## MARYLAND STATE DEPARTMENT OF EDUCATION

Office of Child Care

## **Child Care Facility Self-Assessment**

This checklist is designed to help the child care applicant/provider in determining whether the requirements of registration or licensure are met and ensure that the needs of all children, including those with special care needs, are considered. This guide does not contain all of the items found in regulations or on an inspection report form. An item marked with a "o" is required by regulation. Items indicated on the checklist by a "o" are recognized as best practices and are recommended. Some of the items may not be applicable to every child care program. This is a guidance document and not an inspection document. A "no" response should be assessed by the applicant/provider to determine if corrections or improvements are needed.

I - Environment	Yes	No
• The building/home is in good repair and free from health and safety hazards such as		
broken windows or doors, unsafe railings, damaged floors or walls, etc.		
• The building/home complies with all Fire Safety requirements, has working smoke		
detectors and, when required, carbon monoxide detectors and well-lit, marked exits.		
• All electrical outlets, within a child's reach, are tamper resistant or have safety covers		
that cannot be removed by a child.		
The building/home is free of insects and rodents.		
• The building/home is free of lead and there are no signs of flaking, peeling, or chipped		
paint.		
• All systems and appliances (heating, cooling, toilets, water supply, stove, refrigerator,		
water heater, boilers, etc.) are in good/safe working condition.		1
All areas are well lit and have appropriate ventilation.		1
• All areas of the child care facility that are used for child care activities (building, child		
care rooms, outdoor space) are accessible to all children, staff, and parents/guardians.		
Tables and chairs are sized for ages of children and are stable.		
• Equipment and furnishings are sturdy and in good repair. There are no tip-over or		
tripping hazards.		
• There are protective barriers for use at indoor and outdoor locations that are potentially		1
hazardous.		1
• There are railings on all stairways.		
• The design of the indoor and outdoor space should allow for continuous active		1
supervision of children at all times.		ı
• Toilets and sinks are sized according to the ages of children in care or step stools are		
available to ensure accessibility.		
• There is a designated space for diapering children as needed with an accessible		
handwashing sink. Accommodations are made for older children that may need		
diapering.		
• Suitable toileting supplies (paper towels, soap, toilet papers, and trash can) are		
accessible to the children.		
• There are rest furnishings for each child (crib, cot, mat, etc.) that are safe, durable,		
comfortable, and appropriate to the age and developmental needs of the child. All rest		
furnishings meet the U.S. Consumer Product Safety standards.		·
• There is a space designated for mothers to breastfeed or express breastmilk, which is not		
located in a bathroom and has access to running water, electricity and privacy.		
All areas (classrooms, hallways, bathrooms & outdoors) are large enough so a child or		
adult who uses mobility equipment can turn around and access fully.	-	
Classrooms include a variety of seating and table options including special chairs for		
children with varying needs (such as highchairs, accessible chairs, wheelchairs).	$\vdash$	
☼ Flooring surfaces are smooth and non-slip, with few changes in surface levels.	$\vdash$	
There is a quiet area (safe zone) available with soothing materials, soft seating, and activities for children who may become overstimulated or tired.		
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I – Environment - continued	Yes	No
Outdoor surfaces are inclusive and accessible so all children can move, run, and play safely.		
A fence surrounds the play area when there are hazards (traffic areas, water, railroad tracks, etc.) that pose a risk to children.		
♥ Step stools and climbing toys have nonslip bottoms.		
♥ Grab bars are next to toilets.		
☼ The environment is not overly visually stimulating.		
The design of the indoor and outdoor space should allow children to learn and play in different areas while being able to interact with each other.		

II – Interactions	Yes	No
• The provider supervises the children at all times in ways that are age appropriate and		
responsive to the needs of each child in care.		
The provider is constantly aware of the children and their activities and makes		
appropriate adjustments for children with differing abilities so that all children remain		
meaningfully engaged.		
• The provider conducts a daily quick health check of all children and communicates with		
the parents concerning any special health care needs.		
☼ The provider greets all children and families by name upon arrival.		
☼ The provider/staff introduces themselves to parents and guardians.		
□ The provider has frequent conversations with children on topics of interest to the		
children, including at meals and when diapering/changing a child.		
□ The provider presents information in multiple formats to accommodate different		
learning styles.		
☼ The provider supplements spoken words with eye contact and positive gestures.		
☼ The provider frequently checks to make sure children understand what was said.		
The provider modifies their method of communication or uses technology to reflect the		
developmental levels of the children with whom they are speaking.		
□ The provider reads books with children one-on-one in addition to reading aloud to a		
group.		
The provider encourages children to use language and other forms of communication to		
ask for materials, join in activities, or to express needs and wants.		
The parent and provider discuss how the child can be supported during the child care		
hours to meet the needs of the child. If a child has an IEP/IFSP that is shared with the		
provider, the provider uses the information to develop a plan for the child while in care.		
The provider gives children cues before transitions occur and describes the steps to		
follow for activities and routines. The provider uses a visual schedule with pictures and		
words with the children so they can anticipate and learn the routines of the day.		

III – Daily Schedule, Materials and Equipment	Yes	No
• The provider maintains a daily attendance log for all children and it includes the time		
each child arrived and the time they left care.		
• The daily schedule provides a predictable mix of active and quiet activities.		
• The daily schedule allows flexibility to accommodate varied attention levels and a mix		
of active and quiet periods.		
• Daily activities are adapted to meet the unique needs of all children in care to enable		
participation in all aspects of the program.		
• The program does not permit children younger than 2 years old to view any passive		
technology and does not permit children older than 2 years old to view more than 30		
minutes of passive technology per week.		
<ul> <li>Meal and snack times are free from the use of any technology.</li> </ul>		
The program offers indoor gross motor activities daily.		
• The program provides a variety of indoor/outdoor age-appropriate play activities.		

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III - Daily Schedule, Materials and Equipment - continued	Yes	No
• The provider offers a wide range of appealing and interesting sensory materials, such as		
sand and water play, and frequently expands or changes those materials as needed.		
• Toys and books are available in a variety and range that are suitable for different ages		
and developmental levels, including children with special needs.		
Children with special care needs have individual activity plans documented in the		
providers' plans for the group that meets the child's ability and functional level as per		
the child's most recent Individualized Family Service Plan (IFSP)/Individualized		
Educational Plan (IEP) or recommendations from early interventionists, if available.		
The provider individualizes teaching and uses opportunities for repetition with children		
who may need more time or experiences to learn.		
The daily schedule allows for flexibility and allows time for staff to attend to medication		
administration, diaper change, infant feedings, special feedings, and assisting children		
with mobility and assistive technology devices.		
♥ Varieties of wheeled toys are available to allow for various levels of motor skill		
development.		
The daily schedule is displayed in a way that children understand (for example,		
pictures.)		

IV - Training	Yes	No
• The provider/staff maintains a training plan that includes topics related to professional, legal, and regulatory guidelines.		
• The provider/staff are trained to handle emergencies including handling serious injuries, death of a child, or medical emergency due to a special health condition.		
• There is a provider/staff person trained and authorized to administer medication present at all times.		
• The child care program has at least one person for every 20 children who is certified in First Aid and CPR.		
• Provider/staff are trained, if applicable, to provide specialized care to a child with special care needs.		
The provider and staff (as appropriate) review the regulations annually and maintains evidence of review.		
Provider/staff seeks self-support services, as needed, to reduce staff burnout.		

V – Policies and Resources	Yes	No
• The provider presents a handbook and/or written agreement to all families that outlines		
policies and procedures for tuition and payments, hours of care, discipline, closings,		
notifications, reporting, presence of any pets or animals, volunteers, and other topics		
which families may find necessary.		
• Enrollment/registration process and paperwork is the same for all families and children.		
• The provider has developed an emergency plan for addressing serious injuries, death, or		
health emergencies.		
□ The provider has a policy and resources in place for reasonably accommodating all		
children, including those with special care needs.		
The provider has a policy in place that allows a family/child to spend time in the child		
care program before entering into a care agreement to provide the opportunity for the		
parent to make an informed decision.		
□ The provider has a resource list available to identify additional supports and resources for		
the facility and families.		
The provider has a policy for reviewing children's medical forms/ special care/disability		
and functional and communication plans/information to ensure they are up-to-date and		
followed according to the child's individual needs.		
☼ The provider updates the emergency contact list annually or more often as needed.		