Child Care Scholarship Program
Informal Child Care Monitoring Inspections

Y-Z

First letter of the provider’s last name.

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### Informal Care

**Type of Care (check one):**  
- ☐ Non-relative Informal Provider Care  
- ☐ Relative Informal Provider Care

**Provider Information**

- **First Name:** Brenda  
- **Last Name:** Zeniz  
- **Provider:** 443324  
- **Email:** [Redacted]

### Care Location Inspected

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City</th>
<th>County</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

### Name of Children in Care (add pages if needed)

<table>
<thead>
<tr>
<th>Scholarship</th>
<th>Date of Birth</th>
<th>Age / Y/N</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>10/4/2004</td>
<td>15/Y</td>
</tr>
<tr>
<td></td>
<td>12/2/2009</td>
<td>11/Y</td>
</tr>
</tbody>
</table>

### 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:**

- Basic Health and Safety Training Completed?

**Home is free of health and safety hazards:**

- 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:**

- Sharp or pointed items: Y
- Medications of any kind: Y
- Matches, lighters and flammable products: Y
- Alcoholic beverages: Y
- Guns: Y

**Registered for June 2021**

MSDE OCC Informal Care Inspection Checklist 2020-03-26
<table>
<thead>
<tr>
<th><strong>GENERAL CLEANLINESS STANDARDS</strong></th>
<th>Standard Met</th>
<th>Comments/Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>All areas of the home are kept clean, including diapering area.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>Trash, garbage and wet and soiled diapers are disposed of in a sanitary manner.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>Child is changed immediately when s/he has a soiled or wet diaper, clothing or bedding.</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>Diapering procedures are followed.</td>
<td>Y</td>
<td></td>
</tr>
</tbody>
</table>
| 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 |  |

<table>
<thead>
<tr>
<th><strong>CHILD ABUSE, NEGLECT AND MISTREATMENT STANDARDS</strong></th>
<th>Standard Met</th>
<th>Comments/Notes</th>
</tr>
</thead>
</table>
| **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, Bitting, 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 | Verbally agreed to comply |

### 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
<table>
<thead>
<tr>
<th>Thermometer</th>
<th>Change of clothes</th>
<th>Scissors, tape &amp; sealing plastic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medications</td>
<td></td>
<td>Blanket(s)</td>
</tr>
</tbody>
</table>

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

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

Disaster Supply Kit Comments/Notes:
The bag will be stored in the hallway closet near the front of the house.

## Emergency Documents
- Informal Provider Emergency Preparedness Plan (this completed form)
- Authorization for emergency medical care

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

First Name: ___________________ Last Name: ___________________

Description of how the Emergency Ready-to-Go Pack will be transported to an evacuation location:
The Provider will retrieve the Ready-to-Go kit from the closet, collect the children and walk out the front door to the vehicle. Both children are age appropriate for car seat belts. Once everyone is secured in the vehicle, the Provider will drive to the children's maternal grandmother's house in _________. The Provider will stay in contact with the parent before, during and after the emergency using her cellphone.

The 2nd evacuation location is the children's father's house in _________.

### Signatures & Date
Acknowledgement: By signing below the parties acknowledge that all standards have been reviewed, and any corrections if needed have been discussed.

<table>
<thead>
<tr>
<th>PROVIDER</th>
<th>INSPECTOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Printed Name: ___________________ Printed Name: ___________________</td>
<td></td>
</tr>
<tr>
<td>Signature: ___________________ Signature: ___________________</td>
<td></td>
</tr>
<tr>
<td>Date: ___________________ Phone: ___________________</td>
<td>Date: 5/11/2021 Phone: 410-767-7832</td>
</tr>
</tbody>
</table>