline  Not attending to a child's physical needs  Shouting, Cursing, Shaming, Ridiculing  Washing a child's mouth with soap  Putting pepper or other spicy or distasteful items in a child's mouth  Requiring a child to stand on one foot as punishment  Tying child to a cot or other equipment	Y	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> <u>Department of Social Services Child Protective Services Unit.</u>	Y	
Emergency Ready-to-Go Pack	2 75 2	
The Emergency Ready-to-Go Pack must be available and easily accessible needed medications) and Emergency Documents.	in the event of an e	mergency. This contains a Disaster Supply Kit (incl
Disaster Supply Kit		

⊠Flashlight ⊠Bottled water

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

⊠Folder or binder for EPP documents

MSDE OCC Informal Care Inspection Checklist

⊠Diapers

⊠Backpack(s) or carrying case(s) ⊠Consider special toys or games

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

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

Location of The Emergency Ready to go Pack: Main level hall way

#### Item Specification (if needed):

4 AAA batteries

First aid - gloves, gauze, tape, bandages, CPR kit, antibiotic ointment

Cough medicine, Tylenol, allergy medicine.

2 pulls & wipes, 3 shirt, 3 pants,

3 16oz. water bottles, cans of Spaghettics, soup, chicken rice, peaches, baked beans, popeorn, nutri grain bars, peanut butter cracker.

#### Items to review on 04/20/2022 If needed; Observed 04/20/2022

Small blanket

Themometer

Books/toys/ Coloring books and erayons, card games.

#### **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: Duffel bag to be carried

#### Shelter In Place Procedure:

The provider will get the children and emergency to go bags and go to the third level of the house to shelter in the main bedroom that has two small windows and two doors.. Once there provider will call the parent.

#### **Evacuation Procedures:**

The provider will gather the children at the front door, get the emergency to go bag and walk over to a neighbor's house. Provider has spare key and will shelter in a first floor bedroom that has a patio window/door and door to room. Provider will call parent before evacuating and once secure at the evacuation location.

If they had to go to the alternate evacuation location which is they had to go to the alternate evacuation location which is they not go bag and walk to the provider's vehicle where provider will secure the children in car seat and seat bets. Once at the alternate emergency location they will shelter in the main living area of the house that has a patio window/door and front door of the house. Provider will call parent before evacuating and once secure at the evacuation location.

		95		

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	3
Shorta Valentine	Printed Name:	- W	
	Signature:		
Date: 4-20-2022 Phone:	Date: 04/20/2022	Phone: 1-877-227-0125	

MSDF OCC Informal Care Inspection Checklist

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Revised 10/2021

## ⊠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: 9/19/2024	Time In: 1:30pr	n Time Out: 1:58p	m Result: Passed
Informal Care			
Type of Care (check one):	elative Informal Provi	der Care   Relative	Informal Provider Care
Provider Information			
First Name: Holly	Last Name: Vito	)	Provider ID: 374437
Provider ID #:			Email:
Care Location Inspected			
Street Address: Address Verified?: Yes	Cou	<u>State</u>	Zip Code
Name of Children in Care (add pages if n	seded) Scholars	ship Date of Birth	Age / Present (Y/N)
		12/21/2019	4yrs/ N
		11/20/2020	3yrs/N
		8/15/2016	8yrs/N
		9/13/2018	6yrs/N
		3/18/2015	9yrs/N

		3/10/2015	- Syrs/N
Safety of the	Home		
	s: Review and determine compliance with each sta pages may be used for comments.		ments or corrective actions needed.  D – Discussed, n/a – Not Applicable
Health and Safe	ty Training:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Basic He	ealth and Safety Training Completed?	Y	
Home is free of I	nealth and safety hazards:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
<ul> <li>Is in goo</li> </ul>	d repair	Y	
Is free of	finsect or rodent infestation	Y	
<ul> <li>Is well-lit</li> </ul>	and well-ventilated	Y	
Has hot	and cold running water	Y	
Has a wo	orking inside toilet	Y	
<ul> <li>Has utilit</li> </ul>	ies for cooking, lighting and heating	Y	
Has a wo	orking and safe heating system	Y	
Has a wo	orking refrigerator and stove	Y	
Has a wo	orking telephone	Y	
<ul> <li>Has oper</li> </ul>	rational smoke detector(s)	Y	
Has first	aid kit/supplies	Y	
	ective coverings on any electrical outlet that is e to children	Y	
Harmful items are children:	stored appropriately and away from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Sharp or	pointed items	Y	
<ul> <li>Medicatio</li> </ul>	ns of any kind	Υ	
<ul> <li>Matches,</li> </ul>	lighters and flammable products	Y	
<ul> <li>Alcoholic</li> </ul>	beverages	Υ	
Guns		Y	
<ul> <li>Cleaning</li> </ul>	agents	Y	
<ul> <li>Poisonous</li> </ul>	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.	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 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

**⊠**Thermometer

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.

⊠Bottled water ⊠Folder or binder for EPP documents ⊠Flashlight ⊠Non-perishable food ⊠Backpack(s) or carrying case(s) **⊠** Batteries ⊠Consider special toys or games 

MSDE OCC Informal Care Inspection Checklist 2020-03-26

		Packing Tape & Sealing Plastic/ Trash Bags
⊠ Medications-N/A	⊠Blanket(s)	
Items in the Disaster Supply Kit are cle	an, organized, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is availa	able and easily accessible in the event of an emerg	gency (Y/N)? Y
Location of Emergency Ready to go	Pack: Kitchen Cabinet	
•		
To be observed for compliance on		
•		
Emergency Documents		
⊠Informal Provider Emergency  ⊠Authorization for emergency m	Preparedness Plan (this completed form) nedical care	
Planning and Maintenance		
Person responsible for updating the Dis	saster Supply Kit and the Emergency Document	ts regularly:
First Name Holly	Last Name Vito	
Description of how the Emergency Rea	dy-to-Go Pack will be transported to an evacua	tion location:
Shelter In Place Procedures:		
	bag and the children, take them to sheltering lo parent before, during and after sheltering.	ecation #1 of doors, #1 of
Evacuation Procedures:		
The provider will travel to the evacuat	d the ready to go bag, they will be traveling ton location.  Italian and after sheltering	shelter #1 of doors,
The provider will travel to the evacuat	d the ready to go bag, they will be traveling ion location will contact parent before, during and after shel	to shelter 1 of
CARE HOURS: - Monday-Friday 9am-6pm		

Signatures & Date		
Acknowledgement: By signing below the parties acknowledge been discussed. The parties also acknowledge that, if appropour up visit which will be conducted virtually or in-person.	e that all standards have been reviewe ved, the home in which care is provide	ed, and any corrections if needed have d is subject to random, unannounced
PROVIDER		INSPECTOR
Printed Name: Holly Vita	Printed Name:	
Signature	Signature:	
Date: 9 19 2024 Phone:	Date: 9/19/2024	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: 07/28/2023 Follow-up Inspection Date: 07/28/2023	Time In: 2:30PM Time In: 4:45PM	Time Out: 4:01PM Time Out: 5:25PM	Transaction and transaction
Informal Care			
Type of Care (check one): ⊠ Non-relati	ive Informal Provider C	are □Relative Ir	nformal Provider Care
Provider Information			
First Name <b>: Cherie</b> Provider ID #:	Last Name: Von Ha	ick	Provider ID: <u>489864</u> Email:
Care Location Inspected			
Street Address: Cit Address Verified? <b>Yes.</b>	ty: County:	State	Zip Code:
Name of Children in Care (add pages if need	led) Scholarship	Date of Birth	Age / Present (Y/N)
		(01/08/2016)	7yr. / N
		(10/11/2019)	3yr. / Y

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	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 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	Y	Thermostat tested by provider for heating and window A/C system
Has a working refrigerator and stove	Y.	Tested by provider and observed
Has a working telephone	Y	Outbound call made to provider's phone
<ul> <li>Has operational smoke detector(s)</li> </ul>	Y	Tested by provider and observed
Has first aid kit/supplies	Y	First aid kit stored in living room
<ul> <li>Has protective coverings on any electrical outlet that is accessible to children</li> </ul>	Y	Corrective Action Completed: Coverings added to bathroom out. 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 in high kitchen cabinet
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	No cleaning products in-home, stored in parents vehicle (for work)
Poisonous substances	Y	Does not own

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	Changing station in parents bedroom
Trash, garbage and wet and solled diapers are disposed of in a sanitary manner.	Y	Diapers taken out daily by provider
Child is changed immediately when s/he has a solled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	Áil dispering supplies available near changing area
Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after:  Tolloting; 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 (Init.	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	⊠Change of clothes	
<b>⊠</b> Medications	⊠Blanket(s)	

Emergency Ready-to-Co Pack is available and easily accessible in the event of an emergency (VN)? Y  Location of The Emergency Ready to go Pack: Stored in the front hall close them. Specification (if needed):  2 toto bags (cerrving case). If lishifield, 1 pk of heavy duty batteries, 1 first aid kit, 1 thermometer, no spec meds, 5pk water, 2 canned goods, 2 boxes of dired foods, 1 pk of dispersivings, 4 outfits (top/bottom/underwear/socks), 2 blankets, folder w/ EPP and ECMA docs, coloring books and cravons, 1 roll of duty roll, 1 pair of scissors and 1 roll of sealing plastic.  2 litems to be reviewed on 07/28/2023; Corrected and Reviewed on 07/28/2023  1. Cabinets and drawers in kitchen  2. Sharparkines stored away supropristally.  3. Has a working and self-estatio eystem.  4. Has consistent in mode disactorial.  5. Sharparkines stored away sareform.  5. Cultar coverings in battering.  5. Sharparkines stored away sareform.  6. Cultar coverings in battering.  6. Sharparkines stored away sareform.  7. Cleaning Acents stored away sareform.  8. All areas of the home are kept clean, including dispering area.  7. Emergency Documents  8. Sharparkines stored away sareform.  8. All areas of the home are kept clean, including dispering area.  8. All areas of the home are kept clean including dispering area.  8. All areas of the home are kept clean including dispering area.  8. All areas of the home are kept clean including dispering area.  8. All areas of the home are kept clean including dispering area.  8. All areas of the home are kept clean including dispering area.  8. All areas of the home are kept clean including dispering area.  8. All areas of the home are kept clean including dispering area.  8. All areas of the home are kept clean including dispering area.  8. All areas of the home are kept clean including dispering area.  8. All areas of the home area way to a control of the children and the ERTG bags and go to the provider will call both parents or the provider will call be provider will call both parents or	Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Y				
Secretarion   If needed:	Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Y				
Last Name  Zhaning and Maintenance  Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly:  Last Name  Zhaning and Maintenance  Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly:  Shalar and grade the Description of how the Emergency Preparedness Plan (this completed form)  Zhathorization for mergency medical care  Von Haack  Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: carried by the provider.  Shelter in Place Procedure:  Shelter in Place Procedure:  Evacuation Procedures  Evac	Item Specification (if neede	<u>:d):</u>			nermometer, no spec meds. 6pk water. 2
1. Cabinets and drawers in kilchen 2. Shars/Kinivas stored away appropriately 3. Has a working and safe heating system 4. Has operational smoke detector(s) 5. Has first aid kilvsupolite 6. Outlet coverings in batterom 7. Cleaning Agents stored away safety 8. All areas of the home are kept clean, including diapering area.  Emergency Documents    Sinformal Provider Emergency Preparedness Plan (this completed form)   Sauthorization for emergency medical care   Planning and Maintenance   Person responsible for updating the Disaster Supply Kil and the Emergency Documents regularly: First Name   Cherrie   Last Name   Last Name   Cherrie   Von Haack   Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: carried by the provider.    Shelter In Place Procedure   The provider will gather the children and the ERTG bags and go into the bathroom (1 door 0 windows). If the need should arise the provider will gather the children and tape to seal the doors, windows and vents. Once secured the provider will call, text or face time the persons with emergency updates.  Evacuation Procedures   Primary: The provider will account for the children and grab the ERTG bags and go to the provider's vehicle. The provider will secure the older child in her booster seat and younger child in her forward-facing car seat. Once secured the provider will call both parents or text them and head   Upon arrival the provider and children will head   designated shelter location). The   (2 doors 0 windows). Provider will ensure the provider and children will head   designated shelter location). The   (4 doors 0 windows). Provider will ensure the provider will call both parents or text the determent head to the provider will call both parents or text the edited child in her booster seat and younger child in her forward-facing car seat. Once secured the provider will call both parents or text them and head   Upon arrival the provider and children will head   designated shelter location). The   (4 doors 0 windo	canned goods, 2 boxes and ECMA docs, colori	s of dried foods, 1 p ing books and cray	ok of diapers/wipes, ons, 1 roll of duct ro	4 outfits (top/bottom/und oll, 1 pair of scissors and	derwear/socks), 2 blankets, folder w/ EPP
A. Has a working and safe heating system  4. Has a portational smoke detector(s)  5. Last first aid kli/supplies  6. Outsted to overings in bathroom  7. Cleaning Agents stored away safely  8. All areas of the home are kept clean, including dispering area.  Emergency Documents  Zinformal Provider Emergency Preparedness Plan (this completed form)  2Authorization for emergency medical care  Planning and Maintenance  Person responsible for updating the Disaster Supply Kit and the Emergency Documents regularly:  First Name  Cherie  Von Haack  Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: carried by the provider.  Shelter in Place Procedure:  The provider will gather the children and the ERTG begs and go into the bathroom (1 door 0 windows). If the need should arise the provider will use sealing plastic and tape to seal the doors, windows and vents. Once secured the provider will call, text or face time the parents with emergency updates.  Evacuation Procedures  Primary: The provider will account for the children and grab the ERTG begs and go to the provider's vehicle. The provider will secure the older child in her booster seat and younger child in her howard-facing car seat. Once secured the provider will all both parents or text them and head  2 doors 0 windows). Provider will ensure the parents receive call and text updates throughout the emergency.  Alternate: If they could not access the primary location, the provider will gather the children and ERTG bags. The provider will secure the older child in her booster seat and younger child in her forward-facing car seat. Once secured the provider will call both parents or text them and head to the secure of the provider will expected and dichildren with lead designated shelter location). The least them and head to least the provider and children with lead designated shelter location). The least them and head to least the provider and children with perovider and children with perovider and children with perovider an	- 1. Cabinets and drawer	rs in kitchen		on 07/28/2023	
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Evacuation Procedures  Printed Name  Last Name  Von Haack  Provider will gather the children and the ERTG bags and go into the bathroom (1 door 0 windows). If the need should arise the provider will use sealing plastic and tape to seal the doors, windows and vents. Once secured the provider will call, text or face time the parents with emergency updates.  Evacuation Procedures  Primary: The provider will account for the children and grab the ERTG bags and go to the provider's vehicle. The provider will secure the older child in her booster seat and younger child in her forward-facing car seat. Once secured the provider will call both parents or text them and head  Quon arrival the provider and children will head  (2 doors 0 windows). Provider will ensure the parents receive call and text updates throughout the emergency.  Alternate: If they could not access the primary location, the provider will gather the children and ERTG bags. The provider will secure the older child in her booster seat and younger child in her forward-facing car seat. Once secured the provider will call both parents or text them and head to Upon arrival the provider will gather the children and ERTG bags. The provider will secure the older child in her booster seat and younger child in her forward-facing car seat. Once secured the provider will call both parents or text them and head to Upon arrival the provider and children will head  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  Signature		ing the Dispetor Co			
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Printed Name: ("HERIE VONHARCK" Signature  Printed Name: Signature  Signature:  Signature:	been discussed. The parties a	also acknowledge th	nat, if approved, the l	standards have been rev nome in which care is pro	iewed, and any corrections if needed have vided is subject to random, unannounced
Printed Name: ()HERIE VONHAACK Signature Signature Signature:			-		INSPECTOR
Signature:	Printed Name: ()HERIE	VONHAM	cX	Printed Name:	en e
Date: 7/3/1/2/3 Phone: Date: 07/28/2023 Phone: 1-877-227-0125	Signature			Signature:	
	Date: 7/31/23	Phone:		Date: 07/28/2023	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: 08/18/2022	Time	In: 3:30PM	Time Out: 4:35P	M Result: Passed
Informal Care			1	
Type of Care (check one):	on-relative Info	ormal Provider C	are □Relative	Informal Provider Care
Provider Information				
First Name: Cherie Provider ID #:	Last	Name: Von Ha	ack	Provider ID: 489864 Email:
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)
			01/08/2016	6 / No
		<del> </del>	10/11/2019	2 / Yes
W-25-7		1	10/11/2013	27168
		<del> </del>	<del> </del>	
Safety of the Home				
Directions: Review and determine comp	liance with ea	ch standard Note	any comments or c	orrective actions peeded. Additional
pages may be used for comments.	manoc with ga	on standard. 1400	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 Com	pleted?		Y	Certificate Submitted
Home is free of health and safety h	azards:		Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
Is in good repair			Y	
<ul> <li>Is free of insect or rodent infe</li> </ul>	estation		Y	No sign of infestation
<ul> <li>Is well-lit and well-ventilated</li> </ul>			Y	
Has hot and cold running water		Y	Steam Observed	
Has a working inside toilet		Y		
Has utilities for cooking, lighting and heating		Y	Gas stove operational	
Has a working and safe heating system		Y		
Has a working refrigerator and stove		Y	Light turned on when door opened	
Has a working telephone		Y	Provider cell called	
Has operational smoke detector(s)		Y		
Has first aid kit/supplies		Y	Alcohol wipes, Band-aids, Gauze, gloves	
<ul> <li>Has protective coverings on a accessible to children</li> </ul>	any electrical	outlet that is	Y	Covered or behind furniture
Harmful items are stored appropria children:	tely and away	/ from	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		

Poisonous substances

Alcoholic beverages

Cleaning agents

Guns

Matches, lighters and flammable products

Υ

Υ

Υ

Υ

None

None

Locked under the sink

Other than medications and cleaning solutions

GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	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.	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 nacessary 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	
<ul> <li>A child in care is not subjected to mistreatment, including:</li> <li>Any deliberate act that hurts a child physically or emotionally, including:</li> <li>Spanking, Bitting, Hitting, Shaking</li> <li>Any other means of physical discipline</li> <li>Not attending to a child's physical needs</li> <li>Shouting, Cursing, Shaming, Ridicuting</li> <li>Washing a child's mouth with soep</li> <li>Putting pepper or other spicy or distasteful items in a child's mouth</li> <li>Requiring a child to stand on one foot as punishment</li> <li>Tying child to a cot or other equipment</li> </ul>	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 amough 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, organized, and usable (Y/N)? Y				
Emergency Ready-to-Go Pack is available and e	easily accessible in the event of an emergency	y (Y/N)? Y		
Location of The Emergency Ready to go Pack	k: Hall closet by front door			
Item Specification (if needed):				
4 shirts, 4 shorts, 5 pairs socks, 7 underwear				
10 extra AA batteries, 6 diapers, pack of wipes,				
Alcohol wipes Band aids, ointment, gauze, tape, 6 8oz water bottles, 2 Boxes cereal, 2 cans of C				
Items to review on xx/xx/xxxx if needed: N/A				
Emergency Documents				
⊠Informal Provider Emergency Prepared	toogs Dian (this completed form)			
	•			
Planning and Maintenance				
Person responsible for updating the Disaster Su	upply Kit and the Emergency Documents re	cularly.		
First Name Cherie	Last Name Von Haack	gurany.		
Description of how the Emergency Ready-to-Go	Pack will be transported to an evacuation	location: Carried		
Shelter in Place Procedure:				
Provider call the parent and inform them, then provider has one door and no windows. If the need				
William that drie door drie the william to the trees	Johnson and the profiter fill dee placing a	nu tape to sear the shelter.		
Evacuation Procedures:				
The Provider will call the parent and inform then				
and booster seat for and head to her vehicle where she will secure the children before driving to the primary evacuation location				
which is Once at the location, the provider will head to the auditorium of that has multiple doors but no windows. The provider will call the parent again and after they are secure in the evacuation location.				
If they couldn't shelter at the primary location, the	ney will go to the alternate evacuation locati	on which is		
The Provider will call the parent and inform them, then provider would grab the ERTB, grab the car seat for Leia and head to her vehicle where she will secure the children before driving. Once there, they will head to the into the main building				
and head to where they will shelter. The has multiple doors and no windows. The provider will after they are				
secure in the alternate evacuation location.				
X				
Signatures & Date  Acknowledgement: By signing below the parties a	acknowledge that all standards have been	reviewed, and any corrections if needed have		
been discussed. The parties also acknowledge the pop up visit which will be conducted virtually or in	hat, if approved, the home in which care is a	provided is subject to random, unannounced		
PROVIDER		INSPECTOR		
Printed Name: CHERIE VON HAAC	Printed Name:			
Signature:	Signature:			
Date: 2/18/202 Phone:	Date: 08/18/2022	Phone: 1-877-227-0125		