

Child Care Scholarship Program Informal Child Care Monitoring Inspections



First letter of the provider's last name.

Posted June 2025

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

marylandpublicschools.org

⊠Virtual Inspection □In-person Inspection		Department of E Care Care Care NFORMAL SPECTION CH	hip Program		Return to: ccs.informalproviders@maryland.gov
Inspection Date: 11/26/2024	Time	e In: 2:45 pm	Time Out: 3:36 p	om Res	sult: Passed
Informal Care Type of Care (check one):	Non-relative Inf	ormal Provider C	are ⊠Relative	Informal F	Provider Care
Provider Information First Name: Ramona Provider ID #:	Last	Name: Walker		Prov Ema	vider ID: 562311 ail:
Care Location Inspected <u>Street Address</u> : <u>Address Verified?</u> : Yes Name of Children in Care (a	<u>City</u> : dd pages if needed)	<u>Cour</u> Scholarship	nty: Date of Birth	Age	<u>State</u> : <u>Zip Code</u> / Present (Y/N)
Name of Children in Care (a	du pugeo il neodeo)		10/16/2014	10 years	old/ N

Directions: Review and determine compliance with each star Additional pages may be used for comments.	Y-Yes, N-No	A REAL PROPERTY AND A REAL
Health and Safety Training:	Standard Met Y/N	t 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	
 Has operational smoke detector(s) 	Y	
 Has first aid kit/supplies 	Y	
 Has protective coverings on any electrical outlet that is accessible to children 	Y	
Harmful items are stored appropriately and away from children:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 Sharp or pointed items 	Y	
 Medications of any kind 	Y	
 Matches, lighters and flammable products 	Y	
Alcoholic beverages	Y	
• Guns	Y	
Cleaning agents	Y	
 Poisonous substances 	Y	
GENERAL CLEANLINESS STANDARDS		Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	

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rash, 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. 		
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 Dependent of Social Services Child Protective Services		

Department of Social Services Child Protective Services Unit.

Emergency Ready-to-Go Pack

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

Υ

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	Change of clothes	Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags		
DMedications- N/A	⊠Blanket(s)			
Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Yes				



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

Location of Emergency Ready to go Pack: In the provider's bedroom 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:

First Name Ramona Last Name Walker

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

Shelter In Place Procedures:

The Provider will gather the ready to go bag and the child, parent before, during and after sheltering.

(1 doors, 1 window(s)). The provider will call the

Evacuation Procedures:

The Provider will gather the child and the ready to go bag, taking them to the car securing the child in a seatbelt. The provider will (1 doors, 1 window(s)). The

provider will call the parent before, during and after sheltering.

The Provider will gather the child and the ready to go bag, taking them to the car securing the child in a seatbelt. The provider will (# of doors, # of window(s)). The provider will call

the parent before, during and after sheltering.

CARE HOURS:

 Signatures & Date

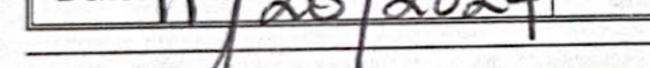
 Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed. The parties also acknowledge that, if approved, the home in which care is provided is subject to random, unannounced pop up visit which will be conducted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

 PROVIDER
 INSPECTOR

 Printed Name:
 Printed Name:

 Signatu
 Signature:

 Date:
 I/28/2024
 Phone



MSDE OCC Informal Care Inspection Checklist 2020-03-26

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■Virtual Inspection Inspection Inspection Inspection			ARE		etum to: cs.informalproviders@maryland.go	
nspection Date: 1/7/2025 Time In: 4:30 PM			Time Out: 5:08 PM	A Result Passed		
Informal Care		Drovider C	are DRelative In	formal Provid	der Care	
Type of Care (check one):	Non-relative Info	ormal Provider C				
Provider Information	State State State			Provider	ID: 570491	
First Name: Danaysia Last Name: Wallace Provider ID #:				Email:		
Care Location Inspected Street Address: Address Verified?: Yes	<u>City</u> :	County:	<u>State</u> :	Zip	Code:	
	(heboor if nooded)	Scholarship	Date of Birth	Age /	Present (Y/N)	
Name of Children in Care	(add pages if needed)		11/3/2013	11 years old	YW	
			11/23/2019	5 years old	Y	
			8/2/2017	7 years old	IY	
Safety of the Home Directions: Review	and determine complian	ice with each stan	dard. Note any comm Y - Yes, N - No, I	ents or correct	tive actions needed. d, n/a – Not Applicable	
Additional pages may be used for comments. Health and Safety Training:		Standard Met Y/N				
		Y				
Basic Health and Safety Training Completed? Home is free of health and safety hazards:		Standard Met Y/N	Comments Corrective	Action /Timeframe if needed		
	2		Y			
Is in good repair	rodent infestation		Y			
	Is free of insect or rodent infestation					

Is well-lit and well-vertilated	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 	1	
 Has protective coverings on any electrical outlet that is accessible to children 	Y	
Harmful items are stored appropriately and away from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
children:	Y	
Sharp or pointed items	Y	
Medications of any kind	Y	
Matches, lighters and flammable products	Y	
Alcoholic beverages	Y	
• Guns		
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	
All areas of the finance inspection Checklist 2020-03-26	Page 1 of 3	

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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.		
Handwashing 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	

Emergency Ready-to-Go Pack	Emero	ency	Ready-to	-Go	Pack
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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	Selder or binder for EPP documents
⊠Batteries	⊠Non-perishable food	Backpack(s) or carrying case(s)
Portable First Aid Kit	Diapers- N/A	Consider special toys or games
⊠ Thermometer	Change of clothes	Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags
□Medications-N/A	⊠Blanket(s)	

MSDE OCC Informal Care Inspection Checklist 2020-03-26

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Items in the Direct Day
Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)? Yes
Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Yes
Location of Emergency Ready to go Pack: Hallway 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:
First Name Last Name
Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location:
Shelter In Place Procedures:
The Provider will gather the ready to go bag and the children, will <u>call</u> parent before, during and after sheltering.
Evacuation Procedures:
The Provider will gather the children and the ready to go bag, the children will be holding each other's hands. The provider will
parent before, during and after sheltering.
parent belore, during and alter sheltering.
The Provider will gather the children and the ready to go bag, secure to the 2 older children in seatbelts and the youngest in a booster seat. The provider will
(1 doors, 0 window(s)). The provider will <u>call</u> parent before, during and after sheltering.
CARE HOURS:
Signatures & Date

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

PROVIDER	INSPECTOR		
Printed Name: Danaysia Wallace	Printed Name:		
Signature:	Signature:		
Date: 1/10/25 Phone:	Date: 1/7/2025 Phone: 1-877-227-0125		

⊠Virtual Inspection □In-person Inspection	lucation/Office of ip Program ARE ECKLIST	of Child Return to: ccs.informalproviders@maryland.gov				
Inspection Date: 11/25/2024	Time	e In: 3:30 PM	Time Out: 4:28 P	M Re	sult: Pas	sed
Informal Care					Stell .	
Type of Care (check one):	□ Non-relative Inf	ormal Provider C	are ⊠Relative	Informal	Provider	Care
Provider Information				intorna	Tiondor	
First Name: Pamela	Last	Name: Wallace		Pro	ovider ID:	: 566758
Provider ID #		Name: Wanace		Email:		
Care Location Inspected					September 1	
Street Address: Address Verified?: Yes	<u>City</u> :	County			State:	Zip Code: 2014
Name of Children in Care (add pages if needed)	Scholarship	Date of Birth	Age	1	Present (Y/N)
			12/17/2021	2 years	s old/ N	
			12/07/2019	4 years	s old/ N	
Orfet of the lines					No. of Contraction	
Safety of the Home						
	and determine compliance y be used for comments					actions needed. /a – Not Applicable
Health and Safety Training:			Standard Met Y/N		ents/Not	es on /Timeframe if needed
Basic Health and S	afety Training Comple	ted?	Y			
Home is free of health and safety hazards:		Standard Met Y/N		ents/Not tive Acti	es on /Timeframe if needed	
Is in good repair			Y			A CONTRACTOR OF A CONTRACTOR A CONTR
Is free of insect or rodent infestation		Y		antoning, which is and the		
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			-
	safe heating system		Y	-		· · · · · · · · · · · · · · · · · · ·
Has a working refri	The data second s	×	Y			
Has a working tele			Y			
Has operational sm			Y			
Has first aid kit/sup	and a second sec		Y			
 Has protective cover accessible to children 	erings on any electrica ren	I outlet that is	Y			
Harmful items are stored a children:	Harmful items are stored appropriately and away from				ents/Note	95 on /Timeframe if needed
Sharp or pointed it	ems	n al de la composition de la compositio	Y		•	areas at the second
						a an
	and flammable product	S	Y			
Alcoholic beverage			Y			
Guns			Y			
Cleaning agents	A second s		Y			
Poisonous substar	nces		Y			
GENERAL CLEANLINESS	STANDARDS		Standard Met Y/N		ents/Note tive Actio	es on /Timeframe if needed
All areas of the home are ke	ept clean, including dia	pering area.	Y			

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

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

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Items in the Disaster Supply Kit a	are clean, organized	I, and usable (Y/N)?	'Yes	
Emergency Ready-to-Go Pack is	available and easi	y accessible in the	event of an emergency (Y/N)? Ye	es
Location of Emergency Ready	to go Pack: Dinin	g room cabinet		
Emergency Documents				
Informal Provider Emerg	gency Preparedne	ss Plan (this comp	eted form)	
⊠Authorization for emerge	ency medical care			
Planning and Maintenance				
Person responsible for updating t	the Disaster Supp	ly Kit and the Eme	rgency Documents regularly:	
First Name Pamela		ast Name Vallace		
Description of how the Emergence	cy Ready-to-Go Pa	ack will be transpo	rted to an evacuation location:	
Shelter in Place Procedures:				
call the parent before shelterin	nd text during/aft fren and the ready	er sheltering. to go bag <u>, the two</u> a/after sheltering.	<u>o children will be holding eac</u> (1	<u>0 window(s))</u> . The provider will <u>call</u> <u>ch other's hand</u> . The provider will <u>doors, window(s))</u> . The provider will
CARE HOURS:	n a booster seat.	The provider will	them to the car securing the	youngest child in forward facing fore sheltering and text
Signatures & Date	THE CARE AND			
Acknowledgement: By signing belo been discussed. The parties also a pop up visit which will be conducted	acknowledge that, i	f approved, the hom		
PRO	VIDER		IN	SPECTOR
Printed Name: Pamela 1	Nallace		Printed Name:	
Signature			Signature:	
Date: 11-25-24 P	hone:		Date: 11/25/2024	Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection		Care Care Care Care Scholarsh	ip Program ARE	Child	Return f ccs.info	to: rmalproviders@maryland.gov
Inspection Date: 11/12/2024	Time	In: 4:00PM	Time Out: 5:06	PM Re	sult: Pass	ed
Informal Care				-		
Type of Care (check one):	Non-relative Info	rmal Provider C	are Relative	Informal	Provider (Care
Provider Information						
First Name: Christal Provider ID #:	Last	Name: Walters			ovider ID: nail:	361614
Care Location Inspected						
Street Address: Address Verified?: Yes	City:	Cou	Inty: State	<u>e:</u>	Zip Cod	<u>e</u> :
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	1	Present (Y/N)
			8/31/2012	12 yea	rs old/ Y	
			6/23/2017	7 years		
			5/10/2020	4 year	old/ Y	
Safety of the Home					57255	
Directions: Review ar	nd determine compliance	with each stand				
	be used for comments.		Y – Yes, N – No, Standard Met		ents/Notes	
Health and Safety Training:			Y/N	Correc	tive Actio	n /Timeframe if needed
Basic Health and Sa	fety Training Complete	d?	Y	0.000		
Home is free of health and s	safety hazards:		Standard Met Y/N		ents/Notes tive Action	s n /Timeframe if needed
 Is in good repair 			Y	_		
 Is free of insect or ro 	dent infestation		Y			
 Is well-lit and well-vell 			Y			
 Has hot and cold run 	-		Y			
Has a working inside			Y			
	ing, lighting and heating	9	Y	-		
Has a working and s			Y	_		
Has a working refrig			Y	-		
Has a working telep			Y Y			
Has operational smo Has first aid kit/supp			Y			
	rings on any electrical o	outlet that is				
accessible to childre	'n		Y	-	1	
Harmful items are stored ap children:	opropriately and away	from	Standard Met Y/N		nts/Notes	/Timeframe if needed
Sharp or pointed iter	ms		Y			
Medications of any k	kind		Y			
 Matches, lighters an 	d flammable products		Y			
 Alcoholic beverages 			Y			
Guns			Y			
Cleaning agents			Y			
 Poisonous substance 	es		Y			
GENERAL CLEANLINESS S	TANDARDS		Standard Met Y/N		nts/Notes	/Timeframe if needed
			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	

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

MSDE OCC Informal	Care Inspection	Checklist 2020-03-26	

Items in the Disaster Supply Kit are clean, organized, and u	sable (Y/N)? Yes	
Emergency Ready-to-Go Pack is available and easily access	ssible in the event of an emergency (Y/N	? Yes
Location of Emergency Ready to go Pack: By the front Item Specification (if needed): * <u>To be observed for compliance on</u> : *	door	
Emergency Documents		
⊠Informal Provider Emergency Preparedness Plan	(this completed form)	
Authorization for emergency medical care		
Planning and Maintenance	en de la complete de	
Person responsible for updating the Disaster Supply Kit ar	nd the Emergency Documents regularly	<i>I</i> :
First Name Last Na	me .	
Description of how the Emergency Ready-to-Go Pack will	he transported to an evacuation location	n.
Shelter In Place Procedures:	be transported to an evacuation location	лт.
The Provider will gather the ready to go bag and the childr provider will <u>call/text the parent before, during and after</u> <u>Evacuation Procedures:</u> The Provider will gather the children and the ready to go b <u>middle child in a booster seat and the youngest in a for</u> <u>parent before, during and after sheltering</u> . The Provider will gather the children and the ready to go b <u>middle child in a booster seat and the youngest in a for</u> <u>sheltering</u> . <u>CARE HOURS</u> :	r sheltering. ag <u>, taking them to the car securing</u> <u>prward facing car seat</u> . The provider v <u>the securing</u> r(# of doors, # of window ag, taking them to the car securing	vill <u>(v(s))</u> . The provider will <u>call/text the</u> the oldest child in a seat belt, the vill
Signatures & Date		
Acknowledgement: By signing below the parties acknowledge been discussed. The parties also acknowledge that, if approv pop up visit which will be conducted virtually or in-person.		
PROVIDER		INSPECTOR
Printed Name: Christal Walters	Printed Name:	
Signature:	Signature:	μ
Date: 11-12-2024 Phone:	Date: 11/12/2024	Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection	Chi	Department of E Care Id Care Scholars INFORMAL C NSPECTION CH	ARE	Child	Return ccs.inf		viders@maryland.gov
Inspection Date: 9/30/2024	Tir	ne In: 2:00 PM	Time Out: 3:00 F	M Re	sult: Foll	ow Up Ne	eeded
Inspection Date: 10/01/2024	Tir	ne In: 2:30 PM	Time Out: 3:00 F			ow Up Ne	
Inspection Date: 10/03/2024	Tir	ne In: 2:14 PM	Time Out: 2:26 F		sult: Pas		
Informal Care							
Type of Care (check one):	D Non-relative I	nformal Provider C	are Relative	Informal	Provider	Care	
Provider Information							
First Name: Susan	La	st Name: Wartmar	1	Pro	vider ID	563536	
Provider ID #:	· · · · · · · · · · · · · · · · · · ·			Em	ail:		
Care Location Inspected					-		
Street Address: Address Verified?: Yes	<u>City</u> :	Count	Σ:		State:		Zip Code:
Name of Children in Care (a	dd pages if needed)	Scholarship	Date of Birth	Age	1	Preser	nt (Y/N)
			6/8/2024	3 mont	hs/Y		1.1.1
Safety of the Home							
Health and Safety Training:		otod?	Standard Met Y/N		ents/Note		rame If needed
Basic Health and Sa	fety Training Compl	eted?	Y	-			
Home is free of health and s	safety hazards:		Standard Met Y/N		ents/Note tive Action		rame if needed
Is in good repair			Y	-			
Is free of insect or ro			Y	-			
Is well-lit and well-ve			Y				
Has hot and cold run Has a working inside	•		Y	-			
	Concernance and the second sec	tina		1			
Has utilities for cooki Has a working and s		ung	Y	-			
Has a working refrige			Y	1			
Has a working teleph			Y	1			
 Has operational smo 			Y	1			
Has first aid kit/supp			Y	-			
Has protective cover accessible to children	ings on any electrica	al outlet that is	Y				
Harmful items are stored ap children:	propriately and aw	ay from	Standard Met Y/N	Commen		and the second second	ame If needed
Sharp or pointed iten	ns		Y				
 Medications of any k 			Y				
 Matches, lighters and 	d flammable product	s	Y	1			
Alcoholic beverages	A. 1		Y				
Guns			Y				
Cleaning agents			Y				
 Poisonous substance 	es		Y			-	
GENERAL CLEANLINESS S	TANDARDS		Standard Met Y/N	Correcti	a second to the second		ame if needed
All areas of the home are kep	t clean, including dia	apering area.	Y				
ASDE OCC Informal Care Inspectio	n Checklist 2020-03-26		Page 1 of 3				

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 	¥	
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.

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

	ble and easily accessible in	the event of an emergency (Y	//N)? Yes
Location of Emergency Ready to go I	Pack: Hall Closet		
Item Specification (if needed):			
	a contra a		
To be observed for compliance on 10 Doorknob safety locks	0/01/2024 :		
Outlet covers			
- Cooking knives			
o be observed for compliance on 10/0	3/2024 :		
Locks for the gun case			
mergency Documents			
⊠Informal Provider Emergency F	Preparedness Plan (this co	mpleted form)	
Authorization for emergency m			
lanning and Maintenance			
Person responsible for updating the Dis	aster Supply Kit and the E	mergency Documents regul	arly:
irst Name Jusan	Last Name Wartman		
	bag and the child		1 doors, 0 window(s)). The provide
he Provider will gather the ready to go vill <u>call parent before/after sheltering</u> <u>evacuation Procedures:</u> The Provider will gather the child and the rovider will <u>call parent before/after si</u> the Provider will gather the child and the rovider will <u>call parent before/after</u>	and text the parent duri ne ready to go bag <u>, taking</u> neltering and text the par ne ready to go bag <u>, taking</u>	them to the car, securing rent during sheltering. them to the car, securing	the child in an infant car seat. The The the child in an infant car seat. The
he Provider will gather the ready to go vill <u>call parent before/after sheltering</u> vacuation Procedures: The Provider will gather the child and the rovider will <u>call parent before/after si</u> the Provider will gather the child and the rovider will <u>call parent before/after</u>	and text the parent duri ne ready to go bag <u>, taking</u> neltering and text the par ne ready to go bag <u>, taking</u>	them to the car, securing rent during sheltering. them to the car, securing	the child in an infant car seat. The The the child in an infant car seat. The
he Provider will gather the ready to go ill <u>call parent before/after sheltering</u> <u>vacuation Procedures:</u> he Provider will gather the child and the rovider will <u>call parent before/after si</u> he Provider will gather the child and the rovider will <u>call parent before/after si</u> he provider will <u>call parent before/after</u> he provider will <u>call parent before/after</u>	and text the parent duri ne ready to go bag <u>, taking</u> <u>heitering and text the par</u> ne ready to go bag <u>, taking</u> <u>her sheltering and text the</u> parties acknowledge that all ledge that, if approved, the h	them to the car, securing rent during sheltering. them to the car, securing a parent during sheltering. standards have been reviewe	the child in an infant car seat. The The the child in an infant car seat. The d, and any corrections if needed have
he Provider will gather the ready to go ill <u>call parent before/after sheltering</u> vacuation Procedures: he Provider will gather the child and the rovider will <u>call parent before/after si</u> he Provider will <u>call parent before/after si</u> he provider will <u>call parent before/after</u> he pro	and text the parent duri the ready to go bag <u>, taking</u> the ready to go bag <u>, taking</u>	them to the car, securing rent during sheltering. them to the car, securing a parent during sheltering. standards have been reviewe	the child in an infant car seat. The The the child in an infant car seat. The d, and any corrections if needed have
The Provider will gather the ready to go will <u>call parent before/after sheltering</u> Evacuation Procedures: The Provider will gather the child and the provider will <u>call parent before/after si</u> the Provider will gather the child and the provider will <u>call parent before/after si</u> the provider will <u>call parent before/after</u> the provid	and text the parent duri the ready to go bag <u>, taking</u> the ready to go bag <u>, taking</u>	them to the car, securing rent during sheltering. them to the car, securing a parent during sheltering. standards have been reviewe	the child in an infant car seat. The d, and any corrections if needed have d is subject to random, unannounced
Schelter In Place Procedures: The Provider will gather the ready to go Scale parent before/after sheltering Evacuation Procedures: The Provider will gather the child and the provider will call parent before/after sheltering The Provider will gather the child and the provider will call parent before/after sheltering The Provider will gather the child and the provider will call parent before/after sheltering CARE HOURS: - Signatures & Date Nethod Scale State PROVIDER Printed Name: Signature:	and text the parent duri the ready to go bag <u>, taking</u> the ready to go bag <u>, taking</u>	them to the car, securing rent during sheltering. them to the car, securing a parent during sheltering. standards have been reviewe nome in which care is provided	the child in an infant car seat. The The the child in an infant car seat. The d, and any corrections if needed have d is subject to random, unannounced

⊠Virtual Inspection □In-person Inspection	Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST			f Child Return to: ccs.informalproviders@maryland.g
Inspection Date: 10/3/2024	Time	In: 1:30pm	Result: Passed	
Informal Care				
Type of Care (check one):	Non-relative Info	rmal Provider C	are ØRelative	e Informal Provider Care
Provider Information	and the second second			
First Name: Bessie	Last Name: Washingto			Provider ID: 519234
Provider ID #:			Email:	
Care Location Inspected				
Street Address: Address Verified?: Yes	Cit	Υ;	County:	State: Zip Code:
Name of Children in Care (a	dd pages if needed)	Scholarship	Date of Birth	Age / Present (Y/N)
			12/7/2021	2yrs/Y

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?	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		
 Has operational smoke detector(s) 	Y		
 Has first aid kit/supplies 	Y		
 Has protective coverings on any electrical outlet that is accessible to children 	Y		
Harmful items are stored appropriately and away from children:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed	
 Sharp or pointed items 	Y		
 Medications of any kind 	Y		
 Matches, lighters and flammable products 	Y		
 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	
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 	*	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	Y	

Emergency Ready-to-Go Pack

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

Disaster Supply Kit

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

⊠ Flashlight

⊠Batteries

Portable First Aid Kit

Bottled water

⊠Non-perishable food

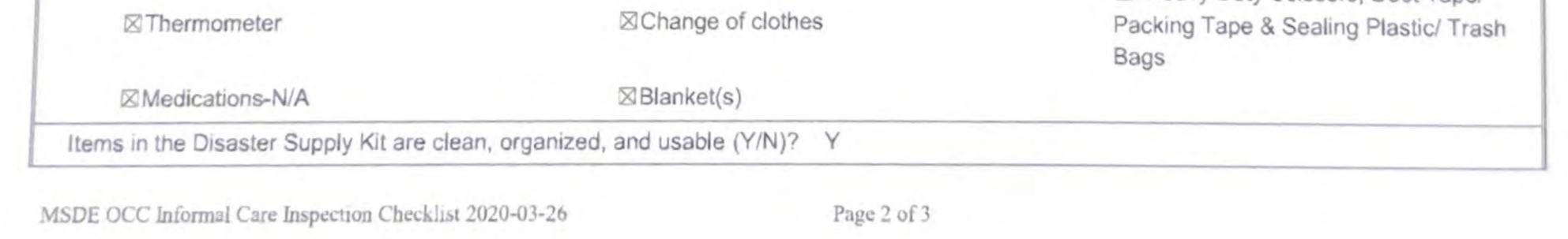
⊠Diapers

⊠Folder or binder for EPP documents

Backpack(s) or carrying case(s)

⊠Consider special toys or games

Heavy Duty Scissors, Duct Tape/



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: Closet floor

Item Specification (if needed):

To be observed for compliance on :

Emergency Documents

.

SInformal Provider Emergency Preparedness Plan (this completed form)

Authorization for emergency medical care

Planning and Maintenance	
Person responsible for updating t	e Disaster Supply Kit and the Emergency Documents regularly:
First Name Bessie	Last Name Washington
Description of how the Emergence	Ready-to-Go Pack will be transported to an evacuation location:
Shelter In Place Procedures:	

40 af wind aw/all

The Provider will gather the ready to go bag and the children, tak The provider will <u>contact</u> parent before, during and after sheltering		IIdow[3]].
Evacuation Procedures:		
The Provider will gather the children and the ready to go bag, the provider will travel to the evacuation location doors, #2 of window(s)). The provider will contact parent before	gaining access by	t. The (#1 of
The Provider will gather the children and the ready to go bag, the provider will travel to the evacuation location gaining a (#0 of doors, #0 of window(s)). The provider will con	access by shelter in	The
<u>CARE HOURS</u> : - Monday-Friday 7:30am-5pm		
- Monday-Friday 7:30am-5pm		
 Monday-Friday 7:30am-5pm Signatures & Date Acknowledgement: By signing below the parties acknowledge that all been discussed. The parties also acknowledge that, if approved, the 		
 Monday-Friday 7:30am-5pm Signatures & Date Acknowledgement: By signing below the parties acknowledge that all been discussed. The parties also acknowledge that, if approved, the 		
Signatures & Date Acknowledgement: By signing below the parties acknowledge that all been discussed. The parties also acknowledge that, if approved, the pop up visit which will be conducted virtually or in-person.	home in which care is provided is subject to random, unannounce	

Phone: Date: 10/3 2024

MSDE OCC Informal Care Inspection Checklist 2020-03-26

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	ov		
ime Out: 11:22AM	Result: PASSED		
Relative Infor	mal Provider Care		
n	Provider ID: 519234		
Email:			
y :	State Zip Code:		
Date of Birth	Age / Present (Y/N)		
(12/07/2021) 1y	r. / N		
comments or correct	ive actions needed. Additional iscussed, n/a – Not Applicable		
Standard Met Co	mments/Notes rrective Action /Timeframe if needed		
and the second	Relative Informal Care – Certificate Submit		
	mments/Notes rrective Action /Timeframe if needed		
Y	All areas were clean		
Y	No evidence of infestation		
Y	All lights were turned on and natural window lighting		
Y	Tested by provider and steam observed on camera		
Y	Flushed by provider and observed		
Y			
1	Thermostat tested by provider for cooling & heating		
Y	Tested by provider and observed		
Y	Outbound call made to provider's phone		
Y	Tested by provider and observed		
Y	First aid kit stored in bathroom closet		
Y	All outlets covered or occupied		
	ments/Notes rective Action /Timeframe if needed		
Y	Stored on back of kitchen counter		
Y	Moved to higher level in bathroom closet		
Y	Does not own		
Y	Does not own		
Y	Does not own		
	Stored in higher level shelf in laundry room		
Y	Does not own		
Y/N Corr	ments/Notes rective Action /Timeframe if needed		
Y Y Y tandard Met	Com		

Revised 10/2021

Trash, garbage and wet and soiled diapers are disposed of in sanitary manner.	Y	Diapers taken out daily in small plastic ba
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 near chang area
 Handwashing procedures are followed. Provider and child's washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread disease. 	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDA	ARDS Standard Met 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 circumstat that indicate that the child's health or welfare is harm placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mentatinjury that is caused by the failure to give proper care attention to a child. 	ances ned or Y al	
 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 abuneglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services U	Y	
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily acce needed medications) and Emergency Documents.	essible in the event of an emo	ergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit		
Directions: Review and determine that each item is adequately includ enough supplies for each child in care. Also the items are clean, organ	led in the Disaster Supply Ki nized, and usable. Comment	t. Be certain that the Disaster Supply Kit contains t and note below if needed.
Sector Se		SFolder or binder for EPP documents
⊠Batteries for Flashlight ⊠Non-pe	rishable food	\boxtimes Backpack(s) or carrying case(s)
⊠Portable First Aid Kit ⊠Diapers	3	Consider special toys or games
⊠ Thermometer ⊠Change	e of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
⊠Medications ⊠Blanket	i(s)	
Items in the Disaster Supply Kit are clean, organized, and usable	e (Y/N)? Y	
Emergency Ready-to-Go Pack is available and easily accessible		ency (Y/N)? Y

Location of The Emergency Ready to go Pack	Stored in hallway closet near exit
Location et al	

(hob

Item Specification (if needed). 1 backpack (carrying case), 2 flashlights	1 pk of AA batteries, 1 first aid kit, 1 thern	nometer, no spec meds, 1 juice, 1 canned fod, ottom), 1 book, 1 pair scissore, 1 have fod.
1 dried food, 2 bottled waters, 3 diapers duty trash bags, 1 roll of duct tape, and f	folder with EPP and ECMA	ottom), 1 book, 1 pair scissors, 1 box of heavy
Items to be reviewed on xx/xx/xxxx: N/A		
Emergency Documents		
SInformal Provider Emergency Prepared	dness Plan (this completed form)	
⊠Authorization for emergency medical can	are	
Planning and Maintenance	LA LAND MANAGER	ulastu:
Planning and maintenance Person responsible for updating the Disaster Su	ipply Kit and the Emergency Documents reg	urany.
First Name	Last Name Washington	
Bessie Description of how the Emergency Ready-to-Go	Pack will be transported to an evacuation le	ocation: carried by the provider.
Mergency updates.	(s) for shelter. Once they are secured and se	d ERTG. The provider will secure the child in or receive alternate instructions of where
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	hat, if approved, the home in which care is pro	viewed, and any corrections if needed have by ided is subject to random, unannounced
PROVIDER	Market and States and States	INSPECTOR
Printed Name: Bessie Washin	gton Printed Name:	et al along a station of the second
Signature	Signature:	and the second
Date: 07-27-2023 Phone:	Date: 07/14/2023	Phone: 1-877-227-0125

J

Mar EVintual Inspection Clin-person Inspection	Child	State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST			Return to: ccs.informalproviders@maryland.gov		
Inspection Date: 10/22/2024	Time	Time In: 3:30pm Time Out: 4:30pm		n Res	Result: Passed		
Informal Care							
Type of Care (check one):	on-relative Inh	ormal Provider C	are IRelative	Informal F	Provider Care		
Provider Information							
First Name: Linda	Last	Last Name: Washington		Provider ID: 565321			
Provider ID #:				Email:			
Care Location Inspected							
Street Address: Address Venified?: Yes	<u>City</u> :	C	ounty:		State:	Zip Code:	
Name of Children in Care (add page	s if needed)	Scholarship	Date of Birth	Age	/ Pre	sent (Y/N)	
			12/30/2017	Gyrs/ Y			
			3/12/2019	5yrs/Y			
			3/12/2019	5yrs/Y			
			5/14/2021	3yrs/Y			
			9/27/2023	1yrs/Y			

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 Salety 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			
 Has operational smoke detector(s) 	Y			
 Has first aid kit/supplies 	Y			
 Has protective coverings on any electrical outlet that is accessible to children 	Y			
Harmful items are stored appropriately and away from children:	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
 Sharp or pointed items 	Y			
 Medications of any kind 	Y	n of the first of the second second I I I I I I I I I I I I I I I I I I I		
 Matches, lighters and flammable products 	Y			
Alcoholic beverages	Y			
• Guns	Y			
 Cleaning agents 	Y	N N		
 Poisonous substances 	Y			

and the second second second second

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.	¥	
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. 	¥.	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 		
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services Unit.	¥	

Emergency Ready-to-Go Pack

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

Disaster Supply Kit

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

Flashlight

Bottled water

Section Folder or binder for EPP documents

Batteries

Portable First Aid Kit Thermometer Mon-perishable food

Change of clothes

Backpack(s) or carrying case(s)

Consider special toys or games

Heavy Duty Scissors, Duct Tape/

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Packing Tape & Sealing Plastic/ Trash Bags RMedications-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 Emergency Ready to go Pack: Hallway Closet Item Specification (if needed): 1 To be observed for compliance on : -**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 Kit and the Emergency Documents regularly: First Name Linda Last Name Washington Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location: Shelter In Place Procedures:

The Provider will gather the ready to go bag and the children, take them to sheltering location window(s)). The provider will contact parent before, during and after sheltering.

(#1 of doors, #0 of

and the second se	window(s)). The provider will contact parent before, during and after sheltening.
	Evacuation Procedures:
	The Provider will gather the children and the ready to go bag, they will be traveling The provider will <u>travel to</u> The provider will <u>travel to</u> The provider will contact parent before, during and after sheltering
	The Provider will gather the children and the ready to go bag, they will be traveling The provider will gather the children and the ready to go bag, they will be traveling The provider will travel to gaining access by #1 of doors, #0 of window(s)). The provider will contact parent before, during and after sheltering
	CARE HOURS: - Monday-Friday 5:30am-6:30pm
The second s	Signatures & Date
Contraction of the local division of the loc	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		INCOLOTION
Printed Name: KINDA LEE Mashington	Printed Name:	INSPECTOR
Signature:	Signature:	
Date: 10/22/24 Phone:	Date: 10/22/2024	Phone: 1-877-227-0125

MSDE OCC Informal Care Inspection Checklist 2020-03-26

Page 3 of 3

INFORMAL CHILD CARE INSPECTION REPORT

INSPECTION DATE/TIME/DURATION: 04-04-2025/3:29pm/61 minutes	INS	PECTION TYPE		AGES	Total Approved	# Scholarship	# Present	Resident Children
APPLICANT ID:	~	Initial Application]	0-23 months	I	I	I	
-		Renewal Application	-	2 year olds				
		Complaint Investigation	-	3 year olds				
PROVIDER ID: 576283		Monitoring	-	4 year olds				
APPLICATION DATE:		Other		5's (pre-school)				
02/27/2025]	5-12 (school age)				
COUNTY:		Follow-Up	13-19 year olds					
Calvert County				TOTAL	I	I	I	
				Overnight				

FATALITY: N/A	SERIOUS INJURY:	COMPLAINT #: N/A		
INFORMAL PROVIDER PHOTO ID VERIFIED:	Yes No	ID TYPE: Provisional Driver's License	EXP. DATE: I 1/22/2024	
CARE LOCATION: O Child's Home Informal Child Care Provider's Home				
CARE TYPE: Relative Informal Child Care Non-Relative Informal Child Care				
INFORMAL PROVIDER NAME: Nakisha Washington				
PERSON(S) INTERVIEWED: Nakisha Washington				

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

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

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

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

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

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

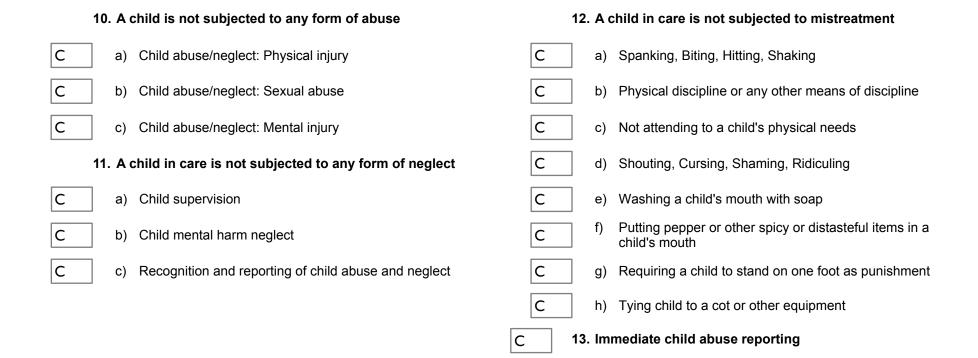
All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

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Part 3 – Child Abuse, Neglect and Mistreatment Standards



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Part 4 – Vehicular Traffic and Transportation Safety



Part 5 – Outdoor Activity Area

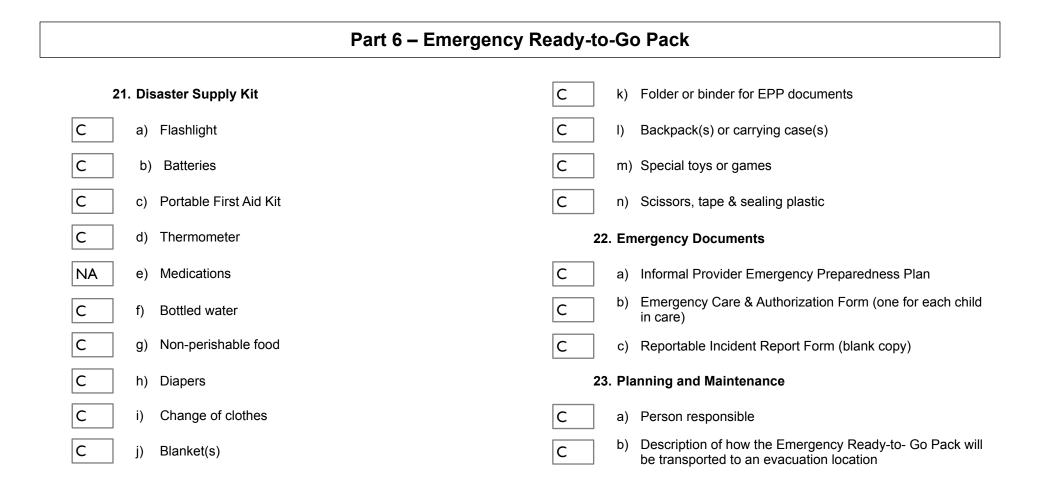
17. Safe outdoor play area С 20. Pool Safety C С a) 4 ft. fence that surrounds the pool 18. Enclosed safe play area b) Self-closing and self-latching mechanism on the С 19. Traffic and congested areas assessment С entry/exit way С c) Secured Lock С d) Sensor or alarm on the access door

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

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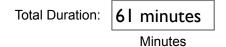
Part 7 – Health & Safety Review					
C 24. Shelter in Place	C 31. Health & Safety Review: Premises safety, hazard protection				
C 25. Lockdown (partial & full)	C 32. Emergency response planning				
26. Home is free of health and safety hazards	C 33. Food allergy emergency preparedness				
C a) Primary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

consistent with standards for parental consent



Time Out:	04/04/2025	16:31
	Date	Tim

Date	Start Time	End Time	Duration	Follow-Up
04/04/2025	15:29	16:31	61 minutes	



SUMMARY OF CORRECTION

PROVIDER ID:	APPLICANT ID:	ZIP CODE:	COUNTY:		
576283	-	20657	Calvert County		
INFORMAL PROVIDER NAME:		CARE LOCATION:			
Nakisha Washington		Child's H	ome Informal Child Care Provider's Home		
PERSON(S) INTERVIEWED:					
Nakisha Washington					
VISIT TYPE:		INSPECTION TIME/DATE/DURATION:			
Initial Application		3:29pm/04-04-2025/61 minutes			

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

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

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

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

Inspection Date: 2/28/2025 Time In: 1:30pm Time In: 1:30pm Time In: 1:30pm Time Informal Care Type of Care (check one): Non-relative Informal Provider Care Provider Information First Name: Skyleur Provider Information First Address: Care Location Inspected Street Address: Address Verified?: Yes Name of Children in Care (add pages if needed) Scholarship Directions: Review and determine compliance with each standard. N Additional pages may be used for comments. Y - N Health and Safety Training: Basic Health and Safety Iraining Completed? Home 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 not and cold running water Has a working inside toilet Has a working refrigerator and stove Has a working refrigerator and stove Has a working refrigerator and stove Has a working telephone Has protective coverings on any electrical outlet that is accessible to children	e Out: e Out: Relative Relative County: ate of Birth 2/26/2015 1/13/2019 ote any comme es, N – No, D andard Met Y/N Y Y Y Y Y Y Y Y Y Y Y	Result Informal Provide Email Provide Email Syrs/ N 5yrs/ N 5yrs/ N comment Corrective	der ID: 57	re 73815 Present (Dons need Not App Timefran	ed.
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Harmful items are stored appropriately and away from	Y	1			
children:	ndard Met Y/N	Comments Corrective		imefram	e if needed
Sharp or pointed items	Y				A VIRGINIA CONTRACT
Medications of any kind	Y				
Matches, lighters and flammable products	Y		TO SOL PROVIDE		ne etimoso
Alcoholic beverages	Y				Ideal days 400
Guns	Y				minute a la
Cleaning agents	Y				
Poisonous substances	Y				E. Davinghan E.
GENERAL CLEANLINESS STANDARDS Standards All areas of the home are kept clean, including diapering area.	ndard Met	Comments			ElPedable Fi

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Education/Office of Civild	Papadment m	US Energies
rash, garbage and wet and soiled diapers are disposed of in a anitary manner.	Y	Cin-parson
hild is changed immediately when s/he has a soiled or wet appendix	Y	nditestant
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andwashing procedures are followed. Provider and child's hands ashed thoroughly with soap and warm running water after: • Toileting;		entormal Care
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 At other times when necessary to prevent the spread of disease. 	nitteV. one Alatin	First Name: Skylaur Provider ID, & W-325-768-744-721
HILD 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 	Y	<u>Pictoress Verified 7</u> Yee Name of Children in Chry (odd paper If gelden Sage Hill
child in care is not subjected to any form of neglect, cluding:		Journale Gordan
The failure to give proper care and attention to a child including leaving a child unattended under circumstances		Gafely of the Home
 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 	Y	Directions: Review and determine Comple Additional pages may be used for comme
injury that is caused by the failure to give proper care and attention to a child.		Health and Cafety Training:
child in care is not subjected to mistreatment, including:		Barbar Menth and Barbar Parising David
 Any deliberate act that hurts a child physically or emotionally, including: 		Home is tree of health and balaky lyzarder
Spanking, Biting, Hitting, Shaking		is in good repair
 Any other means of physical discipline Not attending to a child's physical needs 		 In free of insect or rodent intribution
Shouting, Cursing, Shaming, Ridiculing	Y	beleithev liew bris li-liew et
Washing a child's mouth with soap	Market and the second	Has hat and cold naming writer
 Putting pepper or other spicy or distasteful items in a child's mouth 		 Has a working inside todat
Requiring a child to stand on one foot as punishment	Den C prier	it with Him utilities for coolding, lighting and he
Tying child to a cot or other equipment	1.000	
e provider immediately reports any suspected child abuse,		· making the lighted protocol and store
glect or mistreatment by calling 911 and your local		
epartment of Social Services Child Protective Services	Y	
<u>nit</u> .		
	a ten range	- The provide the operating of any second

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

MSDE OCC Informal Care Inspection Checklist 2020-03-26

STOR OOD Informal Oare Europerizati Chiedelia 2020-03

Items in the Disaster Supply Kit are clean, organi	zed, and usable (Y/N)? Y
Emergency Ready-to-Go Pack is available and e	asily accessible in the event of an emergency (Y/N)? Y
Location of Emergency Ready to go Pack: fro	ont closet
Item Specification (if needed):	
• To be observed for compliance on 2/28/2025	@ 1:30pm :
Smoke detector	
Alcohol wipes	
Emergency Documents	
☑ Informal Provider Emergency Prepared	ness Plan (this completed form)
Authorization for emergency medical ca	
Planning and Maintenance	
	pply Kit and the Emergency Documents regularly:
First Name Skyleur	Last Name Watkins
Description of how the Emergency Ready-to-Go	Pack will be transported to an evacuation location:
Shelter In Place Procedures:	
The Provider will gather the ready to go bag and will <u>contact</u> parent before, during and after shell	
Evacuation Procedures:	
The Provider will gather the children and the rea The provider will travel to	location gaining access by to
shelter in #1 of doors, #4 of w	rindow(s)). The provider will contact parent before, during and after sheltering
The Provider will gather the children and the rea	dy to go bag, they will be traveling by children secured
and The provider will tra	vel to gaining access by the to shelter in provider will contact parent before, during and after sheltering
#2 of doors, #3 of window(s)]. The	stowder will contact parent before, during and alter snekering
CARE HOURS: - Monday, Tuesday and Wednesday 7:	:00pm-7:00am
Signatures & Date	
	knowledge that all standards have been reviewed, and any corrections if needed have
been discussed. The parties also acknowledge that pop up visit which will be conducted virtually or in-p	t, if approved, the home in which care is provided is subject to random, unannounced
	NIGSTOTO D

PROVIDER	INSPECTOR			
Printed Name: SKY leur Watkins	Printed Name:			
Signature:	Signature:			
Date: 311/2025 Phone:	Date: 2/28/2025	Phone: 1-877-227-0125		

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⊠Virtual Inspection □In-person Inspection	Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST				Return to: ccs.informalproviders@maryland.gov	
Inspection Date: 2/27/2025	Tim	e In: 1:30pm	Time Out:	Res	sult: Follow Up	Dispering procedures
Inspection Date: 2/28/2025	Tim	e In: 1:30pm	Time Out:	Res	sult: Passed	Handreshing process
Informal Care						
Type of Care (check one):	on-relative In	formal Provider	Care ⊠Relative	Informal I	Provider Care	Diapering
Provider Information		Contraction of the second		mattes	then nolveusound	Before rood
First Name: Skyleur	Last	Name: Watkins	ame: Watkins Provider ID: 57381			5
Provider ID #:	240	rianio. Francis		Em	ail:	
Care Location Inspected	-invited in	and the second				
Street Address:	53	City:	County	<i>L</i> :	State	Zip Code:
Address Verified?: Yes	N		velueling:	ni ,esuda 1	t to any form o	A contra la not subjec
Name of Children in Care (add page	s if needed)	Scholarship	Date of Birth	Age	/ Prese	ent (Y/N)
			3/26/2015	9yrs/ N		viujai lainekii *
			11/13/2019	5yrs/ N	a of hetpeldus.	A onlid in ours is not
Directions: Review and detern Additional pages may be used			Y-Yes, N-No,	D - Discus	ssed, n/a – Not	
Health and Safety Training:			Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Basic Health and Safety Tra	ining Complet	ted?	Y		and hada-idus	tes al mon el bligo A
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	king.	ing, Hilling, Sha	 Spanding, BR
 Is free of insect or rodent inf 	estation		Y	brilling	main of physical	Any other ma
Is well-lit and well-ventilated		Y	Y	em la statisti	primeria Shamina	s Shouting Cu
 Has hot and cold running water 	iter		Y	quon	rithe mouth with	· Washing a ch
Has a working inside toilet		200	e ni y neh luh	or distance	volge terlio to a	idded Bunnie
Has utilities for cooking, light	ting and heati	ng	Y	in tool and	no heads of hike	na onoluma
Has a working and safe heat			Y		a cot or other a	
Has a working refrigerator a	nd stove		Y			The provider (mmodia
Has a working telephone		1000	Y			nogleat or minimum
 Has operational smoke determined 	ctor(s)		Y	Parent o	changed the batte	ery during the inspection
Has first aid kit/supplies			Y			
Has protective coverings on accessible to children	any electrical	outlet that is	Y		019 0 D-01-1	Bruit y nemana
Harmful items are stored appropria children:	tely and awa	ly from	Standard Met Y/N	2000 C 2000 C 2000 C 2000	ts/Notes /e Action /Timef	rame if needed
Sharp or pointed items		Y			Distance Sumaly Kit	
Medications of any kind			Y			and another the
 Matches, lighters and flamm 	able products	annungo anada sig	Y	in ni birto r	ייוודמאיים למי מזומי	typone eninthop
Alcoholic beverages			Y			- Idolata - Iva
• Guns	-		Y			adaptin G iS
Cleaning agents			Y		101.00	Sectable Fire
Poisonous substances			Y			
GENERAL CLEANLINESS STANDA	RDS		Standard Met Y/N		its/Notes /e Action /Timef	

Statute of the second of the beauting of the second of the

Education Office of Ghild	Depártment el	and Energies and
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	Din-parson
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	indizection
Diapering procedures are followed.	Y	Increasion Date: 22 (1/2020
Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; 		Inspection Deter Scoreds Informal-Cate Type of Cate (check and) D Mon-relative
 Diapering; Before food preparation and eating; After playing outdoors; and 	Y	Provider Information
 At other times when necessary to prevent the spread of disease. 	nitteW.ener,Watkin	First Name: Skyleur Provider 10, #: W-325-768-744-721
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	Anno 1 Children In Care (add naped from the Ca
A child in care is not subjected to any form of neglect,		Journee Gorden
 The failure to give proper care and attention to a child including leaving a child unattended under circumstances 		Gafety of the Home
 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 	Y	Directions: Review and deterrings Compl Additional pages may be used for comme
injury that is caused by the failure to give proper care and attention to a child.		Henth and Estaty Training:
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: 		Basis Health and Seless Frances
Spanking, Biting, Hitting, Shaking		 Is in good repair
Any other means of physical discipline		In the of insect or rodent intertation
 Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing 	Y	belalinevilew brts lit-liew at
Washing a child's mouth with soap		· Has hot and cold ninning writer
 Putting pepper or other spicy or distasteful items in a child's mouth 		talict abiani prohow a sel-1 +
Requiring a child to stand on one foot as punishment	gner	(i) + i) Hits utilities for coolding, lighting and he
 Tying child to a cot or other equipment 		nelava grulenut ellar bris gruthine a alhi 👒
he provider immediately reports any suspected child abuse,		everys plote rotatedition thingtonic e source +
eglect or mistreatment by calling 911 and your local Department of Social Services Child Protective Services	Y	Has a working talaphone
Jnit.	Y	
Emergency Ready-to-Go Pack	a porter that is	a costa a las possiblementes a constructional estat

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

MSDE OCC Informal Care Inspection Checklist 2020-03-26

STOR OOD Informal Oare Europerizati Chiedelia 2020-03

Items in the Disaster Supply Kit are clean, organi	zed, and usable (Y/N)? Y
Emergency Ready-to-Go Pack is available and e	asily accessible in the event of an emergency (Y/N)? Y
Location of Emergency Ready to go Pack: fro	ont closet
Item Specification (if needed):	
• To be observed for compliance on 2/28/2025	@ 1:30pm :
Smoke detector	
Alcohol wipes	
Emergency Documents	
☑ Informal Provider Emergency Prepared	ness Plan (this completed form)
Authorization for emergency medical ca	
Planning and Maintenance	
	pply Kit and the Emergency Documents regularly:
First Name Skyleur	Last Name Watkins
Description of how the Emergency Ready-to-Go	Pack will be transported to an evacuation location:
Shelter In Place Procedures:	
The Provider will gather the ready to go bag and will <u>contact</u> parent before, during and after shell	
Evacuation Procedures:	
The Provider will gather the children and the rea The provider will travel to	location gaining access by to
shelter in #1 of doors, #4 of w	rindow(s)). The provider will contact parent before, during and after sheltering
The Provider will gather the children and the rea	dy to go bag, they will be traveling by children secured
and The provider will tra	vel to gaining access by the to shelter in provider will contact parent before, during and after sheltering
#2 of doors, #3 of window(s)]. The	stowder will contact parent before, during and alter snekering
CARE HOURS: - Monday, Tuesday and Wednesday 7:	:00pm-7:00am
Signatures & Date	
	knowledge that all standards have been reviewed, and any corrections if needed have
been discussed. The parties also acknowledge that pop up visit which will be conducted virtually or in-p	t, if approved, the home in which care is provided is subject to random, unannounced
	NIGSTOTO D

PROVIDER	INSPECTOR			
Printed Name: SKY leur Watkins	Printed Name:			
Signature:	Signature:			
Date: 311/2025 Phone:	Date: 2/28/2025	Phone: 1-877-227-0125		

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⊠Virtual Inspection □In-person Inspection	Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST					Return to: ccs.informalproviders@maryland. ov	
Inspection Date: 08/30/2023 Time In: 1:30PM Follow-up Inspection Date: 08/31/2023 Time In: 10:00AM				Time Out: 2:43PMResult:Time Out: 10:22AMFollow-		: Follow-up Required. -up Result: PASSED	
Informal Care		194					
Type of Care (check one):	Non-rel	ative Info	ormal Provider (Care □Relativ	e Informal Prov	vider Care	
Provider Information					1		
First Name: Angelia		Last	Name: Webste	er	Provide	er ID: <u>527003</u>	
Provider ID #:		S Party La			Email:		
Care Location Inspected Street Address: Address Verified? Yes.		City:	County		State Zip	Code:	
Name of Children in Care (a	idd pages if nee	eded)	Scholarship	Date of Birth	Age	Present (Y/N)	
		_		(01/06/2023)	7mos. / N		
				(08/31/2014)	8yr./ N		
				(05/08/2013)	13yr. / N		
Safety of the Home		A COLOR					
Directions: Review and determ bages may be used for comme	ine compliance	with eac	h standard. Note	any comments or o	corrective action	s needed. Additional , n/a – Not Applicable	
Health and Safety Training:			a and	Standard Met	Comments/	Notes	
Basic Health and Safety Train	ing Completed	1?		Y/N Y	Corrective Action /Timeframe if needed Non-Relative Informal Care – Certificate		
Home is free of health and s	afety hazards	s:		Standard Met Y/N	Submitted Comments/Notes Corrective Action /Timeframe if needed		
Is in good repair				Y	All areas were clean		
Is free of insect or ro	dent infestation	n		Y	No evidence of infestation		
Is well-lit and well-ve	ntilated			Y	All lights were turned on and natural winde lighting		
Has hot and cold run				Y	Tested by provider and observed the ice me the clear glass		
 Has a working inside 				Y	Flushed by provider and observed		
 Has utilities for cooking 	ng, lighting and	d heating	1	Y			
Has a working and sa				Y	Thermostat tested by provider for cooling heating		
 Has a working refrige 	rator and stove	е		Y		ed by provider and observed	
Has a working teleph	one			Y	Outbound call made by informal team to pro		
 Has operational smoke detector(s) 				Y	Tested by provider and observed		
Has first aid kit/supplies				Y	Medical Supplies stored in locked bedroom		
 Has protective coverings on any electrical outlet that is accessible to children 			utlet that is	Y	Corrective Action Completed: All outlets we covered or occupied		
armful items are stored app hildren:	propriately an	d away	from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Sharp or pointed item	S			Y	Moved to hi	gher cabinet shelf in laundry room	
Medications of any kin				Y	Corrective Action Completed: Lock added cabinet with medications		
 Matches, lighters and 	flammable pro	oducts		Y		Does not own	
 Alcoholic beverages 				Y	Does not own		

• Guns	Y	Does not own
Cleaning agents	Y	Corrective Action Completed: Lock added to kitchen cabinet
 Poisonous substances 	Y	Outside in locked shed
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	Changing area in child's playpen
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	
Diapering procedures are followed.	Y	Diapering station has 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 	Y	
 A child in care is not subjected to any form of neglect, ncluding: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	¥	
 Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
he provider immediately reports any suspected child abuse, eglect or mistreatment by calling 911 and your <u>local</u> epartment of Social Services Child Protective Services Unit.	Y	

Emergency Ready-to-Go Pack

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

Disaster Supply Kit

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

⊠Flashlight

Batteries for Flashlight

Portable First Aid Kit

⊠Bottled water ⊠Non-perishable food ⊠Diapers

Solder or binder for EPP documents

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

MSDE OCC Informal Care Inspection Checklist

⊠Thermometer	⊠Change of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags		
Medications	⊠Blanket(s)	C C		
Items in the Disaster Supply Kit are clean, organ	nized, and usable (Y/N)? Y			
Emergency Ready-to-Go Pack is available and e	easily accessible in the event of an emerge	ency (Y/N)? Y		
wipes, 4 blankets, 1 roll of duct tape, 1 pa and ECMA docs per child, case of bottled games Items to be reviewed on 08/31/2023: Corr 1. Outlet coverings required in all areas 2. Lock added to bedroom closet with me 3. Lock added to kitchen cabinet with cle 4. ERTG Missing Items: Thermometer, 4 of Emergency Documents ⊠Informal Provider Emergency Prepared	s, 1 pk of AA batteries, no specific meds air of scissors, bar soap/tooth brushes, d waters, 1 thermometer, 4 outfits (tops rected & Reviewed on 08/31/2023 edications raning products or more bottled waters, change of cloth	s, 1 bag of dried foods, 1 pk of diapers/1 pk of 1 roll of heavy duty trash bags, binder w/ EPP /bottoms/underwear/socks) and toys and board es for ea. child, and toys or games		
Authorization for emergency medical ca				
Planning and Maintenance				
Person responsible for updating the Disaster Su	pply Kit and the Emergency Documents	regularly:		
First Name Sharita	Last Name Artis			
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 account for the children and grab the ERTG and head into the living room (1 door 2 windows). The provider will use the sealing plastic and tape to seal the door, vents and windows if needed. The provider will call or text the parent once she and the children are secured. Evacuation Procedures Primary: The provider will account for the children and grab the ERTG. The provider will walk the children to the vehicle. She will ensure the 3 older children are secured in their seat belts and the youngest child is secured in her rear-facing car seat. Once complete the provider will secure herself and drive to Upon arrival the provider will call or text the parent with emergency updates. Alternate: If they could not access the primary location, the provider will walk the children to the vehicle. She will ensure the 3 older children are secured in their seat belts and the youngest child is secured in her rear-facing car seat. Once complete the provider will secure herself and drive to Upon arrival the provider will call or text the parent with emergency updates. Alternate: If they could not access the primary location, the provider will walk the children to the vehicle. She will ensure the 3 older children are secured in their seat belts and the youngest child is secured in her rear-facing car seat. Once complete the provider will secure herself and drive to the Upon arrival the provider and children, will shelter in Upon 2 windows). Once secure the provider will shelter in Upon 2 windows). Once secure dhe provider will shelter in Upon 2 windows).				
Signatures & Date				
Acknowledgement: By signing below the parties at been discussed. The parties also acknowledge that pop up visit which will be conducted virtually or in-	at, if approved, the home in which care is	n reviewed, and any corrections if needed have s provided is subject to random, unannounced		
PROVIDER		INSPECTOR		
Printed Name: Angelia Webster	Printed Name:			
Signa	Cignoture			

Signa	Signature:	
Date: 9/89/23 Phone;	Date: 08/31/2023	Phone: 1-877-227-0125

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⊠Virtual Inspection □In-person Inspection	Maryland State Department of Education/Office of Child Care Child Care Scholarship Program INFORMAL CARE INSPECTION CHECKLIST					Return to: ccs.informalproviders@maryland. ov	
Inspection Date: 08/30/2023 Time In: 1:30PM Follow-up Inspection Date: 08/31/2023 Time In: 10:00AM				Time Out: 2:43PMResult:Time Out: 10:22AMFollow-		: Follow-up Required. -up Result: PASSED	
Informal Care		194					
Type of Care (check one):	Non-rel	ative Info	ormal Provider (Care □Relativ	e Informal Prov	vider Care	
Provider Information					E. A.		
First Name: Angelia		Last	Name: Webste	er	Provide	er ID: <u>527003</u>	
Provider ID #:		S Party La			Email:		
Care Location Inspected Street Address: Address Verified? Yes.		City:	County		State Zip	Code:	
Name of Children in Care (a	idd pages if nee	eded)	Scholarship	Date of Birth	Age	Present (Y/N)	
		_		(01/06/2023)	7mos. / N		
				(08/31/2014)	8yr./ N		
				(05/08/2013)	13yr. / N		
Safety of the Home		A COLOR					
Directions: Review and determ bages may be used for comme	ine compliance	with eac	h standard. Note	any comments or o	corrective action	s needed. Additional , n/a – Not Applicable	
Health and Safety Training:			a and	Standard Met	Comments/	Notes	
Basic Health and Safety Train	ing Completed	1?		Y/N Y	Corrective Action /Timeframe if needed Non-Relative Informal Care – Certificate		
Home is free of health and s	afety hazards	s:		Standard Met Y/N	Submitted Comments/Notes Corrective Action /Timeframe if needed		
Is in good repair				Y	All areas were clean		
Is free of insect or ro	dent infestation	n		Y	No evidence of infestation		
Is well-lit and well-ve	ntilated			Y	All lights were turned on and natural winde lighting		
Has hot and cold run	-			Y	Tested by provider and observed the ice me the clear glass		
 Has a working inside 				Y	Flushed by provider and observed		
 Has utilities for cooking 	ng, lighting and	d heating		Y			
Has a working and sa				Y	Thermostat tested by provider for cooling heating		
 Has a working refrige 	rator and stove	е		Y		ed by provider and observed	
Has a working teleph	one			Y	Outbound call made by informal team to pro		
 Has operational smoke detector(s) 				Y	Tested by provider and observed		
Has first aid kit/supplies				Y	Medical Supplies stored in locked bedroom		
 Has protective coverings on any electrical outlet that is accessible to children 			utlet that is	Y	Corrective Action Completed: All outlets we covered or occupied		
armful items are stored app hildren:	propriately an	d away	from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Sharp or pointed item	S			Y	Moved to hi	gher cabinet shelf in laundry room	
Medications of any kin				Y	Corrective Action Completed: Lock added cabinet with medications		
 Matches, lighters and 	flammable pro	oducts		Y		Does not own	
 Alcoholic beverages 				Y	Does not own		

• Guns	Y	Does not own
Cleaning agents	Y	Corrective Action Completed: Lock added to kitchen cabinet
 Poisonous substances 	Y	Outside in locked shed
GENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering area.	Y	Changing area in child's playpen
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	
Diapering procedures are followed.	Y	Diapering station has 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 	Y	
 A child in care is not subjected to any form of neglect, ncluding: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	¥	
 Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
he provider immediately reports any suspected child abuse, eglect or mistreatment by calling 911 and your <u>local</u> epartment of Social Services Child Protective Services Unit.	Y	

Emergency Ready-to-Go Pack

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

Disaster Supply Kit

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

⊠Flashlight

Batteries for Flashlight

Portable First Aid Kit

⊠Bottled water ⊠Non-perishable food ⊠Diapers

Solder or binder for EPP documents

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

MSDE OCC Informal Care Inspection Checklist

⊠Thermometer	⊠Change of clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags				
Medications	⊠Blanket(s)	C C				
Items in the Disaster Supply Kit are clean, organ	nized, and usable (Y/N)? Y					
Emergency Ready-to-Go Pack is available and e	easily accessible in the event of an emerge	ency (Y/N)? Y				
wipes, 4 blankets, 1 roll of duct tape, 1 pa and ECMA docs per child, case of bottled games Items to be reviewed on 08/31/2023: Corr 1. Outlet coverings required in all areas 2. Lock added to bedroom closet with me 3. Lock added to kitchen cabinet with cle 4. ERTG Missing Items: Thermometer, 4 of Emergency Documents ⊠Informal Provider Emergency Prepared	s, 1 pk of AA batteries, no specific meds air of scissors, bar soap/tooth brushes, d waters, 1 thermometer, 4 outfits (tops rected & Reviewed on 08/31/2023 edications raning products or more bottled waters, change of cloth	s, 1 bag of dried foods, 1 pk of diapers/1 pk of 1 roll of heavy duty trash bags, binder w/ EPP /bottoms/underwear/socks) and toys and board es for ea. child, and toys or games				
Authorization for emergency medical ca						
Planning and Maintenance						
Person responsible for updating the Disaster Su	pply Kit and the Emergency Documents	regularly:				
First Name Last Name Artis						
are secured. <u>Evacuation Procedures</u> Primary: The provider will account for the childred the 3 older children are secured in their seat belts provider will secure herself and drive to shelter in the (1 door 3 windows). On Alternate: If they could not access the primary le children are secured in their seat belts and the year	ab the ERTG and head into the living roo ind windows if needed. The provider will en and grab the ERTG. The provider will s and the youngest child is secured in h Upon arrival the provider ce secured the provider will call or text t ocation, the provider will walk the childre bungest child is secured in her rear-facin Upon arrival the provider and children, w	om (1 door 2 windows). The provider will use the call or text the parent once she and the children I walk the children to the vehicle. She will ensure er rear-facing car seat. Once complete the ter will and the parent with emergency updates. en to the vehicle. She will ensure the 3 older ng car seat. Once complete the provider will				
Signatures & Date	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: Angelia Webster	Printed Name:					
Signa	Cignoture					

Signa	Signature:	
Date: 9/89/23 Phone;	Date: 08/31/2023	Phone: 1-877-227-0125

.

INFORMAL CHILD CARE INSPECTION REPORT

INSPECTION DATE/TIME/DURATION: 3-27-2025/2:15pm/ 65min	INS	INSPECTION TYPE		Total Approved	# Scholarship	# Present	Resident Children
APPLICANT ID:		Initial Application	0-23 months				
-	✓	Renewal Application	2 year olds				
PROVIDER ID:		Complaint Investigation	3 year olds				
507025		Monitoring	4 year olds				
APPLICATION DATE:		Other	5's (pre-school)				
02/24/2025			5-12 (school age)	I	I	0	
COUNTY:		Follow-Up	13-19 year olds				
Washington County			TOTAL	I	I	0	
			Overnight				

FATALITY: N/A	SERIOUS INJURY: N/A	COMPLAINT #: N/A	
INFORMAL PROVIDER PHOTO ID VERIFIED:	Yes No	ID TYPE: Driver's License	EXP. DATE: 12/08/2032
CARE LOCATION: O Child's	Home Informal Child Care	Provider's Home	
CARE TYPE: Relativ	re Informal Child Care Non-F	Relative Informal Child Care	
INFORMAL PROVIDER NAME: Sara Weit	zel		
PERSON(S) INTERVIEWED: Sara Weit	zel and Rachel Mellot		

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

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

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

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

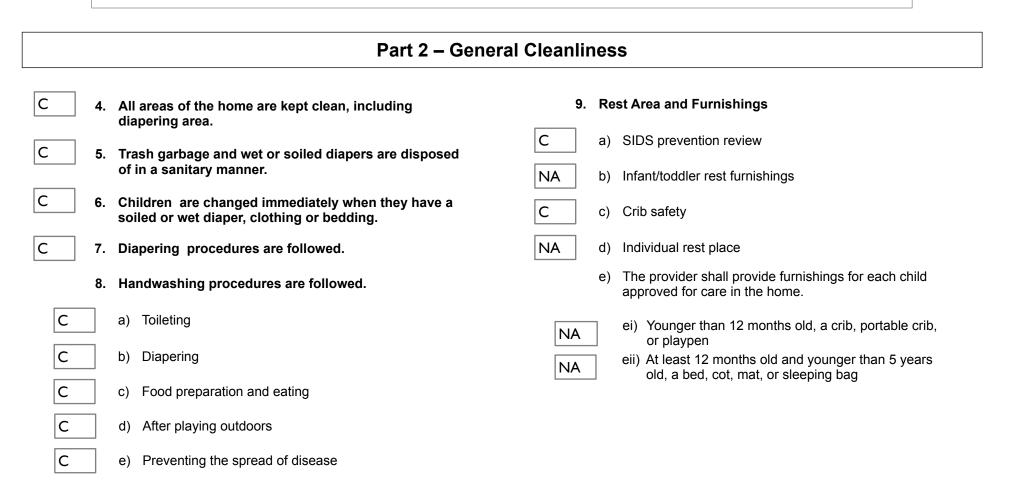
Part 1 – Safety of Home								
C 1.	Health & Safety Training (Basic 3 hrs. & the Annual Update)	С	k) Has first aid kit/supplies					
2.	Home is free of health and safety hazards	С	I) Has protective coverings on accessible electrical outlets					
С	a) Is in good repair	3.	 Harmful items are stored appropriately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

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

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

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

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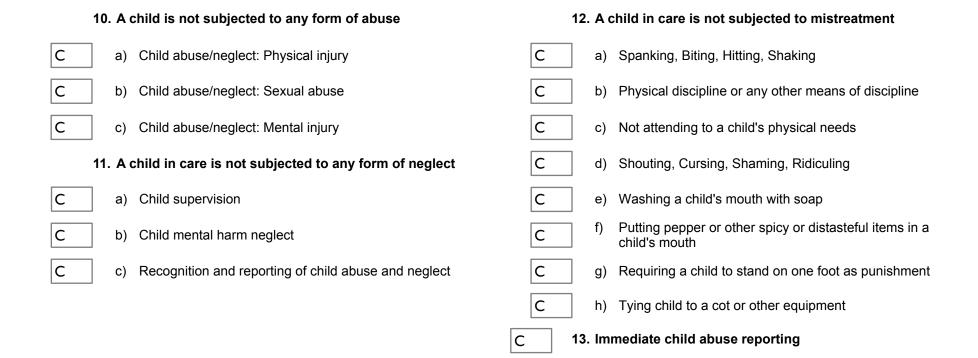
All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

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

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

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Part 3 – Child Abuse, Neglect and Mistreatment Standards



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

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

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

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Part 4 – Vehicular Traffic and Transportation Safety



Part 5 – Outdoor Activity Area

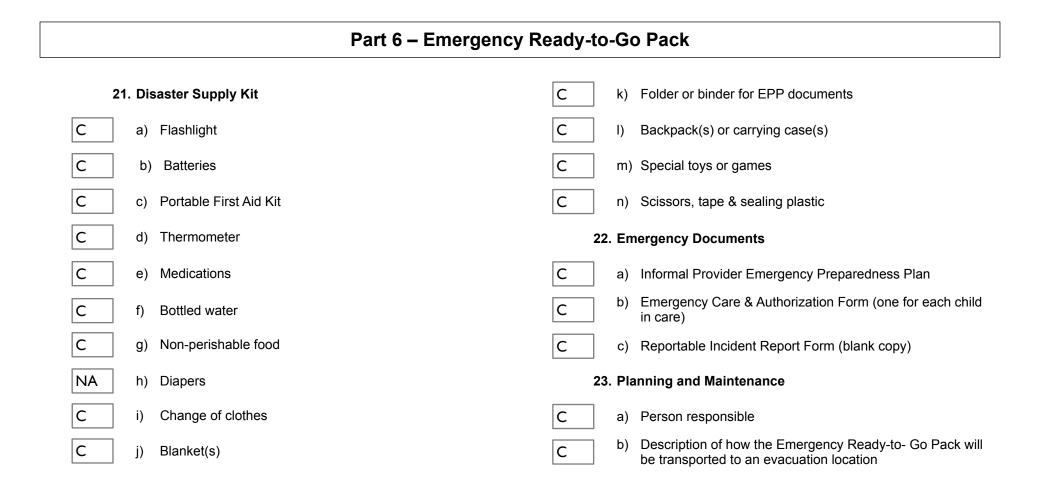
17. Safe outdoor play area С 20. Pool Safety C С a) 4 ft. fence that surrounds the pool 18. Enclosed safe play area b) Self-closing and self-latching mechanism on the С 19. Traffic and congested areas assessment С entry/exit way С c) Secured Lock С d) Sensor or alarm on the access door

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

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

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

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

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

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

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

Sign and upload form to

Sara Weitzel

Signature of Informal Child Care Provider

Date

Blessen Harris PROVIDER PORTAL

Signature of Agency Representative **Blessen Harris**

Date

03/27/2025

03/27/2025 15:20 Time Out: Date

Time

Date	Start Time	End Time	Duration	Follow-Up
03/27/2025	14:15	15:20	65 minutes	

Total Duration: 65 minutes Minutes

Informal Child Care Inspection FOLLOW-UP INSPECTION REPORT

Review and sign at time of a follow-up inspection to address any noncompliances

INSPECTION DATE/TIME/DURATION:	INSPECTION TYPE: Follow-Up Inspection	AGES	Total Approved	# Scholarship	# Present	Resident Children
PROVIDER ID:	APPLICANT ID:					
INFORMAL PROVIDER NAME:	PERSON(S) INTERVIEWED:					
INFORMAL PROVIDER PHOTO ID VERIF	ID TYPE:			EXP. DATE	E	
CARE LOCATION: O Child's Home	CARE TYPE:		ve Care	Non-Re	lative Care	

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

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

	Standard #	Inspection #	Standard Description			
				Sign and upload form to	Includes overflow page	
5	Sara Weitz	rel	03/27/2025	PROVIDER PORTAL		
Signatu	ure of Informal C	hild Care Prov	vider Date		Signature of Agency Representative	Date Page 9

SUMMARY OF CORRECTION

PROVIDER ID:	APPLICANT ID:	ZIP CODE:	COUNTY:			
507025	-	21719	Washington County			
INFORMAL PROVIDER NAME:		CARE LOCATION:				
Sara Weitzel			Child's Home Informal Child Care Provider's Home			
PERSON(S) INTERVIEWED:						
Sara Weitzel and Rachel N	1ellot					
VISIT TYPE: INSPECTION TIME/DATE/DURATION:						
Renewal Application		2:30pm/3-27-2025/	2:30pm/3-27-2025/65 minutes			

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

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

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

Blessen Harris	03/25	Complete	Includes overflow page	
Signature of Agency Representative	Date			ICCP Form SOC1080
Blessen Harris				

⊠Virtual Inspection □In-person Inspection	Child	epartment of I Care Care Scholars INFORMAL SPECTION C	CARE	Child	Return to: ccs.informalproviders@maryland.go
Inspection Date: 3/21/2024	Time	e In: 1:30pm	Time Out: 2:30pr	n Re	esult: Passed
Informal Care		at second se			
Type of Care (check one):	□ Non-relative Inf	ormal Provider	Care Relative	Informal	Provider Care
Provider Information					
First Name: Sara	the state of the s	Nome: Weitzel		Pr	ovider ID: 507025
Provider ID #	Last	Last Name: Weitzel			nail:
Care Location Inspected				1	
Street Address: Address Verified?: Yes	C	ity	County		State Zip Code
Name of Children in Care (add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
			9/21/2011	12	/N
			12/30/2015	8	/N
Safety of the Home	and a second				
Directions: Review a	ind determine compliance	e with each star	ndard. Note any comm	nents or co	orreclive actions needed.
	y be used for comments.				ussed, n/a – Not Applicable
Health and Safety Training	:		Standard Met Y/N		ents/Notes ctive Action /Timeframe if needed
Basic Health and S	afety Training Complet	ed?	Y		
Home is free of health and	safety hazards:		Standard Met Y/N		ents/Notes ctive Action /Timeframe if needed
Is in good repair			Y		
 Is free of insect or r 	odent infestation		Y		
 Is well-lit and well-w 	rentilated		Y		
 Has hot and cold rule 	inning water	····	Y		
 Has a working insid 	le toilet		Y		
Has utilities for coo	king, lighting and heati	ng	Y		
 Has a working and 	safe heating system		Y		
 Has a working refri 	gerator and stove		Y		
 Has a working tele; 	phone		Y		
 Has operational sm 	oke detector(s)		Y		۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰
 Has first aid kit/sup 			Y	_	
 Has protective cover accessible to children 	erings on any electrical ren	outlet that is	Y	7 Outle	ets
Harmful items are stored a children:	ppropriately and awa	y from	Standard Met Y/N		ents/Notes tive Action /Timeframe if needed
Sharp or pointed ite	ems		Y		
Medications of any	kind		Y		
Matches, lighters a	nd flammable products		Y		
Alcoholic beverage	S		Y		
• Guns			Y	Kept in high loc	a locked back within a larger bag. Kept in ation.
Cleaning agents			Y		
Poisonous substan	ces		Y		
GENERAL CLEANLINESS	STANDARDS		Standard Met Y/N		ents/Notes tive Action /Timeframe if needed
				COLLECT	uve Account i miestance it ficeucu

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Page 1 of 3

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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	
Emergency Ready-to-Go Pack	·	

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

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Page 2 of 3

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Emergency Ready-to-Go Pack is available and easily accessible in the event of an emergency (Y/N)? Yes		
Location of Emergency Ready to go Pack: Laundry room Item Specification (if needed): Pink and black back pack Sealing plastic, packing tape & large scissors 2 blankets 3 bottled water Granola Bar Medication is a controlled quantity administered by parent Deck of Cards, To be observed for compliance on :	: daily.	
Emergency Documents		
⊠Informal Provider Emergency Preparedness Plan (this com ⊠Authorization for emergency medical care	pleted form)	
Planning and Maintenance		
Person responsible for updating the Disaster Supply Kit and the Em	ergency Documents regularly:	
First Name Sara Last Name Weitze	4	
during the emergency and a final update after. The Provider will go into the laundry room and grab the bag and get the parent to notify <u>them of their need to relocate</u>	ng and text the parent throughout the children ready to leave. The . They would then rovider and children are secured the children ready to leave. The . The Provider would secured	e Provider would and Once I she will give the parents updates e Provider would and the the youngest in a booster seat and (1 door 1 window). Once
Signatures & Date		
Acknowledgement: By signing below the parties acknowledge that all si been discussed. The parties also acknowledge that, if approved, the ho pop up visit which will be conducted virtually or in-person.		
PROVIDER	IN	ISPECTOR
Printed Name: Sara R. Weitzel	Printed Name:	
Signature:	Signature:	
Date: 3/21/2024 Phone:	Date: 3/21/2024	Phone: 1-877-227-0125

Page 3 of 3

⊠Virtual Inspection □In-person Inspection		artment of Ed d Care Scholar INFORMAL SPECTION C	ship Program CARE	Child Care	Return to: ccs.informalproviders@maryland.g ov
Inspection Date: 05/05/2022	Time	Time In: 1:45PM Time		M Result 5/6/20	:: PASSED if returned by 12PM on 22
Informal Care			1	-	
Type of Care (check one):	Non-relative Info	rmal Provider (are Relative	Informal Pro	wider Care
Provider Information				. (mormai i re	
First Name: Cynthia	last	Name: Wells		Provid	ler ID: 485362
Provider ID #:	Last Name. Wens			Email	
Care Location Inspected					
Street Address: Address Verified? Yes	City:	Co	ounty:	State:	Zip Code:
Name of Children in Care (a	dd pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
Concernance of the second s	,,,		9/5/2018	3 / Yes	
			4/16/2020	2 /Yes	
				- / 100	
Safety of the Home		- 13			
Directions: Review and determ pages may be used for comme		ch standard. Note	e any comments or c Y – Yes, N – No,	orrective actio	ons needed. Additional ed, n/a – Not Applicable
Health and Safety Training:			Standard Met Y/N	Comment: Corrective	s/Notes Action /Timeframe if needed
Basic Health and Safety Train	ning Completed?		N/A		Relative Informal Provider
Home is free of health and s	safety hazards:		Standard Met Y/N	Comment	s/Notes 9 Action /Timeframe if needed
 Is in good repair 			Y		
 Is free of insect or ro 	2.3.2.2.3.0001250.0		Y	No sign of	infestation
 Is well-lit and well-ve 			Y	1	
 Has hot and cold run 			Y	-	erved from shower
Has a working inside			Y	Flush obse	
	ing, lighting and heatin	g	Y	Operationa	al gas stove
 Has a working and s 			Y		
 Has a working refrige 			Y		e on when opened
Has a working teleph			Y	Cell phone	provider was called
Has operational smo			Y	Dead side	- Parties
Has first aid kit/supp	ings on any electrical	outlot that in	ř	Band aids,	onument
accessible to childre	n		Y	Behind fun	niture
Harmful items are stored ap children:		/ from	Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed
 Sharp or pointed iter 			Y		
 Medications of any k 			Y	High cabine	t
	d flammable products		Y	None	
 Alcoholic beverages 			Y	None	
Guns			Y	None	
Cleaning agents			Y		
 Poisonous substance 	es		Y	Other than r	medications and cleaning solutions

GENERAL CLEANLINESS STANDARDS	Standard Mer Y/N	t Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diaperi	ng area. Y	
Trash, garbage and wet and soiled diapers are dispos sanitary manner.	ed of in a. Y	
Child is changed immediately when s/he has a soiled diaper, clothing or bedding.	or wet Y	
Diapering procedures are followed.	v	
 Handwashing procedures are followed. Provider and washed thoroughly with soap and warm running water Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the disease. 	r after: Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT S	TANDARDS Standard Me Y/N	t Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, includi Physical injury Any sexual abuse Mental injury 	ng: Y	
 A child in care is not subjected to any form of neg including: The failure to give proper care and attention including leaving a child unattended under ci that indicate that the child's health or welfare placed at substantial risk of harm; Mental injury to a child, or a substantial risk of injury that is caused by the failure to give pro attention to a child. 	to a child rcumstances is harmed or Y of mental	
 A child in care is not subjected to mistreatment, in Any deliberate act that hurts a child physicall emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful it child's mouth Requiring a child to stand on one foot as pur Tying child to a cot or other equipment 	y or Y ems in a	
The provider immediately reports any suspected c neglect or mistreatment by calling 911 and your <u>lo</u> Department of Social Services Child Protective Se	<u>cal</u> Y	
Emergency Ready-to-Go Pack		*
The Emergency Ready-to-Go Pack must be available and en needed medications) and Emergency Documents.	asily accessible in the event of an	emergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit		
Directions: Review and determine that each item is adequate enough supplies for each child in care. Also the items are cle	tely included in the Disaster Suppl ean, organized, and usable. Comm	y Kit. Be certain that the Disaster Supply Kit contains ment and note below if needed.
⊠Flashlight	⊠Bottled water	Selder or binder for EPP documents
Batteries for Flashlight	⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
	⊠Diapers	 Consider special toys or games Heavy Duty Scissors, duct tape/
⊠Thermometer	⊠ Change of clothes	A Heavy Duty Scissors, duct tape/

bags

⊠Medications	⊠Blanket(s)	
Items in the Disaster Supply Kit are	clean, organized, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is av	ailable and easily accessible in the event of an emergene	y (Y/N)? Y
Location of The Emergency Read	y to go Pack: In basement where care is provided.	
Item Specification (if needed): 6 AA batteries, First aid- tongue	lepressors, gauze, bandages, q-tips, cold compress,	wipes
	pie, canned baked beans, canned sliced peaches , a	
2 Onsies, 2 pants, 2 shirt 1 under		ppie sauce,
4 diapers, wipes, books, playing		
4 ulapers, wipes, books, playing	carus	
Items to review on xx/xx/xxxx if n	eeded: N/A	
Emergency Documents		
⊠Informal Provider Emerger	cy Preparedness Plan (this completed form)	
⊠Authorization for emergene	y medical care	
Planning and Maintenance		
	Disaster Supply Kit and the Emergency Documents r	egularly:
	Last Name	
Description of how the Emergency <u>Shelter In Place Procedure:</u> The provider will call parents, grab door and no windows. If the need s	Ready-to-Go Pack will be transported to an evacuation the emergency bag and gather the children and go to nould arise the provider will cover the door with plastic	he storage room in the basement that has one
Shelter in Place Procedure: The provider will call parents, grab door and no windows. If the need s will then call the parents again to le Evacuation Procedures: The provider will contact the parent them in their coats grab the emerge provider will get the children in their fror location is	Ready-to-Go Pack will be transported to an evacuation the emergency bag and gather the children and go to hould arise the provider will cover the door with plastic them know they are secure. It them know they are evacuating the care location ncy bags, and walk to the primary evacuation location car seats, secure them in the vehicle, put the emerge in the care location. If they could not go to the primary to which provider has a spare keys. Once there the rider will call parents before leaving the care location are	he storage room in the basement that has one and tape from emergency to go bag. Provider on. Provider will gather the children and put If driving the ncy bag in the car before driving to evacuation location, their alternate evacuation by will shelter in the basement back room that
Description of how the Emergency Shelter In Place Procedure: The provider will call parents, grab door and no windows. If the need s will then call the parents again to le Evacuation Procedures: The provider will contact the parent them in their coats grab the emerge provider will get the children in their from ocation is mas one window and one door. Pro- et them know they are secure. Items to review on xx/xx/xxxx if r	Ready-to-Go Pack will be transported to an evacuation the emergency bag and gather the children and go to hould arise the provider will cover the door with plastic them know they are secure. It them know they are evacuating the care location ncy bags, and walk to the primary evacuation location car seats, secure them in the vehicle, put the emerge in the care location. If they could not go to the primary to which provider has a spare keys. Once there the rider will call parents before leaving the care location are	he storage room in the basement that has one and tape from emergency to go bag. Provider on. Provider will gather the children and put If driving the ncy bag in the car before driving to evacuation location, their alternate evacuation ay will shelter in the basement back room that
Description of how the Emergency Shelter In Place Procedure: The provider will call parents, grab- door and no windows. If the need s will then call the parents again to le Evacuation Procedures: The provider will contact the parent hem in their coats grab the emerge provider will get the children in their from ocation is has one window and one door. Pro- et them know they are secure. Items to review on xx/xx/xxxx if r Signatures & Date	Ready-to-Go Pack will be transported to an evacuation the emergency bag and gather the children and go to bould arise the provider will cover the door with plastic them know they are secure. It is to let them know they are evacuating the care location ncy bags, and walk to the primary evacuation location car seats, secure them in the vehicle, put the emerge in the care location. If they could not go to the primary to which provider has a spare keys. Once there the rider will call parents before leaving the care location are eeded: N/A	he storage room in the basement that has one and tape from emergency to go bag. Provider on. Provider will gather the children and put If driving the ncy bag in the car before driving to evacuation location, their alternate evacuation by will shelter in the basement back room that and after they are at the emergency location to
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Description of how the Emergency Shelter In Place Procedure: The provider will call parents, grab door and no windows. If the need s will then call the parents again to le Evacuation Procedures: The provider will contact the parent them in their coats grab the emerge provider will get the children in their from ocation is nas one window and one door. Pro et them know they are secure. Items to review on xx/xx/xxxx if r Signatures & Date Acknowledgement: By signing below been discussed. The parties also ac cop up visit which will be conducted PROVID Printed Name?	Ready-to-Go Pack will be transported to an evacuation the emergency bag and gather the children and go to hould arise the provider will cover the door with plastic them know they are secure. It is to let them know they are evacuating the care location ray bags, and walk to the primary evacuation location car seats, secure them in the vehicle, put the emerge to the care location. If they could not go to the primary to which provider has a spare keys. Once there the rider will call parents before leaving the care location a eeded: N/A	he storage room in the basement that has one and tape from emergency to go bag. Provider on. Provider will gather the children and put If driving the ney bag in the car before driving to evacuation location, their alternate evacuation by will shelter in the basement back room that and after they are at the emergency location to reviewed, and any corrections if needed have provided is subject to random, unannounced
Description of how the Emergency Shelter In Place Procedure: The provider will call parents, grab- toor and no windows. If the need s vill then call the parents again to le Evacuation Procedures: The provider will contact the parent hem in their coats grab the emerge provider will get the children in their from them know they are secure. Items to review on xx/xx/xxxx if r Signatures & Date Acknowledgement: By signing below peen discussed. The parties also ac provider will be conducted PROVID Printed Name. The provider will be conducted Provider will be conducted Provider will be conducted PROVID	Ready-to-Go Pack will be transported to an evacuation the emergency bag and gather the children and go to bould arise the provider will cover the door with plastic them know they are secure. It to let them know they are evacuating the care location car seats, secure them in the vehicle, put the emerge the care location. If they could not go to the primary to which provider has a spare keys. Once there the rider will call parents before leaving the care location are knowledge that, if approved, the home in which care is virtually or in-person. DER	he storage room in the basement that has one and tape from emergency to go bag. Provider on. Provider will gather the children and put If driving the ney bag in the car before driving to evacuation location, their alternate evacuation ay will shelter in the basement back room that and after they are at the emergency location to reviewed, and any corrections if needed have provided is subject to random, unannounced

⊠Virtual Inspection □In-person Inspection		epartment of Edu Id Care Scholars INFORMAL ISPECTION CH	ship Program CARE	hild Care	Return to: ccs.informalproviders@maryland.g ov
Inspection Date: 02/15/2023	Time	e In: 3:30PM	Time Out: 4:46P!	Result	PASSED
Informal Care Type of Care (check one):	□ Non-relative Inf				
Provider Information				Informal Prov	vider Care
First Name: Sara Provider ID	Last	Name: Weitzel		Provide	er ID: <u>507025</u>
Care Location Inspected					
Street Address: Address Verified? Yes.	City:	County:	State	Zip Code	
Name of Children in Care (add	pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
			(09/21/2011)	11yr / Y	
	·····		(12/30/2015)	7yr / Y	

SatewortherHome

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?	Ŷ	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 generally clean
 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	Y	Observed steam, tested by provider
Has a working inside toilet	Y	Observed and flushed by provider in all bathrooms
 Has utilities for cooking, lighting and heating 	Y	
 Has a working and safe heating system 	Y	Provider tested their thermostat, and explained they have cooling units placed in the windows during summer time. Both of the cooling units were observed on camera
Has a working refrigerator and stove	Y	Electric stove top smoke observed
Has a working telephone	Y	Call was made to the provider
Has operational smoke detector(s)	Y	Observed and tested by provider
Has first aid kit/supplies	Y	Stored in kitchen
 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 in locked drawer in the kitchen
 Medications of any kind 	Y	Stored in providers in locked pantry in the kitchen
 Matches, lighters and flammable products 	Y	Does not own
Alcoholic beverages	Y	Located in high cabinet above the fridge
• Guns	Y	Stored in parent's bedroom on high shelf in lockboy
Cleaning agents	Y	In locked kitchen cabinets under the sink
 Poisonous substances 	Y	Does not own

MSDE OCC Informal Care Inspection Checklist

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Revised 10/2021

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 on shelf in laundry room near exit.

Item Specification (if needed):

<u>3 flashlights, 1 pk of AAA batteries, 1 first aid kit, 1 thermometer, no specific medications, no diaper age children in care, 3</u>
 <u>bottles of water, 4 pack of mac & cheese, 1 large blanket, 1 outfit (top/bottom) and underwear for each child, 2 blankets,</u>
 <u>Backpack, 1 roll of duct tape, 1 pair of scissors, 1 roll of sealing plastic, folder of EPP and ECMA forms per child, toy trucks and playing cards</u>

Items to review on xx/xx/xxxx if needed: N/A

Emergency Documents

⊠Informal Provider Emergency Preparedness Plan (this completed form)

Authorization for emergency medical care

Person responsible for updating	Disaster Supply Kit and the Emergency Documents regularly:	· ·
First Name Sara	Last Name Weitzel	

Shelter in Place Procedure:

The provider will gather the children and ERTG and go into the first floor bathroom (1 door 0 windows). The provider will use sealing plastic and tape to seal door if needed. Once the provider and children are secured in the location she will text the parents and continue to send text updates until they are safe.

Evacuation Procedures:

Primary: The provider will grab the emergency bag, gather the children, utilizing the second of the care location. The provider will call or text the second of ensure they are secured and gain entry access. Upon entry the provider and children will go into the kitchen area (0 doors 1 window). Once they are secured the provider will text the parents at the beginning, during and after the emergency to give them updates.

Alternate: If the provider and children cannot go to the primary location they will go to the alternate location. The provider will secure the older child in their seatbelt and the smaller child in his booster seat within the Provider's vehicle. Before arrival provider will call and/or text the **secure theorem** them they are on the way. Upon, arrival she will hold the hands of the children as they get out of the car. The Provider and children will go into the first floor bedroom (1 interior door 1 window). Once they are safe the provider will text and/or call the parents until the emergency is over.

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: Sara R. Weitzel	Printed Name:
Signature:	Signature:

Date: 02	/11-/	2023	Phone:
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Date: 02/15/2023

Phone: 1-877-227-0125

MSDE OCC Informal Care Inspection Checklist

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Revised 10/2021

⊠Virtual Inspection □In-person Inspection		ducation/Office o hip Program CARE ECKLIST	f Child	Return to: ccs.informalproviders@maryland.go		
Inspection Date: 09/11/2024	In: 3:30 PM	Time Out: 4:22 PM		Result: Passed		
Informal Care						
Type of Care (check one):				Informal F	Provide	r Care
Provider Information	Non-relative Info	ormal Provider C	are DRelative	Informal	104100	
First Name: Shannon		Dee	wider II	D: 557238		
Provider ID #: Last Name: Whitaker				Em		d. moto
Care Location Inspected					an	
Street Address:	-			100		State: Zip Code:
Address Verified res		City:	Cour	nty:		
Name of Children in Care (a	41	Laura		Age	1	Present (Y/N)
and the care (a	add pages if needed)	Scholarship	Date of Birth	7 years	old/N	
			8/25/2017	/ years	010/11	
Safety of the Home	1		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	2.	1	
Directions: Review an	nd determine compliance be used for comments.	e with each stand	ard. Note any comm	D - Discus	sed, n	actions needed. n/a – Not Applicable
Health and Safety Training:			Standard Met	0	nto/No	tes ion /Timeframe if needed
Basic Health and Sa	afety Training Complete	d?	Y			
Home is free of health and			Standard Met Y/N	Comme	nts/Not ive Act	tes ion /Timeframe if needed
 Is in good repair 			Y			
 Is free of insect or ro 	dent infestation		Y			
 Is well-lit and well-vell-vell-vell-vell-vell-vell-vell-						
 Has hot and cold run 	nning water		Y			
Has a working inside	e toilet		Y	1		
 Has utilities for cook 	ing, lighting and heatin	g	Y			
 Has a working and s 	afe heating system		Y			
 Has a working refrig 	erator and stove		Y			
 Has a working telept 	hone		Y			
 Has operational smooth 	oke detector(s)		Y			
 Has first aid kit/supp 	lies		Y			
 Has protective cover accessible to childre 	rings on any electrical on n	outlet that is	Y			
Harmful items are stored ap children:	ppropriately and away	from	Standard Met Y/N	Commen		es on /Timeframe if needed
Sharp or pointed iten	ns		Y			
 Medications of any k 	ind		Y	-		
 Matches, lighters and 	d flammable products		Y			
Alcoholic beverages			Y			
Guns			Y			
Cleaning agents			Y			
Poisonous substance	55		Y			
GENERAL CLEANLINESS S	and a source of the		Standard Met Y/N	Commen		es on /Timetrame it needed
All areas of the home are kept	clean, including diape	ring area.	Y			

MSDE OCC Informal Care Inspection Checklist 2020-03-26

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Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	1	
Child is changed immediate	Y	
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
 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	
 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	
e provider immediately reports any suspected child abuse, lect or mistreatment by calling 911 and your local partment of Social Services Child Protective Services	Y	
ergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily access (including needed medications) and Emergency Documents.	ible in the event of a	n emergency. This contains a Disaster Supply Kit
ter Supply Kit		
Directions: Review and determine that each item is adequately included contains enough supplies for each child in care. Also that the items are c	in the Disaster Supplean, organized, and	bly Kit. Be certain that the Disaster Supply Kit usable. Comment and note below if needed
⊠Flashlight ⊠Bottled water		Selder or binder for EPP documents
Batteries Non-perishable food	1	Backpack(s) or carrying case(s)

Consider special toys or games

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

MSDE OCC Informal Care Inspection Checklist 2020-03-26

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

⊠ Thermometer

DMedications-N/A

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Yes

⊠Change of clothes

⊠Blanket(s)

		AND YPS	
rgency Ready-to-Go Pack is available and	the event	of an emergency (Y/N)? 100	
rgency Ready-to-Go Pack is available and	d easily accessible in the event		
cation of Emergency Ready to go Pack	: Coat closet by the front doo	n	
nergency Documents			
⊠Informal Provider Emergency Pre ⊠Authorization for emergency mergency mergency	eparedness Plan (this complete dical care	ed form)	
		to regularly:	
Person responsible for updating the Dis First Name	Lastina		
Shannon Description of how the Emergency Rei Shelter In Place Procedures: The Provider will gather the ready to parent before, during and after shelter Evacuation Procedures: The Provider will gather the child a	ady-to-Go Pack will be transpo go bag and the child, t enng,	(1 doors, 0 wind	<u>dow(s))</u> . The provider will <u>text</u> <u>hand</u> . The provider will <u>walk to</u> ovider will text parent before, during
Shelter In Place Procedures: The Provider will gather the ready to parent before, during and after shelt Evacuation Procedures: The Provider will gather the child a and after sheltering The Provider will gather the child streaming CARE HOURS:	ady-to-Go Pack will be transpo go bag and the child, t ening, and the ready to go bag, carryin	the bag and holding the child's 3 doors, 10 window(s)). The prior	
Shelter in Place Procedures: The Provider will gather the ready to parent before, during and after shelt Evacuation Procedures: The Provider will gather the child a and after sheltering The Provider will gather the child sheltering CARE HOURS: Signatures & Date	ady-to-Go Pack will be transpo go bag and the child, t ening, and the ready to co bag, carryin and the ready to co bag, carryin 8 door	the bag and holding the child's 3 doors, 10 window(s)). The provider will to the bag and holding the child' to, 0 window(s)). The provider will to	hand. The provider will <u>walk to</u> ovider will text parent before, during <u>s hand</u> . The provider will <u>walk to</u> ext parent before, during and after
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Shelter In Place Procedures: The Provider will gather the ready to parent before, during and after shelt Evacuation Procedures: The Provider will gather the child a and after sheltering The Provider will gather the child sheltering CARE HOURS: - - Signatures & Date Acknowledgement: By signing been discussed. The parties al pop up visit which will be cond	ady-to-Go Pack will be transpo go bag and the child, ti ening. and the ready to oo bad, carryin and the ready to oo bad, carryin and the ready to oo bad, carryin and the ready to oo bad, carryin a door a door below the parties acknowledge th to acknowledge that, it approved bucted virtually or in-person. PROVIDER	the bag and holding the child's 3 doors, 10 window(s)). The provider will the bag and holding the child's ing the bag and holding the child' rs, 0 window(s)). The provider will the rat all standards have been reviewed, a the home in which care is provided is	hand. The provider will walk to ovider will text parent before, during s hand. The provider will walk to ext parent before, during and after

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MSDE OCC Informal Care Inspection Checklist 2020-03-26
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INFORMAL CHILD CARE INSPECTION REPORT

INSPECTION DATE/TIME/DURATION: 5-21-2025/3:00pm/	INSPECTION TYPE		AGES	Total Approved	# Scholarship	# Present	Resident Children
APPLICANT ID:	~	Initial Application	0-23 months				
-		Renewal Application	2 year olds				
PROVIDER ID:		Complaint Investigation	3 year olds				
539704			4 year olds	I	I	0	
APPLICATION DATE:		Other	5's (pre-school)				
04/15/2025			5-12 (school age)	2	2	0	
COUNTY:		Follow-Up	13-19 year olds				
Harford County			TOTAL	3	3	0	
1			Overnight				

FATALITY: N/A	SERIOUS INJURY:	COMPLAINT	#.			
INFORMAL PROVIDER PHOTO ID VERIFIED:	Yes No	ID TYPE: Driver's License	EXP. DATE: 02/14/2033			
CARE LOCATION: O Child's Home Informal Child Care Provider's Home						
CARE TYPE: O Relative Informal Child Care Non-Relative Informal Child Care						
INFORMAL PROVIDER NAME: Jocquella White						
PERSON(S) INTERVIEWED: Jocquella White						

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

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

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

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

Part 1 – Safety of Home							
С	1. H	ealth & Safety Training (Basic 3 hrs. & the Annual Update)	С	k)	Has first aid kit/supplies		
	2. H	ome is free of health and safety hazards	С	I)	Has protective coverings on accessible electrical outlets		
С	a)	Is in good repair	3.	Ha ch	rmful items are stored appropriately and away from ildren		
С	b) Is free of insect or rodent infestation	С	a)	Sharp or pointed items		
С	c)	Is well-lit and well-ventilated	С	b)	Medications of any kind should be stored		
C	d)	Has hot and cold running water	С	c)	Matches lighters and flammable products		
С	e)	Has a working inside toilet	С	d)	Alcoholic beverages		
С	f)	Has utilities for cooking, lighting and heating	С	e)	Weapons and firearms		
	g)	Has a working and safe heating system	С	f)	Cannabis edibles, smoking and vaping paraphernalia and by products		
С	h)	Has a working refrigerator and stove	С	g)	Cleaning agents		
C	i)	Has a working telephone	С	h)	Poisonous substances		
C	j)	Has operational smoke and carbon-monoxide detector(s)	С	i)	Interior environmental hazards		
ICCP Form IR10)8c				Deve 0		

Page 2

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

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

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

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

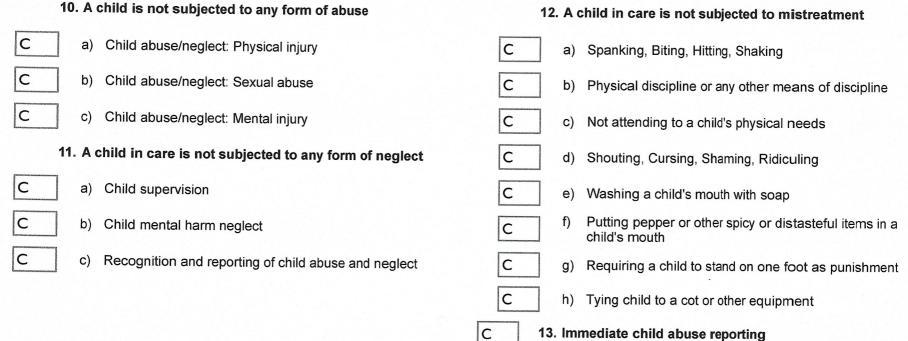
All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

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

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

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

Part 3 – Child Abuse, Neglect and Mistreatment Standards

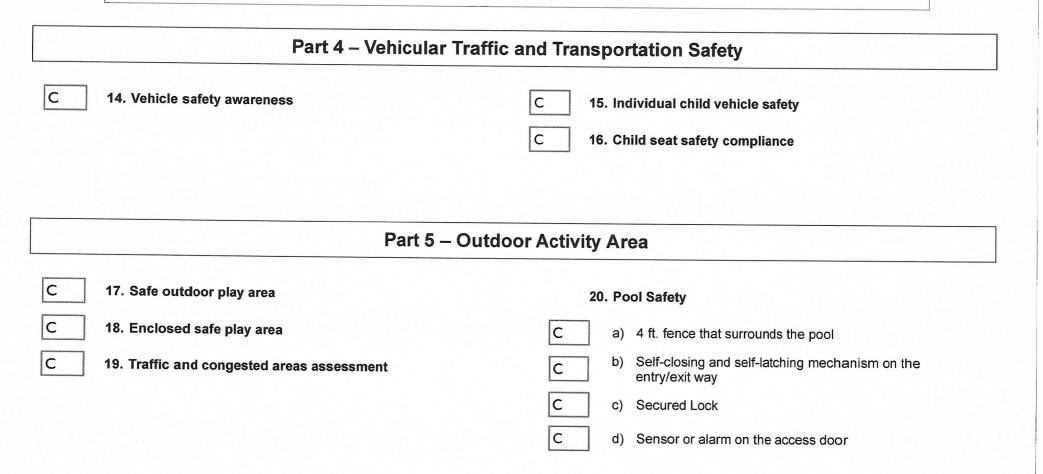


12. A child in care is not subjected to mistreatment

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

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

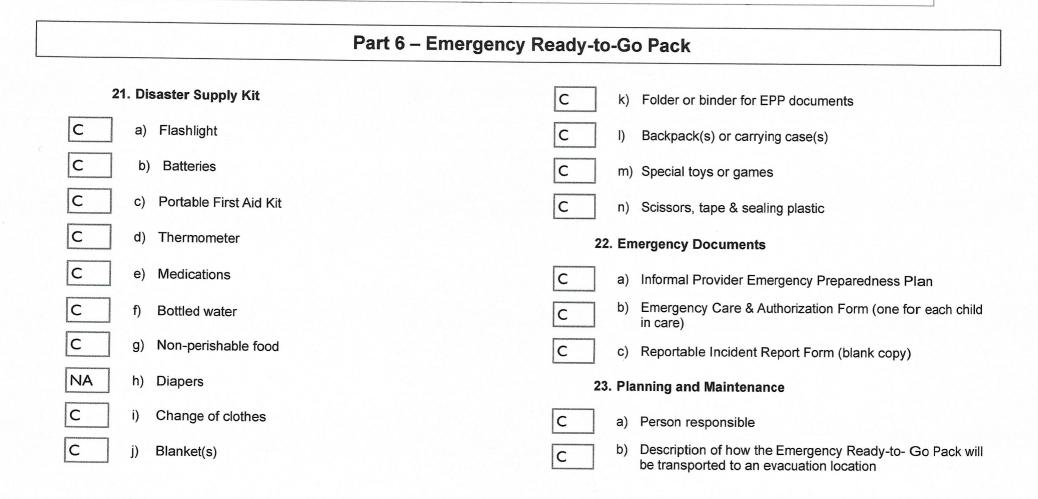
- 2. Select the Standard that requires documentation and enter the compliance status.
- 3. Enter finding notes as appropriate.



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

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

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



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

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

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

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

Signature of Informal Child Care Provider

5/21/25 Date

Sign and upload form to PROVIDER PORTAL

Signature of Agency Representative

Blessen Harris

Blessen Harris

Date

05/21/2025

Time Out: 05/21/2025 16:01 Date

Time

Date	Start Time	End Time	Duration	Follow-Up
05/21/2025	15:00	16:01	61 minutes	nn Mar e an Sailte a Bhar Bhar Bhar Bhar Chuidh ann an Anna an Anna ann ann an Anna Anna Anna Anna Anna Anna An
		na na sana na s		NGC MATTER DOLLED IN IN IN IN INVESTIGATION OF THE DOLLED AND DOLLED AND DOLLED AND DOLLED AND DOLLED AND DOLLED
ER E AND EN VIETNE ER		1899/1999 1998/9999 of Salaran		
nna tha ann an tha tha ann an tha		9999.0000.0000.0000.0000.0000.0000.000		
NA MANYA DINA KANANA MANJA MANJANA NA MANJA MANJANA NA MANJANA NA MANJANA NA MANJANA NA MANJANA NA MANJANA NA M				

Total Duration: 61 minutes

Minutes

SUMMARY OF CORRECTION

PROVIDER ID:	APPLICANT ID:	ZIP CODE:	COUNTY:
539704	-	21014	Harford County
INFORMAL PROVIDER NAME:		CARE LOCATION:	
Jocquella White		Child's H	ome Informal Child Care Provider's Home
PERSON(S) INTERVIEWED:			
Jocquella White			
VISIT TYPE:		INSPECTION TIME/DATE/DURATION:	
Initial Application		3:00pm/5-21-2025/61 mi	nutes

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

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

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

Blessen Harris	05/25	Complete	Includes overflow page	
Signature of Agency Representative	Date			ICCP Form SOC108c
Blessen Harris				

⊠Virtual Inspection □In-person Inspection	Maryland S	Child	epartment of Ed Care Care Scholarsh INFORMAL C PECTION CHE	ARE	Child	Return t ccs.info	o: rmalproviders@maryland.gov
Inspection Date: 8/21/2024		Time	In: 2:00 PM	Time Out: 2:50 P	M Re	sult: Follo	w Up Needed
Inspection Date: 8/29/2024		Time	In: 12:00PM	Time Out: 12:13F	PM Re	sult: Pass	ed
Informal Care				,			
Type of Care (check one):	□ Non-relat	ive Info	rmal Provider Ca	are ⊠Relative	Informal	Provider C	are
Provider Information							
First Name: Kelly		Last	Name: White		Pro	ovider ID:	558942
Provider ID #:					Em	nail:	
Care Location Inspected		•			•		
<u>Street Address:</u> <u>Address Verified?</u> : Yes	(City:	<u>C</u> (ounty:		<u>State</u> :	Zip Code:
Name of Children in Care (a	add pages if need	led)	Scholarship	Date of Birth	Age	/	Present (Y/N)
				7/7/2019	5 years	old/ N	
Onfortu of the Home			•	• •			
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		ents/Notes tive Actior	s n /Timeframe if needed
Basic Health and Sa	afety Training Co	omplete	d?	Y			
Home is free of health and	safety hazards:			Standard Met Y/N		ents/Notes tive Actior	s n /Timeframe if needed
 Is in good repair 				Y			
Is free of insect or re				Y			
Is well-lit and well-vell-vell-vell-vell-vell-vell-vell-				Y			
Has hot and cold ru				Y			
Has a working insid				Y			
Has utilities for cool			9	Y			
Has a working and a				Y			
Has a working refrig	-	•		Y			
Has a working telep				Y Y			
Has operational sm Has first aid kit/supp				Y			
Has protective cove accessible to childre	rings on any ele	ctrical c	outlet that is	Y			
Harmful items are stored a children:		d away	from	Standard Met Y/N		nts/Notes	/Timeframe if needed
Sharp or pointed ite	ms			Y			
Medications of any				Y			
Matches, lighters ar		oducts		Y			
Alcoholic beverages				Y			
Guns				Y			
Cleaning agents				Y			
Poisonous substance	ces			Y			
GENERAL CLEANLINESS	STANDARDS			Standard Met Y/N		nts/Notes ve Action	/Timeframe if needed
All areas of the home are key	ot clean, includin	g diape	ring area.	Y			

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

The Emergency Ready-to-Go Pack (including needed medications) <u>an</u>		of an emergency. This contains a Disaster Supply Kit
isaster Supply Kit		
	that each item is adequately included in the Disaster child in care. Also that the items are clean, organized	
⊠Flashlight	Bottled water	Solder or binder for EPP documents
⊠Batteries	⊠Non-perishable food	Backpack(s) or carrying case(s)
Portable First Aid Kit	□Diapers- 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)	

Emergency Ready-to-Go Pack is available	and easily accessible in	n the event of an emergency (Y/N)? Yes
Location of Emergency Ready to go Pac	k: In the bedroom		
To be observed for compliance on 8/29/3 • Outlet Covers • Smoke Detector • Door Knob Covers	2024 AT 12:00PM :		
Emergency Documents			
⊠Informal Provider Emergency Pre ⊠Authorization for emergency medi		completed form)	
Planning and Maintenance			
Person responsible for updating the Disast First Name Kelly	er Supply Kit and the Last Name White	Emergency Documents regu	ılarly:
Description of how the Emergency Ready- Shelter In Place Procedures:	to-Go Pack will be trai	nsported to an evacuation lo	cation:
text parent before, during and after shelter Evacuation Procedures: The Provider will gather the children and the (1 doors, The Provider will gather the children and the call and text parent before, during and after CARE HOURS:	ne ready to go bag <u>, th</u> <u>0 window(s))</u> . The pro- ne ready to go bag, th	ovider will call and text parer	nt before, during and after sheltering
Signatures & Date			
Acknowledgement: By signing below the part been discussed. The parties also acknowledge	ge that, if approved, the	Il standards have been review home in which care is provide	ed, and any corrections if needed have ed is subject to random, unannounced
Acknowledgement: By signing below the part been discussed. The parties also acknowledge	ge that, if approved, the	Il standards have been review home in which care is provide	ed, and any corrections if needed have ed is subject to random, unannounced INSPECTOR
Acknowledgement: By signing below the part been discussed. The parties also acknowledg pop up visit which will be conducted virtually PROVIDER	ge that, if approved, the or in-person.	Il standards have been review home in which care is provide Printed Name:	ed is subject to random, unannounced
Deleted New york	ge that, if approved, the or in-person.	home in which care is provide	ed is subject to random, unannounced

⊠Virtual Inspection □In-person Inspection	berson Child Care Scholarship Program ccs.informalproviders@maryla					
Inspection Date: 2/13/2024	Time	n: 10:30am	Time Out: 11:30	am Re	sult Passed	
Informal Care			1			
Type of Care (check one):	Non-relative Infor	mal Provider C	are Relative	Informal	Provider Care	
Provider Information				- Internation		
First Name: Jocquella Provider ID #	Last N	ame:White		Pro	ovider ID: 539704	
Care Location Inspected				1 211		
Street Address: Address Verified?: Yes		City	Coun	ty	State Zip Code	
Name of Children in Care (add	(hebeen if sener	Scholarship	Date of Birth	Age	/ Present (Y/N)	
Name of Children in Care (add	pages in fielded)	oonoidroinp	1/22/2014	9	/N	
			11/23/2015	7	/N /N	
			12/01/2020	2	/N /N	
			12/01/2020	1 2	М	
Safety of the Home						
Directions: Review and c Additional pages may be		with each stand			rrective actions needed. ssed, n/a – Not Applicable	
Health and Safety Training:			Standard Met Y/N		ents/Notes tive Action /Timeframe if needed	
Basic Health and Safety	Y Training Completed	1?	Y			
Home is free of health and safe	ety hazards:	1	Standard Met Y/N		ents/Notes live Action /Timeframe if needed	
 Is in good repair 			Y			
 Is free of insect or roder 	nt infestation		Y			
 Is well-lit and well-ventil 	ated		Y			
Has hot and cold runnir	ng water		Y			
Has a working inside to	ilet		Y			
 Has utilities for cooking. 	lighting and heating	V	Y			
 Has a working and safe 	heating system		Y			
 Has a working refrigera 	tor and stove		Y			
Has a working telephon			Y			
 Has operational smoke 	detector(s)		Y	-		
 Has first aid kit/supplies 			Y			
 Has protective covering accessible to children 	s on any electrical or	utlet that is	Y			
Harmful items are stored approchildren:	opriately and away	from	Standard Met Y/N		nts/Notes ve Action /Timeframe if needed	
Sharp or pointed items			Y	Moved to	the top of the kitchen cabinets	
 Medications of any kind 			Y			
 Matches, lighters and flag 	ammable products		Y			
Alcoholic beverages			Y			
Guns			Y			
Cleaning agents			Y			
Poisonous substances			Y			
GENERAL CLEANLINESS STA	NDARDS		Standard Met Y/N		nts/Notes ve 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	1
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	

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

Medications	⊠Blanket(s)
Items in the Disaster Supply Kit are	e clean, organized, and usable (Y/N)? Yes
Emergency Ready-to-Go Pack is a	available and easily accessible in the event of an emergency (Y/N)? Yes
Location of Emergency Ready to	o go Pack: Near the Front Door
Item Specification (if needed):	
2 Flashlights	
	ze, Hand Cleansing Wipes, Neosporin and Tape
 Canned Beans and Soup(5 17.9 oz Bottled waters 	stotal) with can opener
 Forehead Scanner thermo 	ometer
 Tops and bottoms for 	also clothing for her children
	ards for younger and Older Children, Reading Books
 12 pack of AA Batteries 	
Tylenol Alexiete	
 3 blankets <u>To be observed for compliance of</u> 	
To be observed for compliance of	
Emergency Documents	
☑Informal Provider Emerger ☑Authorization for emergener	ncy Preparedness Plan (this completed form) cy medical care
Planning and Maintenance	
Person responsible for updating the	e Disaster Supply Kit and the Emergency Documents regularly:
First Name Jocquella	Last Name White
	of all children, gather them in a line and the Provider would grab the ERTG Bag(her eldest son would The Provider will contact the parent immediately.
The Provider will do a head count o carry it if there). The Provider would drive	of all children, gather them in a line and the Provider would grab the ERTG Bag(her eldest son would d put the younger children in carseats while the older children will go into seatbelt. The provider would l f there is a need to contact someone to gain entry she will. They will shelter in the second second second ne provider will call the parent immediately after taking shelter.
The Provider will do a head count o	of all children, gather them in a line and the Provider would grab the ERTG Bag(her eldest son would d put the younger children in carseats while the older children will go into seatbelt. The provider will large door and no windows).
drive to her	
drive to her If they cannot shelter in the	call the parent immediately after taking shelter.
drive to her If they cannot shelter in the	
drive to her If they cannot shelter in the windows 1 door). The provider will o	
drive to her If they cannot shelter in the windows 1 door). The provider will o CARE HOURS	
drive to her If they cannot shelter in the windows 1 door). The provider will o <u>CARE HOURS</u> Signatures & Date Acknowledgement: By signing below been discussed. The parties also ack	call the parent immediately after taking shelter. the parties acknowledge that all standards have been reviewed, and any corrections if needed have snowledge that, if approved, the home in which care is provided is subject to random, unannounced
drive to her If they cannot shelter in the windows 1 door). The provider will of CARE HOURS Signatures & Date Acknowledgement: By signing below been discussed. The parties also ack pop up visit which will be conducted v	call the parent immediately after taking shelter.
drive to her If they cannot shelter in the windows 1 door). The provider will of <u>CARE HOURS</u> Signatures & Date Acknowledgement: By signing below been discussed. The parties also ack pop up visit which will be conducted v PROVID	the parties acknowledge that all standards have been reviewed, and any corrections if needed have snowledge that, if approved, the home in which care is provided is subject to random, unannounced virtually or in-person.
drive to her If they cannot shelter in the windows 1 door). The provider will of <u>CARE HOURS</u> Signatures & Date Acknowledgement: By signing below been discussed. The parties also ack pop up visit which will be conducted v	call the parent immediately after taking shelter.

0			
Date: 2- 17-14	Phone	Date:2/13/2024	Phone: 1-877-227-0125

⊠ Virtual Inspection □ In-person Inspection	ryland State Department C Child Care Scho INFORM INSPECTION	1	Return to: ccs.informalproviders@maryland.gov		
Inspection Date: 7/22/2024	Time In: 1:30pn	Time Out: 2:4	5pm Resu	It: Passed	
Informal Care	Walter Street			the second s	
Type of Care (check one):	Non-relative Informal Provi	der Care ØRelati	ve Informal Pro	ovider Care	
Provider Information					
First Name: L'Tanya				der ID: 510447	
Provider ID #:				1:	
Care Location Inspected					
<u>Street Address:</u> <u>Address Verified?</u> : Yes	<u>City</u> :	County:		State: Zip Code	
Name of Children in Care (add pag	es if needed) Scholars	ship Date of Birth	Age	/ Present (Y/N)	
		4/10/2020	4 years of	ld/	
	EANIE CONTRACTOR				
Safety of the Home		10 10 Par 10 10 -	the second	and the second second second	
Directions: Review and dete Additional pages may be use				ective actions needed. ed, n/a – Not Applicable	
Health and Safety Training:		Standard Me Y/N		ts/Notes e Action /Timeframe if needed	
Basic Health and Safety Tr	aining Completed?	Y			
Home is free of health and safety	hazards:	Standard Me Y/N		ts/Notes e 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, light 	hting and heating	Y			
 Has a working and safe here 	ating system	Y			
 Has a working refrigerator a 	and stove	Y			
Has a working telephone		Y			
 Has operational smoke det 	ector(s)	Y			
 Has first aid kit/supplies 		Y			
 Has protective coverings or accessible to children 	n any electrical outlet that i	s y			
Harmful items are stored appropri children:	ately and away from	Standard Met Y/N		/Notes Action /Timeframe if needed	
Sharp or pointed items		Y			
Medications of any kind		Y			
Matches, lighters and flamn	nable products	Y			
Alcoholic beverages		Y			
Guns		Y			
Cleaning agents		Y			
Poisonous substances		Y			
GENERAL CLEANLINESS STAND	ARDS	Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed	
All areas of the home are kept clean	, including diapering area.	Y			

Frash, 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 	¥	
The provider immediately reports any suspected child abuse, neglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	
Emergency Ready-to-Go Pack	a series	
The Emergency Ready-to-Go Pack must be available and easily ac (including needed medications) and Emergency Documents.	cessible in the even	t of an emergency. This contains a Disaster Supply Kit
Disaster Supply Kit		

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

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

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

Location of Emergency Ready to go Pack: N	ear the stairs in the dining room
Item Specification (if needed):	
 Diapers for emergencies and wipes include 	uded
Emergency Documents	
⊠Informal Provider Emergency Prepare	dness Plan (this completed form)
⊠Authorization for emergency medical of	care
Planning and Maintenance	
Person responsible for updating the Disaster S	upply Kit and the Emergency Documents regularly:
First Name L'Tanya	Last Name Wilkerson
Description of how the Emergency Ready-to-G	o Pack will be transported to an evacuation location:
Shelter In Place Procedures:	
The Provider will grab the emergency bag and Provider would seal the doors and vents with ta after the emergency by either calling or texting	ape and plastic in the emergency bag. She would contact the parent before during and
Evacuation Procedures:	
walks to the The Provider	door(s) 0 window(s)). The Provider would seal the vents and door. The Provider would
	gency bag and either walk with the child or use a
Provider would seal the vents and door. The Provider	
CARE HOURS:	

Signatures & Date		Carlo and a state of the second			
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: L'Tanva Wilkerson	Printed Name:				
Signature:	Signature:				
Date: 7 23 2024 Phone:	Date: 7/22/2024	Phone: 1-877-227-0125			

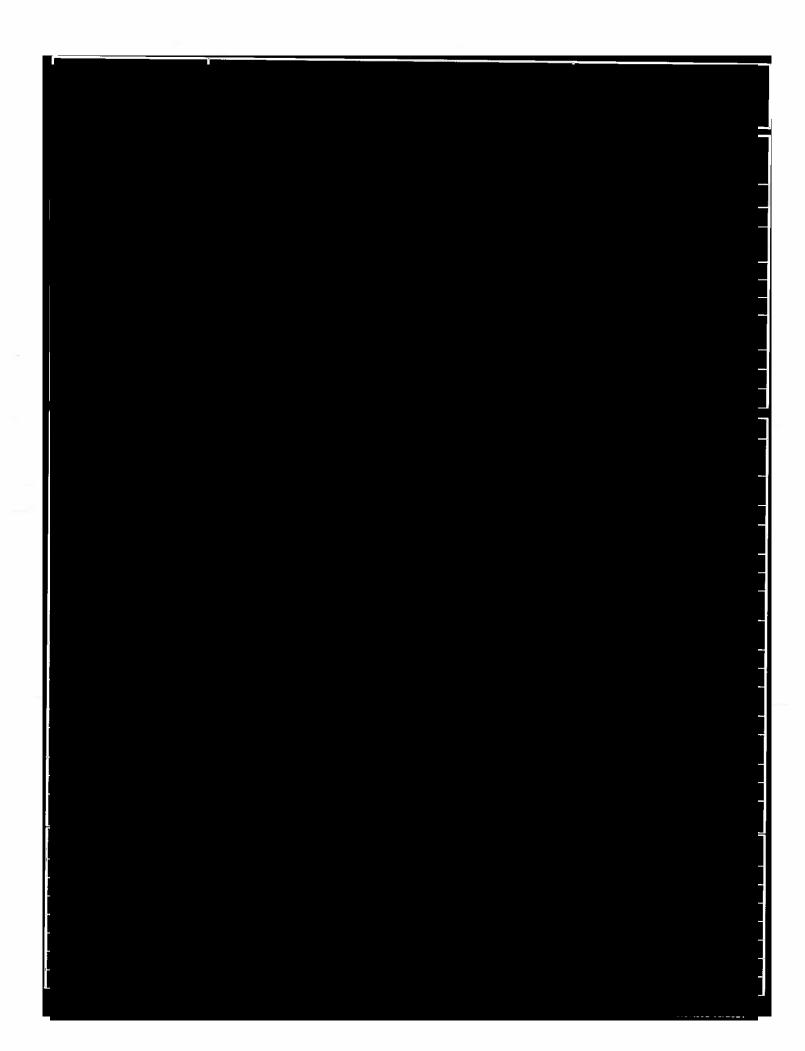
Mar Virtual Inspection In-person Inspection				Return to: ccs.informalproviders@maryland.gov			
Inspection Date: 8/21/2024	Time	In: 3:30 PM	Time Out: 4:09 P	PM Result: Passed			
Informal Care						1	Contraction of the second
Type of Care (check one):	Ion-relative Info	rmal Provider Ca	are ⊠Relative	Informal I	Provider	Care	
Provider Information							
First Name: Debra Provider ID #:	Last	Name: Williams			vider ID: ail:	493758	}
Care Location Inspected				1			
Street Address: Address Verified?: Yes	Cit	Σ:	County:		State:		Zip Code:
Name of Children in Care (add page	es if needed)	Scholarship	Date of Birth	Age	1	Prese	nt (Y/N)
			9/10/2015	8 years	old/ Y		
			9/20/2022	1 year o			
Cafabr of the Hame							Cylinder Statement
Safety of the Home	the south of					10.7814	Shamilta Man San
Directions: Review and deter Additional pages may be used	mine compliance d for comments.		ard. Note any comm Y – Yes, N – No, I				
Health and Safety Training:		1911	Standard Met Y/N	Comme	ents/Note	95	frame if needed
Basic Health and Safety Tra	aining Complete	d?	Y				
Home is free of health and safety I	hazards:		Standard Met Y/N		ents/Note		frame if needed
 Is in good repair 			Y				100
 Is free of insect or rodent in 	festation		Y				
 Is well-lit and well-ventilated 			Y				
 Has hot and cold running w 	ater		Y				
Has a working inside toilet			Y				
Has utilities for cooking, light		g	Y			_	
Has a working and safe heat			Y				
Has a working refrigerator a	ind stove		Y				
Has a working telephone Has operational smoke determined	actor(c)		Y				
Has first aid kit/supplies	50107(5)		Y	_		_	
Has protective coverings or accessible to children	any electrical of	outlet that is	Y				
Harmful items are stored appropri children:	ately and away	from	Standard Met Y/N	Commen		•	rame if needed
Sharp or pointed items			Y				
Medications of any kind	<u>َ</u>		Y				
Matches, lighters and flamn	nable products		Y			-	
Alcoholic beverages			Y			_	
Guns			Y				
Cleaning agents			Y				
Poisonous substances			Y				_
GENERAL CLEANLINESS STAND	ARDS		Standard Met Y/N	Commer Correcti			rame if needed
All areas of the home are kept clean	, including diape	ering area.	Y				

rash, garbage and wet and soiled diapers are disposed of in a anitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet 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	
 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 emolionally, 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					
	nat each item is adequately included in the Disaster hild in care. Also that the items are clean, organized	Supply Kit. Be certain that the Disaster Supply Kit d, and usable. Comment and note below if needed.			
⊠Flashlight	Bottled water	Section 2012 Secti			
⊠Batteries	⊠Non-perishable food	Backpack(s) or carrying case(s)			
Portable First Aid Kit	⊠Diapers .	⊠Consider special toys or games			
⊠Thermometer	⊠Change of clothes	☑ Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash Bags			
Medications	⊠Blanket(s)				
MSDE OCC Informal Care Inspection Checklist 20	20-03-26 Page 2 of 3				

Items in the Disaster Supply Kit are clean, organi	zed, and usable (Y/N	I)? Yes	
Emergency Ready-to-Go Pack is available and e	asily accessible in th	e event of an emergency (Y/N)? Yes
Location of Emergency Ready to go Pack:			
Emergency Documents		1	
⊠Informal Provider Emergency Prepared ⊠Authorization for emergency medical can		pleted form)	
Planning and Maintenance			
Person responsible for updating the Disaster Su	pply Kit and the Em	ergency Documents regulari	y:
First Name Debra	Last Name Williams		
Description of how the Emergency Ready-to-Go Shelter In Place Procedures: The Provider will gather the ready to go bag and parent before, during and after sheltering. Evacuation Procedures: The Provider will gather the children and the ready youngest will be in a rear facing car seat. The sheltering (2 of doors, 4 of window) The Provider will gather the children and the ready youngest will be in a rear facing car seat. The sheltering (2 of doors, 4 of window) The Provider will gather the children and the ready youngest will be in a rear facing car seat. The shelter ing (1 of doors, 2 of window(s)). The CARE HOURS:	the children, take dy to go bag, take provider will <u>y(s)</u>). The provider will dy to go bag, take	(1 door them to car, the oldest chil vill call parent before, during them to car, the oldest chil	rs, 2 window(s)). The provider will <u>call</u> d will be secured in a seatbelt and the and after sheltering d will be secured in a seatbelt and the
Signatures & Date			
Acknowledgement: By signing below the parties ac been discussed. The parties also acknowledge tha pop up visit which will be conducted virtually or in-p	t, if approved, the ho		
PROVIDER			INSPECTOR
Printed Name: Chra E. Williams		Printed Name:	
		Signature:	
Date: (08-21-2024 Phone:		Date: 8/21/2024	Phone: 1-877-227-0125



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 area in child's playpen or other area with portable changing pad		
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 liaper, clothing or bedding.	Y			
Diapering procedures are followed.	Y	Diapering station has needed supplies		
 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			
HILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
 A child is not subject to any form of abuse, including: Physical injury Any sexual abuse Mental injury 	Ŷ			
 A child in care is not subjected to any form of neglect, including: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y			
 child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y			
he provider immediately reports any suspected child abuse, eglect or mistreatment by calling 911 and your <u>local</u> epartment of Social Services Child Protective Services Unit.	Y			
mergency Ready-to-Go Pack				

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	Selder or binder for EPP documents
	⊠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)	

MSDE OCC Informal Care Inspection Checklist

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 Dining Room Item Specification (if needed):

<u>1 carry-on suitcase (carrying case), 1 flashlight, 1 pk of AA batteries, 1 thermometer, no specific meds, 1 first aid kit, 3 bottled waters, 5 canned food items, 1 can of baby formula, 1 pk of diapers/wipes, 4 outfits (top/bottom) 2 blankets, bag pf toys and playdough and books, 1 pair of scissors, 1 roll of duct tape, and 2 heavy duty trash bags, 1 roll of sealing plastic, and 2 folders w/ EPP and ECMA docs per child</u>

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

Sheller in mace procedure:

The provider will account for the children and grab the ERTG and head to the basement area (1 door 2 windows). Once downstairs and secured the provider will use the sealing plastic and tape to seal the windows, doors and vents as the need arises and will call or text the parents with emergency updates.

Evacuation Procedures

Primary: The provider will account for the children, grab the ERTG. The provider and children will walk to the local elementary school. Before leaving the home the provider would carry the smallest child in arms and hold the oldest child's hand to secure each child as they walk. Upon arrival the provider and children will receive instruction from the administration of where to shelter, typically which would be Once secured the provider will call or text the parents with emergency updates.

Alternate: If they could not access the primary location the provider will account for the children, grab the ERTG. The provider and children will walk to the provider's vehicle. The provider will secure voungest child in their rear-facing car seat and oldest child in their car seat belt. The provider and children will drive to and the provider has key access for entry of the home. Upon arrival the provider and children will shelter in the basement (1 door 2 windows). Once secured the provider will call or text the parents with emergency updates.

Care Hours: M-F 6:00am-6:00pm

Signatures & Date

Teben Withans	Printed Name:
Signatu	Signature:
Date. 10/26/2023 Phone:	Date: 08/21/2023 Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection	Child	partment of Ed d Care Scholar INFORMAL SPECTION C	CARE	Child C	Care		
Inspection Date: 03/03/2023	Time	In: 9:30AM	Time Out: 10:07AM		Result: PAS	SED.	
Informal Care			Y. T. M.L.				
Type of Care (check one):	elative Info	rmal Provider C	are Relative	e Inform	nal Provider	Care	
Provider Information			100 A 100			11 B	
First Name: Debra Provider ID	Last	Name: Williams	i.,	⊢	Provider ID: Email:	<u>493758</u>	
Care Location Inspected							
Street Address: Address Verified: Yes.	City	,	County		State		Zip Code
Name of Children in Care (add pages if n	eeded)	Scholarship	Date of Birth	Ag	je /	Present	(Y/N)
			(09/20/2022)	5 mo	s./Y		
			(09/10/2015)	7yr. /	Y		91-10 191-10
Safety of the Home	19-20						
			and Materia				
Directions: Review and determine Additional pages may be used for c		e with each stand	Y-Yes, N-No,				
Health and Safety Training:			Standard Met Y/N		Comments/Notes Corrective Action /Timeframe if nee		me if needed
Basic Health and Safety Training	Complete	d?	Y			al Care -	Certificate Submitted
Home is free of health and safety hazar	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 infestat 	tion	12	Y		No e	vidence of	f infestation
 Is well-lit and well-ventilated 			Y		All area	as well-lit a	and ventilated
 Has hot and cold running water 			Y		Tested by p	rovider an	d steam observed
Has a working inside toilet			Y		Tested b	y provide	r and observed
 Has utilities for cooking, lighting a 	and heatin	g	Y		10 - E		
 Has a working and safe heating s 	g system		Y	Provider tested both settings of thermos		ttings of thermostat	
 Has a working refrigerator and st 	ove		Y			and the	
 Has a working telephone 			Y		Call ma	ade to pro	vider's phone
 Has operational smoke detector(s)		Y		Tested by provider and observed		
 Has first aid kit/supplies 			Y	Home First Aid Kit		t Aid Kit	
 Has protective coverings on any accessible to children 	electrical	outlet that is	Y	All outlets covered or occupied			d or occupied
Harmful items are stored appropriately children:	and away	/ from	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		ame if needed	
Sharp or pointed items			Y	High shelf in pantry		n pantry	
Medications of any kind			Y	- 58		3	
Matches, lighters and flammable	products		Y		Does not own		t own
Alcoholic beverages			Y				
Guns	15		Y			Does no	town
Cleaning agents			Y		H	ligh shelf	in closet
Poisonous substances			Y			Does no	t own
GENERAL CLEANLINESS STANDARDS	5		Standard Met Y/N		ments/Notes ective Action		ame if needed
All areas of the home are kept clean, inclu	iding diapo	ering area.	Y		Diapers and	l wipes k	ept in family room

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

Emergency Ready-to-Go Pack

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

Disaster Supply Kit

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

⊠Flashlight

Bottled water

Solder or binder for EPP documents

⊠Batteries for Flashlight

⊠Non-perishable food

Backpack(s) or carrying case(s)

Portable First Aid Kit

Thermometer	⊠Change of clothes	Heavy duty scissors, duct or packing tape & sealing plastic or heavy duty trash bags
⊠Medications	⊠Blanket(s)	
Items in the Disaster Supply Kit are clean, organiz	ed, and usable (Y/N)? Y	
Emergency Ready-to-Go Pack is available and ea	sily accessible in the event of an emergenc	y (Y/N)? Y
Location of The Emergency Ready to go Pack	Emergency bag located under lounge cl	hair in dining room near exit
	d 1 bottom, 1 top/bottom and jumper for old	aid kit, no specific medications, 3 bottled waters, ler child, 2 small blankets (1 per child), bag of roll of trash bags and sealing plastic, and folder of
Items to be reviewed on xx/xx/xxxx if needed:	N/A	
Emergency Documents		
Informal Provider Emergency Preparedr	ess Plan (this completed form)	
Authorization for emergency medical cal	re	й.
Planning and Maintenance		
Person responsible for updating the Disaster Sup	ply Kit and the Emergency Documents re	egularly:
First Name Debra	Last Name Williams	~
Description of how the Emergency Ready-to-Go	Pack will be transported to an evacuation	location: Carried by the provider.
Shelter-in-Place Procedures:		
Provider will grab the emergency bag and account would tape the windows and door with sealing plat parents with her cellphone and inform them of the	astic and tape if needed. Once they are se	
Evacuation Location(s) Procedures:		
Primary: The provider will grab the children and	ready-to-go bag and head to the provider	's vehicle. The provider will secure the older
child in the rear seatbelt and the baby in the rear-	facing car seat. They will go the	where the provider has key access
to the home. The provider and children will go int parents once they are secured in the location.	o basement area (1 door 2 windows). The	e provider will use her cellphone to call the
Alternates If they could not people the primary la	ention the provider along with the children	and an
Alternate: If they could not access the primary lo with both children in hand and/or use the stroller		The provider and children will walk
and go to the front office and explain t	he emergency. They will then be escorted	into the shelter location which is
a door 3 windows). The provider will call bo	In parents to inform them of the emergen	cy once they are secured safely in the location.
Signatures & Date		The fit with the second second second second
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 home in which care is	reviewed, and any corrections if needed have provided is subject to random, unannounced
PROVIDER	peraon.	INSPECTOR
Printed Name:	Printed Name	
Signatuf	Signature:	
Date: 03-03-2023 Phone:	Date: 03/03/2023	Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection		e Department of Ed Child Care Scholar INFORMAL INSPECTION C	Child Care	Return to: ccs.informalproviders@maryland.g ov	
Inspection Date: 09/07/2022 Follow-Up Date: 09/12/2022	4.0	Time In: 1:45PM Time In: 4:30PM			:: Follow –Up Scheduled :: PASSED
Informal Care					
Type of Care (check one):		e Informal Provider C	ara Malativa	Informal Pro	vider Core
Provider Information				intomai Pio	
First Name: Debra Provider ID #:		Last Name: Williams			er ID: 493758
Care Location Inspected					
Street Address: Address Verified?	Cit	y:	County:	S	State Zip Code:
Name of Children in Care (a	add pages if needed	d) Scholarship	Date of Birth	Age	/ Present (Y/N)
	1.5		9/10/2015	6 / no	
1.					
Safety of the Home					
Directions: Review and determ pages may be used for comme		h each standard. Note			ns needed. Additional d, n/a – Not Applicable
Health and Safety Training:			Standard Met	Comments	
asic Health and Safety Training Completed?		test.	Y/N	Corrective	Action /Timeframe if needed
Basic Health and Safety Train	ning Completed?		Y	Corrective	
Home is free of health and			Y Standard Met Y/N	Certificate Comments Corrective	Received s/Notes Action /Timeframe if needed
Home is free of health and Is in good repair	safety hazards:		Y Standard Met Y/N Y	Certificate Comments Corrective Well mainta	Received 5/Notes Action /Timeframe if needed ained home
Home is free of health and Is in good repair Is free of insect or re	safety hazards:		Y Standard Met Y/N Y Y	Certificate Comments Corrective	Received 5/Notes Action /Timeframe if needed ained home
Home is free of health and Is in good repair	safety hazards:		Y Standard Met Y/N Y Y Y	Certificate Comments Corrective Well mainta No sign of i	Received Notes Action /Timeframe if needed ained home
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Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold ru Has a working inside Has a working inside Has a working refrig Has a working refrig Has a working telep Has operational smo Has first aid kit/supp Has protective cover accessible to childree Harmful items are stored ag children: Sharp or pointed item	safety hazards: odent infestation entilated nning water e toilet ting, lighting and he safe heating system rerator and stove hone bke detector(s) blies rings on any electren opropriately and a ms kind d flammable produ	rical outlet that is	Y Standard Met Y/N Y Y Y Y Y Y Y Y Standard Met Y/N Y Y Y Y Y	Certificate Comments Corrective Well mainta No sign of i Steam obset Flush obset Dialed dow Provider's of Alarm soun Gauze, tape Covered or Corrective A	Received S/Notes Action /Timeframe if needed ained home infestation erved rved n to 67 cell called ided e, band-aids, alcohol wipes, cold pack, in use Notes Action /Timeframe if needed
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold ru Has a working inside Has a working inside Has a working and s Has a working refrig Has a working telep Has operational smo Has first aid kit/supp Has protective cover accessible to childres Harmful items are stored ap children: Sharp or pointed item Medications of any le	safety hazards: odent infestation entilated nning water e toilet ting, lighting and he safe heating system rerator and stove hone bke detector(s) blies rings on any electren opropriately and a ms kind d flammable produ	rical outlet that is	Y Standard Met Y/N Y Y Y Y Y Y Y Y Standard Met Y/N Y Y Y Y Y Y	Certificate Comments Corrective Well mainta No sign of i Steam obse Flush obse Dialed dow Provider's of Alarm soun Gauze, tap Covered or Corrective / High Shelf in	Received S/Notes Action /Timeframe if needed ained home infestation erved rved n to 67 cell called ided e, band-aids, alcohol wipes, cold pack, in use Notes Action /Timeframe if needed
Home is free of health and Is in good repair Is free of insect or ro Is well-lit and well-ve Has hot and cold run Has a working inside Has a working inside Has a working and s Has a working refrig Has a working refrig Has operational smo Has first aid kit/supp Has protective cover accessible to children Harmful items are stored ap children: Sharp or pointed item Matches, lighters an Alcoholic beverages	safety hazards: odent infestation entilated nning water e toilet ting, lighting and he safe heating system rerator and stove hone bke detector(s) blies rings on any electren opropriately and a ms kind d flammable produ	rical outlet that is	Y Standard Met Y/N Y	Certificate Comments Corrective Well mainta No sign of i Steam obse Flush obse Dialed dow Provider's of Alarm soun Gauze, tap Covered or Comments/ Corrective A High Shelf in None None	Received S/Notes Action /Timeframe if needed ained home infestation erved rved n to 67 cell called ided e, band-aids, alcohol wipes, cold pack, in use Notes Action /Timeframe if needed a pantry

MSDE OCC Informal Care Inspection Checklist

Revised 10/2021

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

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

Disaster Supply Kit

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

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

Items in the Disaster Supply	Kit are clean, organ	ized, and usable (Y	(N)? Y	
Emergency Ready-to-Go Pa	ck is available and e	easily accessible in t	he event of an emergency (Y/	N)? Y
Location of The Emergenc	y Ready to go Pac	<u>k</u> : Under Chair in	dining room	
Item Specification (if neede	ed):			
2 shirts, 2 Spandex pants, sh 4 extra AA batteries, Band aids, ointment, gauze, 1 16oz water bottle, Chicken	tape, alcohol wipes		ves, tweezers, safety, Childre licken, sardines,	n's Motrin, 👔
Items to review on 09/12/20	022 if needed: Obs	served 9/12/2022		
Electrical outlet cover in the Emergency Documents in El	kitchen - Observed	9/12/2022		
Emergency Documents				
⊠Informal Provider Er	nergency Prepared	dness Plan (this co	mpleted form)	
Authorization for em	• • •			
Planning and Maintenance				
Person responsible for updat	ing the Disaster S	upply Kit and the E	mergency Documents regula	arly:
First Name		Last Name		
Shelter In Place Procedure The provider will grab the ER arise the provider will use plat Evacuation Procedures: Then provider will grab before driving to the primary with spare key and head to the tape to seal the shelter. The If they couldn't shelter at the	TB, the ERTG a evacuation locatio ne basement that h provider will call th	al the shelter. The and proceed to the n which international pas 2 windows and e parent after they	provider will call the parent of provider's vehicle where she Onc one door. If the need should are secure in the evacuation ternate evacuation location	will secure booster seat e at the location, the provider will gain entry arise, the provider will use plastic and b location. which is
which is located call the parents after they are Signatures & Date	Dnce at a secure in the alte	will she		mall windows and 1 door. The provider will
Acknowledgement: By signing	also acknowledge	that, if approved, th	all standards have been revi e home in which care is prov	ewed, and any corrections if needed have vided is subject to random, unannounced
STATES OF STATES OF STATES AND A STATES OF STATES AND A	ROVIDER			INSPECTOR
Debra William	2		Printed Name:	
Signa			Signature:	
Date: 9-12-2022	Phone:		Date: 09/12/2022	Phone: 1-877-227-0125

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⊠Virtual Inspection ⊡In-person Inspection	Maryland S	tate Department of I Care Child Care Scholars INFORMAL INSPECTION CH	Return to: ccs.informalproviders@maryland.gov			
Inspection Date:8/22/2024		Time In: 1:30pm	Time Out: 2:30p	m Re	sult: Follow up	
Inspection Date:8/26/2024 Informal Care	Time In: 3:30pm		Time Out: 4:00pm Re		esult: Passed	
the second s	- California			24	and the second second	
Type of Care (check one): Provider information	□ Non-relati	ve Informal Provider	Care ⊠Relative	e Informal	Provider Care	
First Name: Eunice Provider ID #:		Last Name: Williams	3	Pro	ovider ID: 553983	
Care Location Inspected				Em	nail:	
Street Address:					and the second	
Address Verified?: Yes	Cit	Count	State	2:	Zip Code:	
Name of Children in Care (a	trees # noord bbs				a set of all	
	rad bages it need	ed) Scholarship	Date of Birth	Age	/ Present (Y/N)	
1000			3/24/2021	3yrs/ N		
Safety of the Home		1 1 1 1 1 1 1 1		1200		
Contraction of the second s		pliance with each stan nents.	dard. Note any comm Y - Yes, N - No,	nents or co D - Discu	prrective actions needed. ssed, n/a – Not Applicable	
Health and Safety Training:			Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed		
Basic Health and Sa	afety Training Co	mpleted?	Y	Conce		
Home is free of health and safety hazards:		Standard Met Y/N		ents/Notes tive Action /Timeframe if needed		
Is in good repair			Y			
 Is free of insect or ro 			Y			
Is well-lit and well-ve			Y			
Has hot and cold run Has a working inside			Y			
the a working inside			Y			
The delides for COOK	ng, lighting and l	heating	Y	1		
the a working and se	ate heating syste	m	Y			
 Has a working refrige Has a working teleph 			Y			
			Y			
Has operational smol Has first aid kit/suppli	ke detector(s)		Y			
			Y			
 Has protective covering accessible to children 	1		Y			
armful items are stored app hildren:		away from	Standard Met Y/N	Comme	nts/Notes ive Action /Timeframe if needed	
 Sharp or pointed items 			Y		in needed	
 Medications of any kin 			Y			
 Matches, lighters and t 	flammable produ	ucts	Y			
 Alcoholic beverages 			Y			
Guns			Y			
 Cleaning agents 			Y	1		
 Poisonous substances 			Y			
			Standard Met Y/N	Comme	nts/Notes ive Action /Timeframe if needed	
ENERAL CLEANLINESS STANDARDS areas of the home are kept clean, including diapering area.				and a second and a second		

Lettre ve.

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

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

⊠ Flashlight	Bottled water	Section 2015 Folder or binder for EPP documents
⊠Batteries	⊠Non-perishable food	Backpack(s) or carrying case(s)
Portable First Aid Kit	⊠Diapers	Consider special toys or games
⊠ Thermometer	⊠Change of clothes	Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash
Medications	⊠Blanket(s)	Bags
Items in the Disaster Supply Kit are clear	organized, and usable (Y/N)2 Y	

	THE AND A CONTRACT OF A CONTRACT
	satible in the event of an emergency (111)
Emergency Ready-to-Go Pack is available	able and easily accessible in the event of an emergency (Y/N)? Y
Location of Emergency Ready to go	
To be observed for compliance on 8	1/26/2024 3:30pm :
Outlets cover	
Knives	
Lighter	
 Smoke detector 	
• ECMA	
 Duct tape, scissor 	, plastic
Emergency Documents	
SInformal Provider Emergency	Preparedness Plan (this completed form)
Authorization for emergency	
Planning and Maintenance	
Person responsible for updating the D	Disaster Supply Kit and the Emergency Documents regularly:
First Name Eunice	Last Name Williams
Description of how the Emergency Pr	eady-to-Go Pack will be transported to an evacuation location:
Shelter In Place Procedures:	sauy-10-00 Pack will be it all sponde to all a same
	the state of the s
The Provider will gather the child and	head down the second and seal 1 window , 1 door and one vent.
Provider will call the parent before, du	Jring, and after lock down.
Evacuation Procedures:	
The Provider will accure the shift is	the car seat and drive to the second second and second and second and cover one door there
the Provider will secure the child in	by going to the
is no window. The provider	
is no window. The provider	

Acknowledgement: By signing below the parties acknowledge that been discussed. The parties also acknowledge that, if approved, pop up visit which will be conducted virtually or in-person.	at all standards have been reviewed the home in which care is provided	d, and any corrections if needed have d is subject to random, unannounced
PROVIDER		INSPECTOR
Printed Name: Eunice Williams	Printed Name:	
ignature;	Signature:	
Date: 08/27/2024 Phone: 1	Date: 8/26/2024	Phone: 1-877-227-0125

⊠ ⊃Virtual Inspection In-person Inspection						ccs.informalproviders@maryland.		
Inspection Date: 05/05/202	23 Time In: 10:30AM			Time Out: 11:39AM Res		Result	PASSED	
Informal Care				changer & burn	Constanting	19.1	two production of themes	
Type of Care (check one):	□ Non-relat	tive Info	rmal Provider (Care KRela	tive Informa	al Prov	vider Care	
Provider Information							Pupeang +	
First Name: Jeffrey Last Name: William: Provider ID #:			s Provider ID: 482192 Email:			er ID: <u>482192</u>		
Care Location Inspected						-	diametral.	
Street Address: Address Verified? Yes.	City:		County:		State	Zi	p Code:	
Name of Children In Care	(add pages if page	(ha)	Scholarship	Date of Birth	Age	0	Present (Y/N)	
tanto or onitoren in care	feed helles it used		a arrona arrip	(01/27/2021				
				(07/17/2022			aprenda Na	
				(,			
Safety of the Home			1				and the second se	
Directions: Review and dete pages may be used for comm	rmine compliance v nents.	with each	n standard. Note	any comments o Y - Yes, N - No	or corrective	action	ns needed. Additional I, n/a – Not Applicable	
Health and Safety Training	g:			Standard Me Y/N	t Comm Correc	Comments/Notes Corrective Action /Timeframe if needed		
Basic Health and Safety Tra	aining Completed	?		Y	Relat	Relative Informal Care - Certificate Submit		
Home is free of health and safety hazards:			Standard Me Y/N	t Comm Correc	Comments/Notes Corrective Action /Timeframe if needed			
Is in good repair				Y	01.	All areas were clean		
 Is free of insect or rodent infestation 				Y		Provider mentioned roach killer. No evidence infestation.		
• Is well-lit and well-ventilated		Υ	Y	A ALCONTRACT	All lights were turned on and natural wind lighting			
 Has hot and cold n 	unning water			Y	Tested by provider and steam observed camera			
 Has a working inside 	de toilet			Y	Flushed by provider and observed			
 Has utilities for cool 	king, lighting and	heating		Y	g a full and not said a line is grint phil.			
 Has a working and 	safe heating syst	em		enito Youra,	be prepare			
 Has a working refri 	gerator and stove		Y	Y		Tested by provider and observed		
 Has a working tele 				Y	Outbound call made to provider's pho			
 Has operational sm 				Y	Tested by provider and observed			
 Has first aid kit/sup 				Y	Y First aid kit stored under locked bath		stored under locked bathroom cabin	
 Has protective coverings on any electrical outlet that is accessible to children 		bet that is	Y All outlets cover an		outlets cover and/or occupied			
armful items are stored appropriately and away from hildren:		m	Standard Met Y/N		Comments/Notes Corrective Action /Timeframe If needed			
Sharp or pointed items		en e takit	Y	0.1.2.10.2	Stored in knife and container holder of kitchen counter			
Medications of any kind			Y	Stored	Stored in mom's bedroom with lock on draw			
 Matches, lighters and 		ucts	P.J.	Y		Does not own		
Alcoholic beverages				Y		Does not own		
Guns	A STORE OF			Y		Does not own		
 Cleaning agents 	a set			Y	Stored un	nder lo	cked bathroom and kitchen cabinets	
 Polsonous substance 				Y			Does not own	
SENERAL CLEANLINESS STANDARDS			Standard Met	Comment	the Philad			

	Y/N	Corrective Action /Timeframe if needed		
All areas of the home are kept clean, including diapering area.	Y	Diapering area in children's bedroom w/ supplies		
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	U.S. C. M.Y. 191	Dispose of diapers daily via garage trash can		
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	n T BOUTY D P	The second design of the second se		
Diapering procedures are followed.	Y			
Handwashing procedures are followed. Provider and child's ha washed thoroughly with soap and warm running water after: • Tolleting;		ntormat Care and Care and Care		
Diapering;	Y	entropycoline entropycoline entropycol		
 Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the spread of disease. 	of	Comments/Notes Corrective Action /Timeframe if needed		
CHILD ABUSE, NEGLECT AND MISTREATMENT STANDAR	DS Standard Met			
A child is not subject to any form of abuse, including:	Schulershield 1	Internet Child on In Care to make I marked		
Physical injury		a nativity of		
 Any sexual abuse 				
Mental injury A child in care is not subjected to any form of neglect,				
ncluding:		punch and to state		
 The failure to give proper care and attention to a child including leaving a child unattended under circumstance that indicate that the child's health or welfare is harmed 	85 g	«Чалят Велитела зикупать от ывиза мене фененку оказы Вела такта.		
placed at substantial risk of harm; no line of here		ignician Survey Translerg		
 Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care a attention to a child. 	Ind	add Hualt a U.Strony Francia Completed?		
A child in care is not subjected to mistreatment, including:	-	toma is the of many and an adapting house oa.		
 Any deliberate act that hurts a child physically or 		Nation Cracity of all a		
 emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline 		la Central ensurementation		
 Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing 	Y	pidaritan-kewara 'a inv is		
 Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a 		leithe grund Lea brail an eilt.		
 child's mouth Requiring a child to stand on one foot as punishment 		ing na substantia a multi-		
Tying child to a cot or other equipment		and the gridings of process and entities and		
he provider immediately reports any suspected child abuse	9,	Linge & Boyeer, Syna pris "Lingo - Find y		
eglect or mistreatment by calling 911 and your local. Department of Social Services Child Protective Service	Y	网络金额属 网络 推进 经回收通知 +		
Joint.	5	an liquid profile means of		
mergency Ready-to-Go Pack				
he Emergency Ready-to-Go Pack must be available and easily access	ible in the event of an eme	ergency. This contains a Disaster Supply Kit (including		
eeded medications) and Emergency Documents.	12	and loss visit, applied applied and the		
isaster Supply Kit				
irections: Review and determine that each item is adequately included nough supplies for each child in care. Also the items are clean, organiz	ed, and usable. Comment	t and note below if needed.		
⊠Flashlight ⊠Bottled w		Solder or binder for EPP documents		
Batteries for Flashlight Son-peris	nable tood	Backpack(s) or carrying case(s)		
⊠Portable First Ald Kit ⊠Diapers		⊠Consider special toys or games		
⊠ ⊠ Thermometer Change o	f clothes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags		
⊠Medications (N/A) ⊠Blanket(s		presidenta autorità della		

Emergency Ready-to-Go Pack is available and easily access	sible in the event of an emergency (Y	7NJ7 Y			
Location of The Emergency Ready to go Pack: In closet	of children's bedroom				
Item Specification (if needed);					
- 1 first aid kit, 1 duffie bag (carrying case), 1 flashligt	ht. 1 ok of AA battaries, 1 thermom	eter, 1 roll of duct tape, no spec meds, 2			
gallons of water, 4 canned foods, 4 packs of baby fo	ood, 1 pk of diapers and 1 pk of wit	ces, 2 outfits (top/bottom) for each child, 2			
blankets, 2 toys, 1 pair of scissors, 1 roll of trash ba					
statute of a real of a part of a statute of a last of a statute of	A STATISTICS IN MALE STATISTICS	<u>ar acces</u>			
Items to be reviewed on xx/xx/xxxxxXX					
Emergency Documents					
⊘Informal Provider Emergency Preparedness Plan ((this completed form)				
	In the completion form)				
Authorization for emergency medical care					
Planning and Maintenance					
Person responsible for updating the Disaster Supply Kit and	d the Emergency Documents regula	arly:			
First Name Last Nam	Last Name				
1. 27					
Alternative and a second s	Williams				
Description of how the Emergency Ready-to-Go Pack will b	e transported to an evacuation loca	stion: carried by the provider.			
Sheiter in Place Procedure:					
The provider will gather both children, carry the smaller chil	ld and hold the hand of the younger	child. He will grab the ERTG from the			
children's bedroom and they will head to the		e the tape and sealing plastic to secure the			
door and window if the need arose. He will call the parent to	o update them as well as 911 if nee	ded.			
Evacuation Location(s) Procedures:					
Primary: The provider would account for the children and E					
the rear-facing car seat and the older child in the forward-fa	acing car seat. Then the provider wi	Il drive to the and he will cal			
he parent on the way. Upon arrival the provider has key ac	cess, and he and the children will g	p into the basement(0 doors 0 windows).			
Once secured the provider will call or text the parent to info	rm them of the updates.				
Alternate: The Provider would carry the ERTG and the you	inger child and hold the hand of the	older child. He would ensure both children			
are secured in their car seats. The younger in their rear-fac	ing car seat and older in their forwa	rd-facing car seat. The provider will call the			
parent when they are secured in the vehicle and drive the and the children will go into the basement (2 doors 3 win	Upon arrival the pro-	vider has key access to the where			
he and the children will go into the basement (2 doors 3 win again to inform them of emergency updates.	idows). Once ne and the children a	re secured he will call of text the parent			
gain to morn men or emergency opcases.					
Signatures & Date					
Acknowledgement: By signing below the parties acknowledge	ge that all standards have been revi	ewed, and any corrections if needed have			
been discussed. The parties also acknowledge that, if appro	oved, the home in which care is pro-	vided is subject to random, unannounced			
pop up visit which will be conducted virtually or in-person.					
PROVIDER		INSPECTOR			
Printed Name: Jeffery Williams	Printed Name:				
Signature:	Signature:				
Date: 5/30/23 Phone:	Date: 05/05/2023	Phone: 1-877-227-0125			

⊠Virtual Inspection □In-person Inspection		epartment of Ec Care Care Scholarsh INFORMAL C PECTION CHI	Return to: ccs.informalproviders@maryland.gov			
Inspection Date: 9/30/2024	Time In: 1:30pm		Time Out: 2:15p	om Re	Result: Passed	
Informal Care			1.			
Type of Care (check one):	Non-relative Info	ormal Provider C	are Relative	e Informal	Provider Care	
Provider Information	12 Prenoszmice Da				Constant and a	
First Name: Violet Last Name: Williams Provider ID #:			1.1		ovider ID: 415029 nail:	
Care Location Inspected				1		
Street Address: Address Verified?: Yes	<u>City</u> :	Co	unty:		State: Zip Code.	
Name of Children in Care (a	add pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)	
			5/19/2020	4yrs/Y		
			1/11/2018	6yrs/ N		
			3/29/2013	11yrs/ N		
		1		1.1.1.0/		
Safety of the Home						
Directions: Review an Additional pages may	nd determine compliance be used for comments.	e with each stand	ard. Note any comr Y - Yes, N - No,	nents or co D – Discu	prrective actions needed. ssed, n/a – Not Applicable	
Health and Safety Training:			Standard Met Y/N		ents/Notes tive Action /Timeframe if needed	
Basic Health and Sa	afety Training Complete	ed?	Y	1		
Home is free of health and safety hazards:			Standard Met Y/N		ents/Notes tive Action /Timeframe if needed	
 Is in good repair 			Y			
 Is free of insect or ro 	odent infestation		Ŷ	1		
 Is well-lit and well-ve 	entilated		Y			
 Has hot and cold run 			Y	10.2		
 Has a working inside 	e toilet		Y	14		
	ing, lighting and heatin	g	Y			
 Has a working and s 	afe heating system		Y			
 Has a working refrig 	erator and stove		Y			
 Has a working telept 	hone		Y			
 Has operational smoke detector(s) 			Y	1		
Has first aid kit/supplies		Y	1			
 Has protective cover accessible to childre 	rings on any electrical on	outlet that is	Y			
Harmful items are stored appropriately and away from children:			Standard Met Y/N	and the second second	nts/Notes ve Action /Timeframe if needed	
 Sharp or pointed iter 	TIS		Y			
 Medications of any kind 			Y			
Matches, lighters and flammable products			Y			
Alcoholic beverages			Y			
Guns			Y			
• Guns	Cleaning agents					
			Y			
	es		Y			

MSDE OCC Informal Care Inspection Checklist 2020-03-26

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

Directions: Review and determine t	hat each item is adequately included in the Disaster	Supply Kit. Be certain that the Disaster Supply Kit
contains enough supplies for each of	child in care. Also that the items are clean, organized	l, 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	⊠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, organize	ed, and usable (Y/N)? Y
	ily accessible in the event of an emergency (Y/N)? Y
Location of Emergency Ready to go Pack: Dinin Item Specification (if needed): • To be observed for compliance on : •	ig room floor
Emergency Documents	
⊠Informal Provider Emergency Preparedne	ess Plan (this completed form)
⊠Authorization for emergency medical care	
Planning and Maintenance	
Person responsible for updating the Disaster Supp	ly Kit and the Emergency Documents regularly:
First Name Violet	Last Name Williams
The Provider will gather the ready to go bag and the window(s)). The provider will contact parent before Evacuation Procedures: The Provider will gather the children and the ready evacuation location gaining upon arrival of doors, #will know upon arrival of The Provider will gather the children and the ready evacuation location gaining access window(s)). The provider will contact parent before CARE HOURS: - Monday-Friday 8:30am-8pm	re, during and after sheltering.
Signatures & Date	
Acknowledgement: By signing below the parties ackno been discussed. The parties also acknowledge that, if pop up visit which will be conducted virtually or in-pers	owledge 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 son.
PROVIDER	INSPECTOR
Printed Name: Violet Willi	a m. 3 Printed Name:
Signature:	

Date: 10 3 2024 Phone:

Signature:

Date: 9/30/2024

Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection				f Child Care Return to: ccs.informalproviders@marylar ov				
nspection Date: 09/01/2023 Time In: 9:00AM			Time Out: 10:20/	AM Result	: PASSED			
Informal Care								
Type of Care (check or	ne): 🗆 Non-relati	ve Informal Provider C	are Relative	Informal Pro	wider Care			
Provider Information								
First Name: Violet Provider ID #:		Last Name: William	S	Provid Email:	ler ID: 415029			
	4-4	terreture and the second second		Email.				
Care Location Inspect	City:	County:	State	Zip Co	de:			
Address Verified? Yes	s. Care (add pages if need	ed) Scholarship	Date of Birth	Age	/ Present (Y/N)			
Name of Ghildren in G	care (aut pages in need	Scholarship	(03/29/2013)	10yr. / N				
			(01/11/2018)	5yr. / N				
			(05/19/2020)	3yr./N				
			(03/13/2020)	- J. / N				
Safety of the Hon	ne							
Directions: Review and pages may be used for	determine compliance v comments.	with each standard. Not	e any comments or c Y – Yes, N – No,	orrective action D – Discusse	ons needed. Additional ed, n/a – Not Applicable			
Health and Safety Tra	aining:		Standard Met Y/N		e Action /Timeframe if needed			
Basic Health and Safe	ty Training Completed?	2	Y	Relative I	Informal Care – Certificate Submitted			
Home is free of health and safety hazards:		Standard Met Y/N	Comment Corrective	s/Notes e Action /Timeframe if needed				
 Is in good rep 	Is in good repair		Y	All areas were clean				
 Is free of inse 	Is free of insect or rodent infestation		Y	No evidence of infestation				
Is well-lit and well-ventilated		Y		s were turned on and natural window lighting				
Has hot and cold running water		Y	Tested by provider and observed the ice m the clear glass					
Has a working inside toilet		Y	Flushed by provider and observed					
 Has utilities for 	 Has utilities for cooking, lighting and heating 		Y					
Has a working and safe heating system		Y	Therm	ostat tested by provider for cooling & heating				
 Has a working refrigerator and stove 		Y		ested 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	T	ested by provider and observed				
Has first aid kit/supplies		Y	Alcoho	I and Band-Aids under bathroom sink				
 Has protectiv accessible to 	e coverings on any ele children	ctrical outlet that is	Y	All	outlets were covered or occupied			
Harmful items are sto children:	ored appropriately an	d away from	Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed			
Sharp or poir	nted items		Y	Stored	d in knife holder on back of counter			
Medications			Y	S	tored in high cabinet in kitchen			
	iters and flammable pro	oducts	Y		Does not own			
Alcoholic bev			Y		Does not own			
Guns			Y		Does not own			
Cleaning age	ents				Stored outside in the shed			

Revised 10/2021

Poisonous substances	Y	Does not own
SENERAL CLEANLINESS STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diapering are		Youngest child where pull-ups at night
Trash, garbage and wet and soiled diapers are disposed of i sanitary manner.		Trash thrown away daily via kitchen or bathroom trash can
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	Pull-ups and wipes in bedroom
 Handwashing procedures are followed. Provider and child's 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 spreadisease. 	Ŷ	
CHILD ABUSE, NEGLECT AND MISTREATMENT STAND	ARDS 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 ch including leaving a child unattended under circumst that indicate that the child's health or welfare is harr placed at substantial risk of harm; Mental injury to a child, or a substantial risk of ment injury that is caused by the failure to give proper cal attention to a child. 	ances med or Y ral	
 A child in care is not subjected to mistreatment, including Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in child's mouth Requiring a child to stand on one foot as punishmer Tying child to a cot or other equipment 	Y	
The provider immediately reports any suspected child ab neglect or mistreatment by calling 911 and your local	use, Y	
Department of Social Services Child Protective Services		
Emergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily acc needed medications) and Emergency Documents.	essible in the event of an em	ergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit		
Directions: Review and determine that each item is adequately incluenough supplies for each child in care. Also the items are clean, orgation of the items are clean.	ided in the Disaster Supply K anized, and usable. Commen	it. Be certain that the Disaster Supply Kit contains t and note below if needed.
⊠ Flashlight ⊠Bottle		Section 2012 Folder or binder for EPP document
⊠Batteries for Flashlight ⊠Non-p	erishable food	Backpack(s) or carrying case(s)
☑Portable First Aid Kit		Consider special toys or games
⊠ Thermometer ⊠ Chang	ge of clothes	Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash

Medications (N/A)	⊠Blanket(s)		
Items in the Disaster Supply Kit are cle	an, organized, and usable (Y/N)	? Y	
Emergency Ready-to-Go Pack is avail			N)? Y
Location of The Emergency Ready t	o go Pack: Stored in dining ro	om near exit	
Item Specification (if needed):	first aid kit 1 thormomotor n	enerific made (bottlad	waters, 4 boxes of dried foods, 1 canned
food, crackers and fruit cup, 4 p	oull-ups and 1 pk of wipes, 1 s	uitcase (carrying case). 3	B outfits (top/bottom), 3 blankets, folder w/
tape. <u>tems to be reviewed on xx/xx/x</u>	DOC: N/A	6	
Emergency Documents			
☑ Informal Provider Emergency ☑ Authorization for emergency		pleted form)	
	nedical care		
Planning and Maintenance			
Person responsible for updating the D		ergency Documents regula	any:
First Name Violet	Last Name Williams		
Description of how the Emergency Re	ady-to-Go Pack will be transpo	orted to an evacuation loca	ation: carried by the provider.
Shelter In Place Procedure:			
youngest child secured in the rear-fac where to shelter. The provider will call Alternate: If they could not access th provider's vehicle and drive to secured in forward-facing car seat and	dest child is secured in her boo sing car seat. Upon arrival, the the parent once secured with e primary location, the provide The provider w d youngest child secured in the	oster seat, middle child se provider will receive instru- emergency updates. r will account for the child vill ensure the oldest child rear- facing car seat. Upo	cured in forward-facing car seat and about about ren, grab the ERTG and head to the is secured in her booster seat, middle child
Signatures & Date			
Acknowledgement: By signing below th	owledge that, if approved, the I	standards have been revie home in which care is prov	ewed, and any corrections if needed have vided is subject to random, unannounced
PROVIDE			INSPECTOR
Printed Name: Vidlet W	illiams	Printed Name:	
Signature:		Signature:	
Date: G 14 2023 Phone:		Date: 09/01/2023	Phone: 1-877-227-0125

	Chi	cation/Office of C ship Program CARE HECKLIST	ov			
Inspection Date: 08/25/20	22 Tim	e In: 1:45PM	Time Out: 3:00PM Resu		t: Needs a Follow -up	
Follow-up 08/30/2022	Tim	e In: 4:00PM	Time Out: 4:10P	PM Result: PASSED		
Informal Care						
Type of Care (check one):	Non-relative Int	formal Provider C	are Relative	Informal Pro	ovider Care	
Provider Information						
First Name: Violet	Las	t Name: Williams		Provid	der ID: 415029	
Provider ID #				Email	1	
Care Location Inspected						
Street Address: Address Verified? Yes	City:	Co	ounty:	St	ate Zip Code:	
		Scholarship	Date of Birth	Age	/ Present (Y/N)	
			3/29/2013	9 / Yes		
			1/11/2018	4 / Yes		
			5/19/2020	2 / Yes		
				1 1 1 1 1 1 2		
		1				
Safety of the Home						
Directions: Review and dete pages may be used for com		ach standard. Note	any comments or o Y - Yes, N - No,	D - Discusse	ons needed. Additional ed, n/a – Not Applicable	
Health and Safety Trainin	ng:		Standard Met Y/N	Comment	s/Notes e Action /Timeframe if needed	
Basic Health and Safety T	raining Completed?		Y	Certificate	Submitted	
Home is free of health ar	nd safety hazards:		Standard Met Y/N	Comment Corrective	s/Notes e Action /Timeframe if needed	
 Is in good repair 			Y	1		
 Is free of insect of 	r rodent infestation		Y	No Sign of	Infestation	
Is well-lit and well-ventilated		Y				
	· · · · · · · · · · · · · · · · · · ·		Y Steam observed			
Has a working inside toilet			Y	Cleaner ur	nder sink moved to shed shelf	
	ooking, lighting and heat	ing	Y	-		
Has a working and safe heating system		Y	Thermostat dialed up to 73			
	frigerator and stove		Y	-		
Has a working telephone		Y	Provider c	ell phone called		
 Has operational smoke detector(s) 		Y				
Has first aid kit/supplies		Y	Bandaids,	ointment, gauze		
 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:		ay from	Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed	
 Sharp or pointed 	items		Y	Moved to hi		
 Medications of ar 	ny kind		Y	Moved to hi	igh Shelf	
 Matches, lighters 	and flammable products	5	Y	None		
Alcoholic beverage	jes		Y			
Guns			Y	None		
Cleaning agents			Y	Moved Dow	Instairs	
 Poisonous substa 			Y	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 diaper	ing area.	Y	
Trash, garbage and wet and soiled diapers are dispos sanitary manner.	sed of in a	Y	
Child is changed immediately when s/he has a soiled diaper, clothing or bedding.	or wet	Ŷ	
Diapering procedures are followed.		Y	
 Handwashing procedures are followed. Provider and washed thoroughly with soap and warm running wate Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the disease. 	r after:	¥	
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, includi Physical injury Any sexual abuse Mental injury 	ing:	Y	
 A child in care is not subjected to any form of neglincluding: The failure to give proper care and attention including leaving a child unattended under c that indicate that the child's health or welfare placed at substantial risk of harm; Mental injury to a child, or a substantial risk injury that is caused by the failure to give proattention to a child. 	to a child ircumstances e is harmed or of mental	Y	
 A child in care is not subjected to mistreatment, in Any deliberate act that hurts a child physical emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful in child's mouth Requiring a child to stand on one foot as put Tying child to a cot or other equipment 	lly or tems in a	¥	
The provider immediately reports any suspected of neglect or mistreatment by calling 911 and your la Department of Social Services Child Protective Set	ocal	Y	
Emergency Ready-to-Go Pack			
The Emergency Ready-to-Go Pack must be available and e needed medications) and Emergency Documents.	easily accessible in	the event of an en	nergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit			
Directions: Review and determine that each item is adequa enough supplies for each child in care. Also the items are cl			
	Bottled water		Solder or binder for EPP documents
Batteries for Flashlight	⊠Non-perishable	food	Backpack(s) or carrying case(s)
⊠Portable First Aid Kit	⊠Diapers		⊠Consider special toys or games ⊠Heavy Duty Scissors, duct tape/

Thermometer

⊠ Change of clothes

packing tape & sealing plastic/trash

bags

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

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

Location of The Emergency Ready to go Pack: By the steps leading to the front door

Item Specification (if needed):

3 shirts, 3 shorts, 1 large and 1 small blankets,
1 extra DD batteries, 6 in 1 Game house game,
Band aids, cintment, gauze, tape, alcohol wipes, Neosporin, cold compress, gloves, Benadryl,
3 16oz water bottles, a cans of Chef Boyardee, can corn, tuna, 2 box cereal, one cup of Ramen noodle

Items to review on 08/30/2022 if needed: Observed

First aid kit for the ERTB - Observed 8/30/22 Cleaning agents relocated to high shelf in the shed- Observed 8/30/22

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: Rolled

Shelter In Place Procedure:

The provider will gather the children, the ERTB and head to the basement family room which has 2 doors and 2 windows. The provider will seal the shelter plastic and tape to seal if there is a need to. The provider will call the parent once they are secure basement.

Evacuation Procedures:

Then provider will grab the children and the ERTB and proceed to the provider's vehicle where she will secure two of the children in their car seats and the older child with seat belt before driving to the primary evacuation location **Concentration** Once there, the provider you will ask for directions as to where to shelter. The provider will call the parents before leaving the care location and after they are secure in the evacuation location.

If they couldn't shelter at the primary location, they will go to the alternate evacuation location Once there, they will shelter which has 3 doors and no windows. The provider will call the parents before leaving the care location and alter they are secure in the alternate evacuation location.

Signatures & Date

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

PROVIDER		INSPECTOR
Printed Name: Violet Williams	Printed Name:	
Signature:	Signature:	
Date: 8 30 22 Phone: 4	Date: 08/30/2022	Phone: 1-877-227-0125

⊠Virtual Inspection □In-person Inspection	Child	epartment of Ed Care Care Scholarsh INFORMAL C PECTION CHE	ip Program ARE	of Child	Return ccs.in		oviders@maryland.gc
Inspection Date: 6/13/2024	Time	In: 3:30pm	Time Out: 4:36	Spm Re	sult: Pas	ssed	
Inspection Date: 6/13/2024	Time	In: 5:25pm	Time Out: 4:36	Spm Re	sult: Pas	ssed	
Informal Care					-		-
Type of Care (check one):	on-relative Info	rmal Provider Ca	are 🛛 Relativ	ve Informal	Provider	Care	
Provider Information							
First Name: Noel Provider ID #:	Last M	Name: Williams	on			: 54599	5
Care Location Inspected					nail:		
Street Address: Address Verified?: Yes	<u>City</u> :	County		State:	<u>Z</u>	ip Code:	
Name of Children in Care (add page	s if needed)	Scholarship	Date of Birth	Age	1	Prese	nt (Y/N)
			6/24/2023	9 mont		riese	
Safety of the Home		-	0/2 1/2020	0 mon	11371		
Directions: Review and deterr Additional pages may be used	nine compliance for comments.	with each standa	Y - Yes, N - No,	, D – Discu	ssed, n/	a – Not A	eded. pplicable
lealth and Safety Training:			Standard Met Y/N		ents/Note		rame if needed
Basic Health and Safety Trai	ning Completed	d?	Y		ave nette	onvine	rame in needed
lome is free of health and safety h	azards:		Standard Met Y/N		ents/Note		rame if needed
 Is in good repair 			Y				
Is free of insect or rodent infe	estation		Y				
Is well-lit and well-ventilated			Y				
Has hot and cold running wa	ter		Y				
Has a working inside toilet			Y				
Has utilities for cooking, light			Y				
Has a working and safe heat		-	Y				
 Has a working refrigerator an Has a working telephone 	d stove		Y				
ride a working telephone			Y	1			
 Has operational smoke detect Has first aid kit/supplies 	tor(s)		Y				
			Y				
accessible to children			Y				
armful items are stored appropriat ildren:	ely and away f	rom	Standard Met Y/N	Comment			me if needed
Sharp or pointed items			Y				
 Medications of any kind Matches, lighters and flamma 	02.072.02		Y				
indication, lighters and hamma	pie products		Y				
Alcoholic beverages Guns			Y				
	111		Y				
Cleaning agentsPoisonous substances			Y				
			Y				
NERAL CLEANLINESS STANDAR			Standard Met Y/N	Comments Corrective	s/Notes Action	/Timefrai	me if needed
areas of the home are kept clean, in	cluding diaperir	ng 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	Concerve Action/ Intername in needed
 A child in care is not subjected to any form of neglect, ncluding: The failure to give proper care and attention to a child including leaving a child unattended under circumstances that indicate that the child's health or welfare is harmed or placed at substantial risk of harm; Mental injury to a child, or a substantial risk of mental injury that is caused by the failure to give proper care and attention to a child. 	Y	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Y	
the provider immediately reports any suspected child abuse, eglect or mistreatment by calling 911 and your <u>local</u> Department of Social Services Child Protective Services Unit.	Y	
mergency Ready-to-Go Pack		
The Emergency Ready-to-Go Pack must be available and easily acce (including needed medications) and Emergency Documents.	essible in the event	of an emergency. This contains a Disaster Supply Kit
isaster Supply Kit		
Directions: Review and determine that each item is adequately include contains enough supplies for each child in care. Also that the items are	ded in the Disaster S re clean, organized	Supply Kit. Be certain that the Disaster Supply Kit
⊠Flashlight ⊠Bottled water	Contraction (Solution Comments and hole below in needed.
⊠Batteries ⊠Non-perishable	food	Backpack(s) or carrying case(s)
Portable First Aid Kit Diapers		☑ Consider special toys or games
⊠Thermometer ⊠Change of clothe	es	 Heavy Duty Scissors, Duct Tape/ Packing Tape & Sealing Plastic/ Trash
		Bags
⊠Medications ⊠Blanket(s)		
Medications Blanket(s) Items in the Disaster Supply Kit are clean, organized, and usable (Y/N)?	Vos	

Location of Emergency Ready to go Pa	ck: Front Door			
Item Specification (if needed):				
Phone Charger				
Can Opener				
Tote and Diaper Bag	man in the second			
To be observed for compliance on 56/1 Emergency Care and Medication	3/2024 : Observed			
<u>Emergency</u> care and medication	Authorization			
Emergency Documents				
⊠Informal Provider Emergency Pre		mpleted form)		
☑Authorization for emergency med	ical care			
Planning and Maintenance				
Person responsible for updating the Disast	er Supply Kit and the Er	mergency Documents reg	ularly:	
First Name Noel	Last Name Willia	amson		
Description of how the Emergency Ready-	to-Go Pack will be trans	ported to an evacuation lo	cation	
Shelter In Place Procedures:			outon.	
child in the (1 doors 1 v The Provider will grab the baby and the em seat and go to the feature in her car to inform the parent of the child in (1 doors 2) CARE HOURS:	e emergency. Upon arriv windows). ergency bag and put the On the way to this loca e emergency. Upon arriv windows).	val the provider would cal val the provider will ose items in the trunk. She ation the Provider would ca val the provider	If the parent using the execute the classifier of the parent using the par	e hands free calling and shelter with the hild in a rear facing car he hands free calling and shelter with the
Acknowledgement: By signing below the partie been discussed. The parties also acknowledge	es acknowledge that all st	andards have been reviewe	ed, and any correction	s if needed have
been discussed. The parties also acknowledge pop up visit which will be conducted virtually o	r in-person.	me in which care is provide	d is subject to random	unannounced
PROVIDER			INSPECTOR	
Printed Name: Hally Jalillian		Printed Name:		
		Signature:		
Phone Phone		Date: 6/13/2024	Phone: 1.07	2027 0105
		Later GrocLUL4	Phone: 1-877	-227-0125

In-person Inspection Maryland State Department of Education/Office of Child Care Return to: In-person Inspection INFORMAL CARE ov						
Inspection Date: 05/08/2023	spection Date: 05/08/2023 Time In: 10:30AM Time Out: 11:28			AM Result	PASSED	
Informal Care					Strate Laboration	
Type of Care (check one):	Non-relative Info	rmal Provider C	are Relative	Informal Pro	vider Care	
Provider Information		U.S. Carlos			the second s	
	1	Name: Wills		Provid	er ID: <u>514198</u>	
First Name : Connie Provider ID #:	Last	vame. Wills		Email:		
Care Location Inspected	10-10-53	-144	and the set			
Street Address: City: Address Verified? Yes.	Count	ty:	State Zip 0	Code:	×	
Name of Children in Care (add	pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)	
			(06/23/2021)	1yr./Y		
			(01/12/2023)	3mos./Y		
Coloty of the Llores						
Safety of the Home	P	h standard blate	anu nomento or o	orrective actio		
Directions: Review and determine pages may be used for comments.	compliance with eac	n standard, Note	Y - Yes, N - No,	D - Discusse	ed, n/a - Not Applicable	
Health and Safety Training:			Standard Met Y/N	Comment	s/Notes Action /Timeframe if needed	
Basic Health and Safety Training	Completed?		Y	Relative I	nformal Care – Certificate Submitted	
Home is free of health and safe	And the second se		Standard Met Y/N	Comments Corrective	s/Notes e Action /Timeframe if needed	
Is in good repair			Y		All areas were clean	
 Is free of insect or rode 	nt infestation		Y		No evidence of infestation	
Is well-lit and well-venti	lated		Y		s were turned on and natural window lighting	
Has hot and cold runnin	ng water		Y	Tested by provider and steam observed or camera		
Has a working inside to			Y	Flushed by provider and observed		
Has utilities for cooking	, lighting and heatin	g	Y	There	- to the start by any idea for appling 9	
Has a working and safe	heating system		Y		ostat tested by provider for cooling & heating	
 Has a working refrigera 			Y		ested by provider and observed	
Has a working telephon			Y		ound call made to provider's phone	
Has operational smoke			Y	-	ested by provider and observed rst Aid Kit stored on top of fridge	
Has first aid kit/supplies			Y			
Has protective covering accessible to children			Y		outlets were occupied or covered	
Harmful items are stored appr children:	opriately and away	from	Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed	
Sharp or pointed items			Y		ed on top of fridge in knife holder	
Medications of any kind	1		Y		ed on high shelf in hallway closet	
Matches, lighters and fl			Y		Does not own	
Alcoholic beverages	Presente Pre		Y		Does not own	
Guns			Y		Does not own	
Cleaning agents			Y	All cleaning	agents in locked bathroom and kitchen cabinets	
Poisonous substances		Y	Wh	en purchased stored in the shed		

GENERAL CLEANLINESS STANDARDS	Standard Y/N		Comments/Notes Corrective Action /Timeframe if needed
All areas of the home are kept clean, including diaperi	ng area. Y		Diapering area in play room with all necessary supplies for both children
Trash, garbage and wet and soiled diapers are dispos sanitary manner.	ed of in a Y		Diapers are thrown away daily in the diaper genie
Child is changed immediately when s/he has a soiled diaper, clothing or bedding.	or wet Y		
Diapering procedures are followed.	Y		
 Handwashing procedures are followed. Provider and washed thoroughly with soap and warm running water Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent the disease. 	after:		
CHILD ABUSE, NEGLECT AND MISTREATMENT S	TANDARDS Standard		Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, includir Physical injury Any sexual abuse Mental injury 	ng: Y		
 A child in care is not subjected to any form of neglincluding: The failure to give proper care and attention t including leaving a child unattended under circulate that indicate that the child's health or welfare placed at substantial risk of harm; Mental injury to a child, or a substantial risk or injury that is caused by the failure to give proattention to a child. 	to a child roumstances is harmed or Y f mental		
 A child in care is not subjected to mistreatment, in: Any deliberate act that hurts a child physically emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful ite child's mouth Requiring a child to stand on one foot as pun Tying child to a cot or other equipment 	yor Yemsina		
The provider immediately reports any suspected cl neglect or mistreatment by calling 911 and your <u>los</u> Department of Social Services Child Protective Ser	cal Y		
Emergency Ready-to-Go Pack			
The Emergency Ready-to-Go Pack must be available and ea needed medications) and Emergency Documents.	sily accessible in the event o	f an emer	rgency, This contains a Disaster Supply Kit (including
Disaster Supply Kit			
Directions: Review and determine that each item is adequate enough supplies for each child in care. Also the items are cle	ely included in the Disaster S an, organized, and usable. C	upply Kit. omment a	Be certain that the Disaster Supply Kit contains and note below if needed.
⊠Flashlight D	Bottled water		Solder or binder for EPP documents
	Non-perishable food		⊠Backpack(s) or carrying case(s)
	Diapers		⊠Consider special toys or games
⊠Thermometer ⊠Change of clo			⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash
			bags

⊠Medications

Blanket(s)

Revised 10/2021

	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 g	o Pack: Stored on the hanging wall of the basement entry way
Item Specification (if needed):	
- 1 backpack (carrying case), 1 first	aid, 1 large blanket, 2 outfits (top/bottom), 5 diapers w/ 1 pk of wipes, no spec meds, 1
	flashlight, 1 pk of AAA batteries, 3 bottled waters, 1 pair of scissors, 1 pk of sealing plastic, 3
canned foods, 1 coloring book w/ Items to be reviewed on xx/xx/xxxx: N/	crayons, and folder w/ EPP and ECMA for ea. Child,
Items to be reviewed on AAAAAAAAA. NA	
Emergency Documents	
⊠Informal Provider Emergency Pro	eparedness Plan (this completed form)
⊠Authorization for emergency mee	dical care
Planning and Maintenance	
Person responsible for updating the Disar	ster Supply Kit and the Emergency Documents regularly:
First Name John	Last Name Poffenberger
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 g sealing plastic and tape to secure the doc updates.	grab the ERTG and go into an an a
Evacuation Procedures:	
and a second	e children and grab the ERTG backpack, the provider will secure the smallest child in their safe
stroller, the older child will hold provider's walk to the Upon arrival the provider will call or text the parent before Alternate: If they could not access the p hold her hand. She will place the ERTG u she will be asking the	hand and the provider will secure the ERTG under the bottom of the stroller, and then they will provider will speak with someone at the stroller of specific instructions of where to shelter. The
stroller, the older child will hold provider's walk to the provider will call or text the parent before Alternate: If they could not access the p hold her hand. She will place the ERTG u she will be asking the they are safe to leave or parent arrives.	hand and the provider will secure the ERTG under the bottom of the stroller, and then they will provider will speak with someone at the stroller of specific instructions of where to shelter. The and after they are secured. rimary location, the provider will secure the smallest child in the safety stroller and the oldest will nderneath the stroller carrier and they will walk to the stroller and the oldest will be the stroller and the stroller and the oldest will nderneath the stroller carrier and they will walk to the stroller and the stroller a
stroller, the older child will hold provider's walk to the Upon arrival the provider will call or text the parent before Alternate: If they could not access the p hold her hand. She will place the ERTG u she will be asking the they are safe to leave or parent arrives. Signatures & Date	hand and the provider will secure the ERTG under the bottom of the stroller, and then they will provider will speak with someone at the specific instructions of where to shelter. The and after they are secured. rimary location, the provider will secure the smallest child in the safety stroller and the oldest we indemeath the stroller carrier and they will walk to the secure the specific instruction of where to shelter. The for instruction of where to shelter. The provider will call the parent and stay there until
stroller, the older child will hold provider's walk to the Upon arrival the provider will call or text the parent before Alternate: If they could not access the p hold her hand. She will place the ERTG u she will be asking the they are safe to leave or parent arrives. Signatures & Date Acknowledgement: By signing below the p been discussed. The parties also acknowl	hand and the provider will secure the ERTG under the bottom of the stroller, and then they will provider will speak with someone at the specific instructions of where to shelter. The and after they are secured. The provider will secure the smallest child in the safety stroller and the oldest will ndemeath the stroller carrier and they will walk to the secure will call the parent and stay there until for instruction of where to shelter. The provider will call the parent and stay there until arties acknowledge that all standards have been reviewed, and any corrections if needed have edge that, if approved, the home in which care is provided is subject to random, unannounced
stroller, the older child will hold provider's walk to the Upon arrival the provider will call or text the parent before Alternate: If they could not access the p hold her hand. She will place the ERTG u she will be asking the they are safe to leave or parent arrives. Signatures & Date Acknowledgement: By signing below the p	hand and the provider will secure the ERTG under the bottom of the stroller, and then they will provider will speak with someone at the specific instructions of where to shelter. The and after they are secured. The provider will secure the smallest child in the safety stroller and the oldest will ndemeath the stroller carrier and they will walk to the secure will call the parent and stay there until for instruction of where to shelter. The provider will call the parent and stay there until arties acknowledge that all standards have been reviewed, and any corrections if needed have edge that, if approved, the home in which care is provided is subject to random, unannounced
stroller, the older child will hold provider's walk to the provider will call or text the parent before Alternate: If they could not access the p hold her hand. She will place the ERTG u she will be asking the they are safe to leave or parent arrives. Signatures & Date Acknowledgement: By signing below the p been discussed. The parties also acknowl pop up visit which will be conducted virtua	hand and the provider will secure the ERTG under the bottom of the stroller, and then they will provider will speak with someone at the secure of the specific instructions of where to shelter. The and after they are secured. The stroller carrier and they will walk to the secure the smallest child in the safety stroller and the oldest will for instruction of where to shelter. The provider will call the parent and stay there until arties acknowledge that all standards have been reviewed, and any corrections if needed have edge that, if approved, the home in which care is provided is subject to random, unannounced lly or in-person. INSPECTOR

Date: 5/11/2023

Phone:

Date: 05/08/2023

Phone: 1-877-227-0125

INFORMAL CHILD CARE INSPECTION REPORT

INSPECTION DATE/TIME/DURATION: 3/28/2025/3:30pm/46	INS	PECTION TYPE	AGES	Total Approved	# Scholarship	# Present	Resident Children
		Initial Application	0-23 months				
	~	Renewal Application	2 year olds	I	I		
PROVIDER ID:		Complaint Investigation	3 year olds				
535905		Monitoring	4 year olds				
APPLICATION DATE:		Other	5's (pre-school)				
02/26/2025		·	5-12 (school age)				
		Follow-Up	13-19 year olds				
Harford			TOTAL I I				
			Overnight				

FATALITY:	SERIOUS INJURY:	COMPLAINT #:			
N/A	N/A	N/A			
INFORMAL PROVIDER PHOTO ID VERIFIED:	Yes No ID TYPE: Driver License		EXP. DATE: 04/20/2032		
CARE LOCATION: O Child's Home Informal Child Care Provider's Home					
CARE TYPE: Relative Informal Child Care Non-Relative Informal Child Care					
INFORMAL PROVIDER NAME: Kimberly Winter					
PERSON(S) INTERVIEWED: Kimberly Winter					

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

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

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

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

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

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

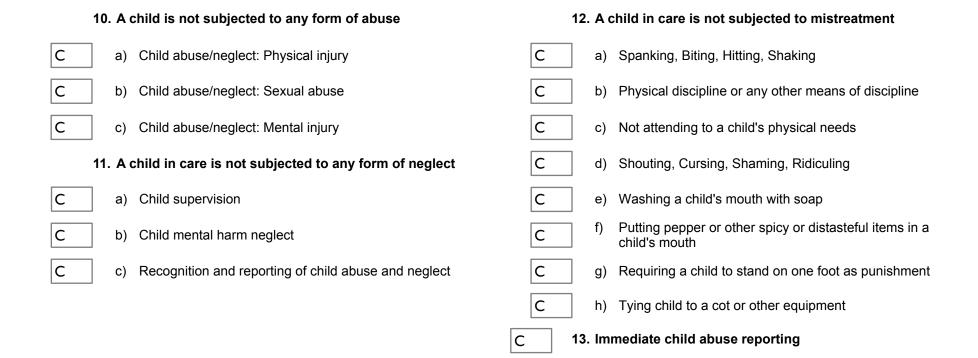
All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

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

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

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Part 3 – Child Abuse, Neglect and Mistreatment Standards



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

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

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

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Part 4 – Vehicular Traffic and Transportation Safety



Part 5 – Outdoor Activity Area

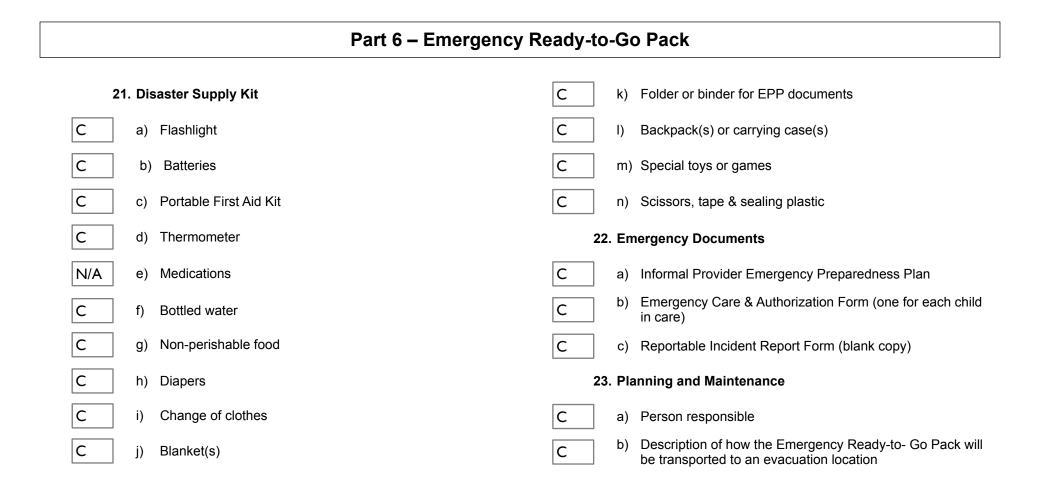
17. Safe outdoor play area С 20. Pool Safety С a) 4 ft. fence that surrounds the pool Ν 18. Enclosed safe play area b) Self-closing and self-latching mechanism on the С 19. Traffic and congested areas assessment N entry/exit way С c) Secured Lock С d) Sensor or alarm on the access door

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

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

- 2. Select the Standard that requires documentation and enter the compliance status.
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All Informal Child Care inspection standards herein are governed by COMAR #: 13A.14.06.11.F.12(b).

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

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

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

consistent with standards for parental consent



Time Out:	03/28/2025	16:16
	Date	Time

	Т	ïm

Date	Start Time	End Time	Duration	Follow-Up
03/28/2025	15:30	16:16	46	
04/09/2025	13:30	13:35	5	\checkmark
	13:30	13:35	5	

Total Duration:	46
	Minutes

Informal Child Care Inspection FOLLOW-UP INSPECTION REPORT

Review and sign at time of a follow-up inspection to address any noncompliances

INSPECTION DATE/TIME/DURATION: 4/9/20251:30PM/5	INSPECTION TYPE: Follow-Up Inspection	AGES	Total Approved	# Scholarship	# Present	Resident Children
PROVIDER ID: 535905	APPLICANT ID:	2yrs	l	I		
INFORMAL PROVIDER NAME: Kimberly Winter	PERSON(S) INTERVIEWED: Kimberly Winter					

CARE LOCATION: O Child's Home Informal Child Care Provider's Home CARE TYPE: Relative Care Non-Relative Ca	INFORMAL PROVIDER PHOTO ID VERIFIED:	• Yes	No	ID TYPE: Driver Licen	se	EXP. DATE: 4/20/2032
	CARE LOCATION: O Child's Home	Informal Child Care F	Provider's Home	CARE TYPE:	Relative Care	Non-Relative Care

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

C = In Compliance, D = Discussed, N = Not in Compliance, X = Not Inspected, NA = Not Applicable

	Standard #	Inspection #	Standard Description			
С	IIS.P5.18	18		rea Safety: The outdoor activity area shall be e from accessible hazards such as a heavily		
С	IIS.P5.20.b	20b		Safety: Any pool on the premises shall be made have security features including a self-closing ar		
				Sign and upload form to	Includes overflow page	
Kimberly	y Winter		04/09/2025	PROVIDER PORTAL	Liliana Martinez	04/09/2025
Signat	ure of Informal C	child Care Prov	vider Date		Signature of Agency Representative	Date

Signature of Informal Child Care Provider ICCP Form IR108c

SUMMARY OF CORRECTION

PROVIDER ID:	APPLICANT ID:	ZIP CODE:	COUNTY:
535905	-	21047	Harford
INFORMAL PROVIDER NAME:		CARE LOCATION:	
Kimberly Winter		Child's H	ome (Informal Child Care Provider's Home
PERSON(S) INTERVIEWED:			
Kimberly Winter			
VISIT TYPE:		INSPECTION TIME/DATE/DURATION:	
Renewal Application		3/28/2025/3:30pm/46	

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

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

STANDARD NUMBER	STANDARD TEXT	SUMMARY OF CORRECTION	DATE OF CORRECTION
IIS.P5.18	Outdoor Activity Area, Outdoor Area Safety: The outdoor activity area shall be enclosed to protect children in care from accessible hazards such as a heavily trafficked area, a body of water, or environmental hazards	Confirmed that the play area is safe for the child to play outside.	04/09/2025
IIS.P5.20.b	Outdoor Activity Area, Pool Area Safety: Any pool on the premises shall be made inaccessible to children in care and have security features including a self-closing and self-latching mechanism on the entry/exit way	We confirmed that a fence is not required	04/09/2025

∟iliana Martinez	04/25	Complete	Includes overflow page	
Signature of Agency Representative	Date	Complete		ICC

ICCP Form SOC108c

Maryland State Department of Education/Office of Child Care Care Child Care Scholarship Program Inspection INFORMAL CARE INSPECTION CHECKLIST					Return to: ccs informalproviders@maryland.gov
Inspection Date: 6/27/2024	Tim	e In: 1:30pm	Time Out 2:60p	m Re	sult: Passed
Informal Care					
Type of Care (check one):	D Non-relative In	formal Provider Cr	are Relativ	a Informal	Provider Care
Provider Information					
First Name Aniyah Provider ID #	Las	Nama: Wiseman	1		ovider ID: 554666
				En	nail:
Care Location Inspected	Citra	Court		_	State: Zip Code:
Street Address Address Verified?: Yes	City	Count	8		State: Zip Code:
Name of Children in Care (a	dd pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
			2/25/2015	0 years	
			2/25/2015	9 years	; old/Y
Safety of the Home					
					rrective actions needed.
Additional pages may	be used for comments			1	ssed, n/a - Not Applicable
lealth and Safety Training:			Standard Met Y/N		ents/Notes live Action /Timetrame if needed
Basic Health and Sa	fety Training Complet	ed?	Y		
Home is free of health and e	afety hazards:		Standard Met Y/N		ents/Notes live Action /Timeframe if needed
 Is in good repair 			Y		
 Is free of insect or ro 	dent infestation		Y		
 is well-lit and well-ve 	ntilated		Y		
 Has hot and cold run 	ning water		Y		
 Has a working inside 	toilet		Y		
 Has utilities for cooki 	ng, lighting and heati	ng	۲	-	
 Has a working and s 			Y		
 Has a working refrige 			Y		
 Has a working teleph 	ione		Y	-	
 Has operational smo 			Y	-	
 Has first aid kit/suppl 			Y		
 Has protective cover accessible to children 		oullet that is	Y		
larmful items are stored ap children:	propriately and awa	y from	Standard Met Y/N		nts/Notes ve Action /Timeframe if needed
 Sharp or pointed item 	15		Y		
 Medications of any kit 			Y		
· Matches, lighters and	flammable products		Y		
Alcoholic beverages			Y		
• Guns			Y	NOT KEP	T IN THE HOME
 Cleaning agents 			Y		
 Poisonous substance 	6		Y		
ENERAL CLEANLINESS ST	TANDARDS		Standard Met Y/N		nts/Notes ve Action /Timeframe if needed
Il areas of the home are kept	clean, including diap	oring area.	Y		

	1		5
Trash, garbage and wet and soiled diapers are d sanitary manner.	lisposed of in a	Y	
Child is changed immediately when s/he has a si diaper, clothing or bedding.	oiled or wet	Y	
Diapering procedures are followed.		Y	
 Handwashing procedures are followed. Provider washed thoroughly with soap and warm running Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevend isease. 	water after: ent the spread of	Y	
CHILD ABUSE, NEGLECT AND MISTREATME	NT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abuse, in • Physical injury • Any sexual abuse • Mental injury	cluding:	Y	
 A child in care is not subjected to any form of including: The failure to give proper care and atter including leaving a child unattended und that indicate that the child's health or we placed at substantial risk of harm; Mental injury to a child, or a substantial injury that is caused by the failure to give attention to a child. 	ntion to a child der circumstances elfare is harmed or risk of mental	Y	
 A child in care is not subjected to mistreatme Any deliberate act that hurts a child phy emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distaste child's mouth Requiring a child to stand on one foot as Tying child to a cot or other equipment 	sically or s sful items in a	Y	
The provider immediately reports any suspect neglect or mistreatment by calling 911 and you Department of Social Services Chold Protective	ur local	Y	
Emergency Ready-to-Go Pack The Emergency Ready-to-Go Pack must be a (including needed medications) and Emerger	available and easily acces	sible in the even	l of an emergency. This contains a Disaster Supply Kit
Disaster Supply Kit	icy Doluments.		
Directions: Review and determine that each i	item is adequately include re. Also that the items are	d in the Disaster	Supply KiL Be certain that the Disaster Supply Kit d, and usable. Comment and note below if needed.
⊠ Flashlight ⊠Batteries	⊠Bottled water ⊠Non-perishable fo	1.5	SFolder or binder for EPP documents Backpack(s) or carrying case(s)
Portable First Aid Kit	Diapers		Consider special toys or games

Thermometer

Medications N/A

N.

1

Schange of clothes

Blanket(s)

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

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

MSDE OCC Informal Care Inspection Checklist 2020-03-26

Yes

	and easily accessible in the event of an emergency (YIN)? Yes
Location of Emergency Ready to go P	k: Kept in the kitchen
Item Specification (if needed):	
To be observed for compliance on :	
Emergency Documents	
Sublemat Provider Emergency P Authorization for emergency ma	paredness Plan (this completed form) ical care
Planning and Maintenance	
Person responsible for updating the Disa	er Supply Kit and the Emergency Documents regularly
First Name Aniyah	Last Name Wiseman
attendance sheet to ensure that the child bag and they would go down to the Parents to inform them of the emergency	he microphone to have them come down to the kitchen. The Provider would use the en are accounted for. How would grab the pink bag while the provider would grab the o (1 door 2 windows). Once all children are secured the Provider would contact the
The Provider would call the children over attendance sheet to ensure that the child bag and they would go down the stairs a car seats (1 rear facing 2 forward facing lock down situ lock	ions, otherwise she would be provider would contact the Parents to inform them of the all children are secured the Provider would contact the Parents to inform them of the the microphone to have them come down to the kitchen. The Provider would use the en are accounted for the would grab the pink bag while the provider would grab the or d out to the minivan. The 9 year olds would be in a booster seat and the younger 3 would The Provider would drive to the would be in a booster seat and the younger 3 would the Provider would drive to the second be an another secured the provider would grain entry by shelter in the important (2 doors 1 window). Once all children are secured the Provider would grain entry by shelter in the important (2 doors 1 window). Once all children are secured the provider would the provider
attendance sheet to ensure that the child bag and they would go down the stairs a car seats (1 rear facing 2 forward facing lock down shu the stairs at the shift of the shift of the emergency. The Provider would call the children ove attendance sheet to ensure that the child bag and they would go down the stairs a car seats (1 rear facing 2 forward facing contact the Parents to inform them of the CARE HOURS:	en are accounted for. The 9 year olds would grab the pink bag while the provider would grab the of d out to the minivan. The 9 year olds would be in a booster seat and the younger 3 would in The Provider would drive to the statement of the where she would gain entry by walking ions, otherwise she would be in a booster seat and the younger 3 would shells a all children are secured the Provider would contact the Parents to inform them of the mare accounted for would grab the pink bag while the provider would grab the of d out to the minivan. The 9 year olds would be in a booster seat and the younger 3 would in The Provider would drive to the statement of the pink bag while the provider would grab the of d out to the minivan. The 9 year olds would be in a booster seat and the younger 3 would in The Provider would drive to the statement of the statement where she would gain entry by shelter in the statement (2 doors 1 window). Once all children are secured the Provider would amergency.
The Provider would call the children over attendance sheet to ensure that the child bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bock down situ the stairs at 1 door 0 windows). Or emergency. The Provider would call the children over attendance sheet to ensure that the child bag and they would go down the stairs a car seats (1 rear facing 2 forward facing book down the stairs at car seats (1 rear facing 2 forward facing book down the stairs at car seats (1 rear facing 2 forward facing book down the stairs at car seats (1 rear facing 2 forward facing book down the stairs at car seats (1 rear facing 2 forward facing book down the stairs at contact the Parents to inform them of the CARE HOURS: Signatures & Date Acknowledgement: By signing balow the p been discussed. The parties also acknowled	en are accounted for. The 9 year olds would grab the pink bag while the provider would grab the of di out to the minivan. The 9 year olds would be in a booster seat and the younger 3 would in The Provider would drive to the statement of the where she would gain entry by walking ions, otherwise she would the Provider would contact the Parents to inform them of the e all children are secured the Provider would contact the Parents to inform them of the mare accounted for the would grab the pink bag while the provider would grab the of d out to the minivan. The 9 year olds would be in a booster seat and the younger 3 would i The Provider would drive to the statement of the pink bag while the provider would grab the of d out to the minivan. The 9 year olds would be in a booster seat and the younger 3 would i The Provider would drive to the statement of the provider would gain entry by shelter in the interact (2 doors 1 window). Once all children are secured the Provider would amergency.
The Provider would call the children over attendance sheet to ensure that the child bag and they would go down the stairs a car seats (1 rear facing 2 forward facing lock down shu the stairs at 1 door 0 windows). Or emergency. The Provider would call the children over attendance sheet to ensure that the child bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing bag and they would go down the stairs a car seats (1 rear facing 2 forward facing contact the bag and they would go down the stairs a car seats (1 rear facing 2 forward facing 1 forward facing 1 forward facing 1 forward 1	en are accounted for. The 9 year olds would grab the pink bag while the provider would grab the of di out to the minivan. The 9 year olds would be in a booster seat and the younger 3 would in The Provider would drive to the statement of the where she would gain entry by walking ions, otherwise she would the Provider would contact the Parents to inform them of the e all children are secured the Provider would contact the Parents to inform them of the mare accounted for the would grab the pink bag while the provider would grab the of d out to the minivan. The 9 year olds would be in a booster seat and the younger 3 would i The Provider would drive to the statement of the pink bag while the provider would grab the of d out to the minivan. The 9 year olds would be in a booster seat and the younger 3 would i The Provider would drive to the statement of the provider would gain entry by shelter in the interact (2 doors 1 window). Once all children are secured the Provider would amergency.
The Provider would call the children over attendance sheet to ensure that the child bag and they would go down the stairs a car seats (1 rear facing 2 forward facing) bock down situ the stairs at 1 door 0 windows). Or emergency. The Provider would call the children over attendance sheet to ensure that the child bag and they would go down the stairs a car seats (1 rear facing 2 forward facing to contact the Parents to inform them of the CARE HOURS: 	en are accounted for. The 9 year olds would grab the prik bag while the provider would grab the of dout to the minivan. The 9 year olds would be in a booster seat and the younger 3 would in The Provider would drive to the the second
The Provider would call the children over attendance sheet to ensure that the child bag and they would go down the stairs a car seats (1 rear facing 2 forward facing) bock down situ the stairs and the stairs and the children over attendance sheet to ensure that the child bag and they would call the children over attendance sheet to ensure that the child bag and they would go down the stairs a car seats (1 rear facing 2 forward facing) . Once inside she would contact the Parents to inform them of the CARE HOURS: Signatures & Date Acknowledgement: By signing below the p been discussed. The parties also acknowle pop up visit which will be conducted virtual	en are accounted for. The 9 year olds would grab the prik bag while the provider would grab the of dout to the minivan. The 9 year olds would be in a booster seat and the younger 3 would in The Provider would drive to the the second

⊠Virtual Inspection □In-person Inspection	IN	artment of Ec Care are Scholarsh IFORMAL C ECTION CHI	nip Program ARE	Child	Return to: ccs.informalp	providers@maryland.gov
Inspection Date: 02/04/2025	Time In	: 1:45 pm	Time Out: 2:25 pm Result: Passed			
Informal Care	-	-				
Type of Care (check one):	Non-relative Inform	al Provider C	are ⊠Relative	Informal	Provider Care	
Provider Information				monnari		-
First Name: Gloria	Last Na	me: Witherspo	200	Pro	vider ID: 4863	75
Provider ID #:	Lastina	me. witherspi	5011		ail:	
Care Location Inspected	1			1		
Street Address:	<u>City</u> :	Cou	nty:	1	State:	Zip Code:
Address Verified?: Yes						
Name of Children in Care (add pag	ges if needed)	Scholarship	Date of Birth	Age		sent (Y/N)
			9/11/2013		s old/ N	
			02/09/2012	12 year	s old/ N	
Safety of the Home						
Directions: Review and dete	ermine compliance w	ith each stand	ard Note any comm	ents or co	rective actions	needed
Additional pages may be use		nin each stand	Y-Yes, N-No, I			
Health and Safety Training:			Standard Met Y/N		ents/Notes ive Action /Tim	neframe if needed
Basic Health and Safety Tr	raining Completed?	,	Y	1.		
Home is free of health and safety	hazards:	-	Standard Met Y/N		ents/Notes ive Action /Tim	neframe if needed
Is in good repair			Y			
Is free of insect or rodent in	nfestation		Y			
 Is well-lit and well-ventilate 	ed		Y			
 Has hot and cold running v 	water		Y			
Has a working inside toilet			Y			
Has utilities for cooking, lig	phting and heating		Y			
 Has a working and safe he 	eating system	_	Y			
Has a working refrigerator	and stove		Y			
Has a working telephone			Y			
 Has operational smoke de 	tector(s)	_	Ŷ			
Has first aid kit/supplies		1. Cost of Data	Y			
 Has protective coverings or accessible to children 	on any electrical out	let that is	Y			
Harmful items are stored appropr children:	riately and away fr	om	Standard Met Y/N		ents/Notes ive Action /Tim	neframe if needed
Sharp or pointed items			Y			
Medications of any kind			Y			
 Matches, lighters and flam 	mable products		Y			
Alcoholic beverages			Y			
Guns			Y	1		
Cleaning agents			Y			
Poisonous substances			Y			
GENERAL CLEANLINESS STAND	DARDS		Standard Met Y/N		ents/Notes ive Action /Tim	neframe if needed
All areas of the home are kept clean, including diapering area.			Y			

An and the second se		
Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.	Y	
Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.	Y	
Diapering procedures are followed.	Y	
 Handwashing procedures are followed. Provider and child's hands washed thoroughly with soap and warm running water after: Toileting; Diapering; Before food preparation and eating; 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	

nust be available and easily accessible in the event Emergency Documents.	t of an emergency. This contains a Disaster Supply Kit
	Supply Kit. Be certain that the Disaster Supply Kit I, and usable. Comment and note below if needed.
Bottled water	Section Folder or binder for EPP documents
⊠Non-perishable food	⊠Backpack(s) or carrying case(s)
□Diapers-N/A	⊠Consider special toys or games
	Heavy Duty Scissors, Duct Tape/
⊠ Change of clothes	Packing Tape & Sealing Plastic/ Trash Bags
	Emergency Documents. at each item is adequately included in the Disaster nild in care. Also that the items are clean, organized Bottled water Non-perishable food Diapers-N/A

□ Medications-N/A ⊠Blanket(s)

MSDE OCC Informal Care Inspection Checklist 2020-03-26

Items in the Disaster Supply Kit are clean, organized	2 generation of the provide	20100 12
Emergency Ready-to-Go Pack is available and easi	ily accessible in the event of an emergency ()	Y/N)? Yes
Location of Emergency Ready to go Pack: Living	g Room	
Emergency Documents		
⊠ Informal Provider Emergency Preparedne:		
Authorization for emergency medical care Planning and Maintenance		
	iy Kit and the Emergency Documents regul Last Name Witherspoon	lariy:
Description of how the Emergency Ready-to-Go Pa		cation:
Shelter In Place Procedures:		
parent before, during and after sheltering.		doors, 0 window(s)). The provider will <u>cal</u>
parent before, during and after sheltering. Evacuation Procedures: The Provider will cather the children and the ready during and after sheltering. The Provider will cather the children and the ready wheltering.	to go bag, holding both children's hands # of doors, # of wind	<u>s</u> . The provider will series ow(s)). The provider will <u>call</u> parent before <u>s</u> . The provider will
The Provider will gather the ready to go bag and the barent before, during and after sheltering. Evacuation Procedures: The Provider will cather the children and the ready during and after sheltering. The Provider will gather the children and the ready sheltering. CARE HOURS: - Bignatures & Date	to go bag, holding both children's hands # of doors, # of wind to go bag, holding both children's hands	<u>s</u> . The provider will set of the provider will call parent before ow(s)) . The provider will call parent before <u>s</u> . The provider will
Darent before, during and after sheltering. Evacuation Procedures: The Provider will gather the children and the ready during and after sheltering. The Provider will gather the children and the ready sheltering. CARE HOURS: -	to go bag, holding both children's hands # of doors, # of wind to go bag, holding both children's hands # of doors, # of window(s)). The provider of doors, # of window(s)). The provider of bowledge that all standards have been reviewe approved, the home in which care is provided	s The provider will ow(s)). The provider will call parent before s The provider will will call parent before, during and after
barent before, during and after sheltering. Evacuation Procedures: The Provider will cather the children and the ready during and after sheltering. The Provider will cather the children and the ready the heltering. CARE HOURS: - Signatures & Date Acknowledgement: By signing below the parties acknowledge that, if	to go bag, holding both children's hands # of doors, # of wind to go bag, holding both children's hands # of doors, # of window(s)). The provider of doors, # of window(s)). The provider of bowledge that all standards have been reviewe approved, the home in which care is provided	s The provider will ow(s)). The provider will call parent before s The provider will will call parent before, during and after
arent before, during and after sheltering. A second procedures: The Provider will cather the children and the ready luring and after sheltering. The Provider will cather the children and the ready theltering. CARE HOURS: CARE HOURS: CARE H	to go bag, holding both children's hands # of doors, # of wind to go bag, holding both children's hands # of doors, # of window(s)). The provider of doors, # of window(s)). The provider of bowledge that all standards have been reviewe approved, the home in which care is provided	s The provider will <u>call</u> parent before <u>ow(s))</u> . The provider will <u>call</u> parent before <u>s</u> . The provider will will <u>call</u> parent before, during and after will <u>call</u> parent before, during and after
barent before, during and after sheltering. Evacuation Procedures: The Provider will cather the children and the ready during and after sheltering. The Provider will gather the children and the ready the Provider will gather the children and the ready the bettering. CARE HOURS: CARE HOURS: Care a state and the parties also acknowledge that, if the provider will be conducted virtually or in-pers PROVIDER Printed Name: Care a state and the parties acknowledge that is the parties acknowledge that is the parties also ack	to go bag, holding both children's hands # of doors, # of wind to go bag, holding both children's hands # of doors, # of window(s)). The provider of doors, # of window(s)). The provider of bowledge that all standards have been reviewed approved, the home in which care is provided son.	s The provider will <u>call</u> parent before <u>ow(s))</u> . The provider will <u>call</u> parent before <u>s</u> . The provider will will <u>call</u> parent before, during and after will <u>call</u> parent before, during and after

⊠Virtual Inspection ⊡In-person Inspection		partment of Ed d Care Scholar INFORMAL ISPECTION C	ship Program CARE	Child Care	Return to: ccs.informalproviders@maryland.g ov
Inspection Date: 11/03/2022	Time	e In: 9:00AM	Time Out: 10:22	AM Resu	ult: PASSED
Informal Care			l An an		
Type of Care (check one):	Non-relative Inf			Informal Pro	
Provider Information				a na an	
				Prov	ider ID: 486375
First Name: Gloria Provider ID		Name: Withersp	boon	Ema	il:
Care Location Inspected			an a		adashi interneti a Afrika ya Afrika.
Street Address: Address Verified? Yes	City:	County:		State	Zip Code:
Name of Children in Care (a	dd pages if needed)	Scholarship	Date of Birth	Age	/ Present (Y/N)
······································			9/11/2013	9 / Yes	
idean - Shine			2/9/2012	10 / Yes	
		l			
747 .					
, 					
Safety of the Home				e e e e e e e e e e e e e e e e e e e	e - Angeler Kernet - De
Directions: Review and determ pages may be used for comme	ine compliance with ea		any comments or c	corrective action	ons needed. Additional ed, n/a – Not Applicable
Health and Safety Training:			Standard Met Y/N	Comment	
Basic Health and Safety Train	ning Completed?		Y		Certificate Submitted
Home is free of health and	safety hazards:		Standard Met Y/N	Comment Corrective	s/Notes Action /Timeframe if needed
 Is in good repair 			Y		
 Is free of insect or ro 	dent infestation		Y	No sign of	infestation
 Is well-lit and well-version 	entilated		Y		
 Has hot and cold run 	nning water		Y	Steam obs	erved
 Has a working inside 	e toilet Look under si	nk	Y	Observed	Flush
 Has utilities for cook 	ing, lighting and heating	ng	Y		
 Has a working and s 	afe heating system		Y		
 Has a working refrig 	erator and stove		Y	Light came	on
 Has a working telept 	hone		Y		
 Has operational smoothing 	oke detector(s)		Y		
 Has first aid kit/supp 	lies		Y	Bandaid, g	auze, tape, peroxide
 Has protective cover accessible to children 	rings on any electrical n	outlet that is	Y	Covered, b	pehind furniture or in use
Harmful items are stored an children:	opropriately and awa	y from	Standard Met Y/N	Comments Corrective	/Notes Action /Timeframe if needed
 Sharp or pointed iter 	ms		Y	On top of fri	dge
Medications of any	kind		Y	On top of fri	dge
 Matches, lighters an 	d flammable products		Y		
 Alcoholic beverages 			Y		
Guns			Y		
Cleaning agents			Y	High shelf ir	n linen Closet
 Poisonous substance 	es		Y	Other than r	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 diaper	ring area.	Y	
Trash, garbage and wet and soiled diapers are dispo- sanitary manner.	sed of in a	Y	
Child is changed immediately when s/he has a soiled diaper, clothing or bedding.	or wet	Ÿ	
Diapering procedures are followed.		Y	N/A
 Handwashing procedures are followed. Provider and washed thoroughly with soap and warm running wate Toileting; Diapering; Before food preparation and eating; After playing outdoors; and At other times when necessary to prevent th disease. 	er after:	Y	
CHILD ABUSE, NEGLECT AND MISTREATMENT	STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
 A child is not subject to any form of abuse, includi Physical injury Any sexual abuse Mental injury 	ing:	Y	
 A child in care is not subjected to any form of neglincluding: The failure to give proper care and attention including leaving a child unattended under c that indicate that the child's health or welfare placed at substantial risk of harm; Mental injury to a child, or a substantial risk injury that is caused by the failure to give proattention to a child. 	to a child ircumstances a is harmed or of mental	Y	
 A child in care is not subjected to mistreatment, ir Any deliberate act that hurts a child physical emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful it child's mouth Requiring a child to stand on one foot as pur Tying child to a cot or other equipment 	ly or æms in a	Y	
The provider immediately reports any suspected of neglect or mistreatment by calling 911 and your lo Department of Social Services Child Protective	ocal	Y	
Emergency Ready-to-Go Pack			
The Emergency Ready-to-Go Pack must be available and eneeded medications) and Emergency Documents.	asily accessible in	the event of an em	ergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit			
Directions: Review and determine that each item is adequate enough supplies for each child in care. Also the items are clo			
	Bottled water	A CONTRACT CONTRACT	Solder or binder for EPP documents
	⊠Non-perishable	food	Backpack(s) or carrying case(s)
	Diapers N/A		⊠Consider special toys or games
	⊠Change of cloth	nes	⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
⊠Medications	⊠Blanket(s)		100 W

Items in the Disaster Supply Kit are clean, organized, and usable (Y/N	i)? Y	
Emergency Ready-to-Go Pack is available and easily accessible in th		Y
Location of The Emergency Ready to go Pack: Under TV stand in	n living room	
Item Specification (if needed): 2 shirts, 3 hoodies, 2 pants, 4 under wares, 4 pairs socks, 7 Diapers	and hox wines. Sniderman motor	cycles limbo books contract 4 upo
8 extra AA, 13 AAA, & batteries, 4 blankets, albuterol, allergy media		cycles, limbo, books, connect 4, uno
Band aids, antiseptic , gauze, tape, alcohol wipes, ointment, gloves, a	ain relief, tweezers, Scissors, col	
8 16oz water bottles, 3 roast beef cans, 4 cans of Tuna, 3 cans of sa	dines, apple sauce, peanut butte	r, pastries,
Items to review on xx/xx/xxxx if needed:		
Emergency Documents		
⊠Informal Provider Emergency Preparedness Plan (this com	pleted form)	
⊠Authorization for emergency medical care		
Planning and Maintenance		
Person responsible for updating the Disaster Supply Kit and the Em	ergency Documents regularly:	
First Name Last Name		
	anted to an experiention location.	One Corried & one Dellad
Description of how the Emergency Ready-to-Go Pack will be transp	oned to an evacuation location:	One Carried & one Rolled
Shelter In Place Procedure:		
The provider will grab the children, the ERTB and head to the baser	nent family room which has no v	windows and one door. If the need
should arise the provider will use plastic and tape to seal the shelter		
everything has been cleared.		
Evacuation Procedures:	d to the provider's vehicle who	re she will essure the shildren in their
The provider will grab the children, the emergency bag, and proceed seatbelts before driving to the primary evacuation location		nce at the location, they will shelter in
the gymnasium that has no windows and one door. If they were not	able to drive to location, they ca	
parents before leaving the care location and after they are secure in		
If they couldn't shelter at the primary location, they will go to the alte emergency bag and the children then proceed to the provider's vehi	rnate evacuation location	The provider will grab the
the location. If they were not able to drive to location, they can walk.	Once at the location, the provi	ider will ask to be directed to shelter
room The provider will call the parents before leaving the care local	ion and after they are secure in	the alternate evacuation location.
Signatures & Date	a de la companya de l	
Acknowledgement: By signing below the parties acknowledge that al	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		ISPECTOR
Printed Name:	Printed Name:	
Sig	Signature:	
Date: 11 16 22 Phone:	Date: 11/16/2022	Phone:

□In-person Inspection	Child	Department of E Care I Care Scholars INFORMAL (SPECTION CH	CARE	of Child	Retur ccs.ir	rn to: nformalproviders@maryl;	and.gov
Inspection Date: 03/23/2022 03/24/22	Time 11:0	e In: 1:45 pm 0 am	Time Out: 03/0 11:14 am		Result: Fo Final Resu	llow Up- 11:00 am on 03 ilt: Passed	/24/2022
Informal Care							
Type of Care (check one):			6				
Provider Information	□ Non-relative Info	ormal Provider C	are Relativ	ve Informa	al Provide	r Care	
		1 LALE					
First Name: Gloria Provider ID #:	Last	Name: Withersp	oon		Provider IC mail:	0: 482902	
Care Location Inspected		La Della					-
Street Address: Address Verified?: Yes		City	Cou	inty	State	Zip Code	
Name of Children in Care (ac	dd pages if needed)	Scholarship	Date of Birth	Ag	e /	Present (Y/N)	-
			09/11/2013	8	and and the second second	School	
			02/09/2012	10		School	
				10	/	301001	-
		1		-			
				-			
				-	1		
					1		
Directions: Review and	d determine compliance le used for comments.	with each standa	ard. Note any com	ments or c	orrective a	actions needed.	
Health and Safety Training:		The state	ard. Note any comm Y – Yes, N – No, Standard Met Y/N	D - Disci	ussed, n/a	a – Not Applicable	
Directions: Review and Additional pages may b Health and Safety Training: Basic Health and Safe	ety Training Completed	The state	Standard Met	D - Disci	ussed, n/a	a – Not Applicable	
Directions: Review and Additional pages may b Health and Safety Training: Basic Health and Safe Home is free of health and sa	ety Training Completed	The state	Standard Met Y/N	Comm Correct Comm	ussed, n/i ents/Note ctive Actio	a – Not Applicable es on /Timeframe if needed	
Directions: Review and Additional pages may b Health and Safety Training: Basic Health and Safe Home is free of health and safe Is in good repair	ety Training Completed	The state	Standard Met Y/N N/A Standard Met	Comm Correct Comm	ussed, n/i ents/Note ctive Actio	a – Not Applicable es on /Timeframe if needed	
Directions: Review and Additional pages may b Health and Safety Training: Basic Health and Safe Home is free of health and safe Is in good repair Is free of insect or rode	ety Training Completed	The state	Standard Met Y/N N/A Standard Met Y/N	Comm Correct Comm	ussed, n/i ents/Note ctive Actio	a – Not Applicable es on /Timeframe if needed	
Directions: Review and Additional pages may b Health and Safety Training: Basic Health and Safe Home is free of health and safe Is in good repair Is free of insect or rode Is well-lit and well-vent	ety Training Completed afety hazards: ent infestation tilated	The state	Standard Met Y/N N/A Standard Met Y/N Y	Comm Correct Comm	ussed, n/i ents/Note ctive Actio	a – Not Applicable es on /Timeframe if needed	
Directions: Review and Additional pages may b Health and Safety Training: Basic Health and Safe Home is free of health and safe Is in good repair Is free of insect or rode Is well-lit and well-vent Has hot and cold runn	ety Training Completed afety hazards: ent infestation tilated ing water	The state	Standard Met Y/N N/A Standard Met Y/N Y Y	Comm Correc Correc	ussed, n/i ents/Note ctive Actio	a – Not Applicable as on /Timeframe if needed as on /Timeframe if needed	
Directions: Review and Additional pages may b Health and Safety Training: Basic Health and Safe Home is free of health and safe Is in good repair Is free of insect or rode Is well-lit and well-ven Has hot and cold runn Has a working inside to	ety Training Completed afety hazards: ent infestation tilated ing water oilet	d?	Standard Met Y/N N/A Standard Met Y/N Y Y Y Y	Comm Correc Correc	ussed, n/a ents/Note ctive Actio ents/Note ctive Actio	a – Not Applicable as on /Timeframe if needed as on /Timeframe if needed	
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Cleaning agents	Y	Moved to a high shelf in a closet
Poisonous substances	Y	Moved to a high shelf in a closet
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	Not in diapers
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	sonoonve Action / Americane in 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	
 A child in care is not subjected to mistreatment, including: Any deliberate act that hurts a child physically or emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discipline Not attending to a child's physical needs Shouting, Cursing, Shaming, Ridiculing Washing a child's mouth with soap Putting pepper or other spicy or distasteful items in a child's mouth Requiring a child to stand on one foot as punishment Tying child to a cot or other equipment 	Ŷ	

The Emergency Ready-to-Go Pack (including needed medications) and	r must be available and easily accessible in the even <u>d</u> Emergency Documents.	t of an emergency. This contains a Disaster Supply Kit
aster Supply Kit		TIPE PUPE I TOTAL
Directions: Povious and datamine		
energi euppiles foi cacit	that each item is adequately included in the Disaster child in care. Also that the items are clean, organized	Supply Kit. Be certain that the Disaster Supply Kit d, and usable. Comment and note below if needed.
Silections. Review and determine contains enough supplies for each	that each item is adequately included in the Disaster child in care. Also that the items are clean, organized Bottled water	Supply Kit. Be certain that the Disaster Supply Kit d, and usable. Comment and note below if needed. Selder or binder for EPP documents
energi euppiles foi cacit	child in care. Also that the items are clean, organized	d, and usable. Comment and note below if needed.

⊠Thermometer	r
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Change of clothes

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

Medications(Reordering medication)

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: Kept in the living Room

Item Specification (if needed):

- Suitcase and Tote
- D,9V, AA, & AAA Batteries
- First Aid Kit: Bandages, Alcohol wipes, Ice Pack, Large Scissors
- Case of water and the 2 gallons of water
- Canned sardines, Peanut butter, canned fruit
- Tops for each child Bottoms For each Child
- 3 Blankets Zebra print, yellow and orange blankets
- Roll of Sealing Plastic and Duct Tape
- Remote control spider man toy, inflatable limbo toy and a bag of crayons and coloring books. Reading books as well.
- To be observed for compliance on 03/24/22 :
 - Cleaning products moved out of reach of children- Observed
 - Thermometer- Observed
 - Emergency Preparedness Plan & Emergency Care Medication Authorization for each child- Observed
 - Special Toys/ Books for Children- Observed

Emergency Documents

SInformal Provider Emergency Preparedness Plan (this completed form)

Authorization for emergency medical care

Planning and Maintenance

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

First Name

Last Name

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

Shelter in Place Procedures:

The Provider will first contact the Parent. She will then call the children's name and have them come to the living room door as practiced. The provider will carry the ERTG Bag and lead the children to the front part basement(0 doors and windows).

Evacuation Procedures:

The Provider will first contact the Parent. She will then call the children's name and have them come to the living room door as practiced. The provider will carry the ERTG Bag and lead the children to the vehicle where they will be secured via seatbelts. The Provider will take the the children. If the Provider cannot shelter to the vehicle where they will be secured via seatbelts. The Provider will take have them come to the living room door as practiced. The provider will carry the ERTG Bag and lead the children's name and have them come to the living room door as practiced. The provider will carry the ERTG Bag and lead the children to the vehicle where they will be secured via seatbelts. The Provider will take the Children to direction for shelter from the Manager/ Supervisor.

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: Gloria Witherspoon	Printed Name:	
Signature:	Signature:	

e:03-25-2022	Phone:	Date:03/24/2022	Phone: 1-877-227-0125
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⊠Virtual Inspection □In-person Inspection	Maryland S	Child	artment of Edu I Care Scholars INFORMAL SPECTION CH	CARE	hild Care	Return to: ccs.informalprovider ov	s@maryland.g
Inspection Date: 04/24/202 Inspection Follow-up Date:			ln: 1:30PM ln: 10:30AM	Time Out: 2:15PM Time Out: 10:41A	M Requi	:: Did not pass. Follov ired. :: PASSED	v-up
Informal Care							
Type of Care (check one):	Non-rel	lative Info	rmal Provider C	are Relative	Informal Pro	vider Care	
Provider Information							
First Name : Natalie Provider ID #:	and a second	Last	Name: Womack		Provid Email:	ter ID: <u>506405</u>	
Care Location Inspected							
Street Address: Address Verified? Yes.	City:		County:	State	Zip Code		all and the second
Name of Children in Care	(add pages if ne	eded)	Scholarship	Date of Birth	Age	/ Present (Y/N)	
				(03/14/2020)	3yr. / Y		
Safety of the Home							
Directions: Review and dete pages may be used for com	ermine complianc ments.	e with eac	ch standard. Note			ons needed. Additional ed, n/a – Not Applicab	le
Health and Safety Trainin	ıg:			Standard Met Y/N	Comment	ts/Notes e Action /Timeframe if	needed
Basic Health and Safety Tr	aining Complete	ed?		Y	Relative	Informal Care – Certifi	cate Submitted
Home is free of health an	d safety hazard	ds:		Standard Met Y/N	Comment	ts/Notes e Action /Timeframe if	needed
Is in good repair	A standard and	Sec. 1	A	Y		All areas were clea	an
 Is free of insect or 	r rodent infestati	ion		Y		No evidence of infest	ation
Is well-lit and well	-ventilated			Y		ts were turned on and r lighting	
Has hot and cold	running water			Y	Tester	d by provider and steam camera	observed on
 Has a working ins 	ide toilet			Y	F	lushed by provider and	observed
 Has utilities for co 	oking, lighting a	nd heatin	g	Y			
Has a working an	d safe heating s	ystem		Y	Them	nostat tested by provide heating	r for cooling &
 Has a working ref 	rigerator and sto	ove		Y	1	Tested by provider and	observed
 Has a working tel 	ephone		and the second sec	Y	Out	bound call made to prov	vider's phone
 Has operational s 	moke detector(s	5)		Y		Tested by provider and	observed
Has first aid kit/su		-	12 Martin	Y	First aid	d kit stored on high leve closet	shelf in hallway
 Has protective con accessible to child 		electrical	outlet that is	Y	A	Il outlets were occupied	or covered
larmful items are stored hildren:	appropriately	and away	y from	Standard Met Y/N	Comment	ts/Notes re Action /Timeframe it	fneeded
Sharp or pointed i	tems	and the		Y	Stored in	high kitchen cabinet ab sink	ove the stove a
 Medications of an 				Y	Stored i	in provider's top draw w	ith medicine ba
 Matches, lighters 	and flammable	products		Y		Does not own	
 Alcoholic beverag 	es			Y		Does not own	
Guns			and a	Y		Does not own	1 Sec. m. A
Cleaning agents				Y	Correct kitchen an	ctive Action Completed: nd bathroom cabinets w	Locks added to
 Poisonous substa 	nces			Y		Does not own	

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, includi	ng diapering area.	Y	No diaper age children in care
Trash, garbage and wet and soiled diapers a sanitary manner.	are disposed of in a	Y	
Child is changed immediately when s/he has diaper, clothing or bedding.	s a soiled or wet	Y	
Diapering procedures are followed.		Y	No diaper age in children in care
 Handwashing procedures are followed. Prowashed thoroughly with soap and warm run Toileting; Diapering; Before food preparation and eating After playing outdoors; and At other times when necessary to p disease. 	ning water after.	Y	
CHILD ABUSE, NEGLECT AND MISTREA	TMENT STANDARDS	Standard Met Y/N	Comments/Notes Corrective Action /Timeframe if needed
A child is not subject to any form of abus Physical injury Any sexual abuse Mental injury	se, including:	Y	
 A child in care is not subjected to any for including: The failure to give proper care and including leaving a child unattende that indicate that the child's health placed at substantial risk of harm; Mental injury to a child, or a substanijury that is caused by the failure attention to a child. 	attention to a child d under circumstances or welfare is harmed or antial risk of mental	Y	
 A child in care is not subjected to mistre Any deliberate act that hurts a child emotionally, including: Spanking, Biting, Hitting, Shaking Any other means of physical discip Not attending to a child's physical Shouting, Cursing, Shaming, Ridic Washing a child's mouth with soap Putting pepper or other spicy or dischild's mouth Requiring a child to stand on one f Tying child to a cot or other equipm 	d physically or bline needs uling stasteful items in a oot as punishment	Y	
The provider immediately reports any sur neglect or mistreatment by calling 911 ar Department of Social Services Child Prot	nd your local	Y	
Emergency Ready-to-Go Pack			
The Emergency Ready-to-Go Pack must be avai needed medications) and Emergency Document		in the event of an er	mergency. This contains a Disaster Supply Kit (including
Disaster Supply Kit			Contraction of the second second
Directions: Review and determine that each item enough supplies for each child in care. Also the it			Kit. Be certain that the Disaster Supply Kit contains ant and note below if needed.
⊠ Flashlight	Bottled water		Solder or binder for EPP documents
Batteries for Flashlight			Backpack(s) or carrying case(s)
Portable First Aid Kit			Consider special toys or games
 ☑ Portable First Aid Kit ☑ Diapers (N/A) ☑ Thermometer ☑ Change of closed 			⊠Heavy Duty Scissors, duct tape/ packing tape & sealing plastic/trash bags
			baga

Page 2 of 3

Revised 10/2021

Items in the Disaster Supply Kit are clean, organized,		
Emergency Ready-to-Go Pack is available and easily	ly accessible in the event of an emergency (Y/N)? Y	
Location of The Emergency Ready to go Pack: In	n the living room peer wit	
Item Specification (if needed):	the name round exit	
	pk of AA batteries, 1 first aid kit, 1 thermometer, no spec meds, gen med (Ty	lenol), 6
bottled waters, 4 canned foods, 1 outfit (top/	bottom/ underwear), folder w/ EPP and ECMA, coloring and activity books.	pair of
scissors, 4 heavy duty trash bags, duct tape	and 1 blanket	
Items to be reviewed on 04/26/2022.		
Items to be reviewed on 04/26/2023: Corrected &	Reviewed on 04/26/2023	
- Locks added cabinets with cleaning product	ts	
 ERTG: Blanket missing 		
Emergency Documents		
SInformal Provider Emergency Preparednes	ess Plan (this completed form)	
Authorization for emergency medical care		
Planning and Maintenance		
Person responsible for updating the Disaster Supply	by Kit and the Emergency Documents regularly:	
	Last Name	
Description of how the Emergency Ready-to-Go Pa	ack will be transported to an evacuation location: carried by the provider.	
Shelter In Place Procedure:	and the second to an evacuation location. Carried by the provider.	
provider will use the section clostic and the ERIG and	nd head into the storage closet (1 door 0 windows). If the need should arise the	3
then call the parent and inform them of the emerge	al the door if needed. Provider will account for the child and calm the child if ne	eded
	ancy.	
Evacuation Location(s) Procedures:		
Primary: The provider will account for the child and	nd ERTG and head to the provider's vehicle. The provider will secure the child	in his
forward-facing car seat. The provider will	hen call parent and inform her of the emergency, and head to	the
location. Upon arrival she will speak with the contact	act person and be instructed of where to shelter. Once they are secured she w	ill ensure
the child is in her care and call the parent with update	lated information.	
Alternate: If they could not access the primary loc	cation, the provider will gather the child and ERTG and the provider will secure	the
child in her vehicle in his forward-facing car seat. S	She will and then call or text the pr	arent to
inform her of the emergency. Upon arrival the provi	Vider	to the
storage closet (1 door 0 windows). When they are	settled she will call the parent again to inform them of the emergency update.	
Signatures & Date		
Acknowledgement: By signing below the parties ack	knowledge that all standards have been reviewed, and any corrections if neede	ed have
pop up visit which will be conducted virtually a in	at, if approved, the home in which care is provided is subject to random, unanno	unced
pop up visit which will be conducted virtually or in-p PROVIDER		
PRUVIUER	INSPECTOR	
	Drinted Names	
Printed Name:	Printed Name:	
Printed Name: Natalie Womack		
Printed Name: Natalie Womack Signat	Signature:	
Printed Name: Natalie Womack	Signature:	

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