

FAMILY CHILD CARE HOME INSPECTION REPORT

INSPECTION DATE/TIME/DURATION: 11/12/2020 8:00 AM		<table border="1"> <thead> <tr> <th colspan="2">INSPECTION TYPE</th> </tr> </thead> <tbody> <tr> <td></td> <td>Initial Application</td> </tr> <tr> <td></td> <td>Conversion</td> </tr> <tr> <td>✓</td> <td>Mandatory Review</td> </tr> <tr> <td></td> <td>Full</td> </tr> <tr> <td></td> <td>Complaint Investigation</td> </tr> <tr> <td></td> <td>Monitoring</td> </tr> <tr> <td></td> <td>Other</td> </tr> <tr> <td>☐</td> <td>Follow Up</td> </tr> </tbody> </table>		INSPECTION TYPE			Initial Application		Conversion	✓	Mandatory Review		Full		Complaint Investigation		Monitoring		Other	☐	Follow Up	<table border="1"> <thead> <tr> <th>AGES</th> <th>Registered for</th> <th># Enrolled</th> <th># Present</th> <th>Resident Children</th> </tr> </thead> <tbody> <tr> <td>0-23 Months</td> <td>4</td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>2's</td> <td>● Y N</td> <td>2</td> <td>0</td> <td>0</td> </tr> <tr> <td>3's</td> <td>● Y N</td> <td>3</td> <td>0</td> <td>0</td> </tr> <tr> <td>4's</td> <td>● Y N</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>5's (pre-school)</td> <td>● Y N</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>5-12 (school-age)</td> <td>Y ● N</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>TOTAL</td> <td></td> <td>6</td> <td>0</td> <td>0</td> </tr> <tr> <td>Overnight</td> <td></td> <td>0</td> <td>0</td> <td>XXXXXX</td> </tr> <tr> <td>Head Start</td> <td>XXXXXXX</td> <td>0</td> <td>XXXXXX</td> <td>XXXXXX</td> </tr> </tbody> </table>					AGES	Registered for	# Enrolled	# Present	Resident Children	0-23 Months	4	1	0	0	2's	● Y N	2	0	0	3's	● Y N	3	0	0	4's	● Y N	0	0	0	5's (pre-school)	● Y N	0	0	0	5-12 (school-age)	Y ● N	0	0	0	TOTAL		6	0	0	Overnight		0	0	XXXXXX	Head Start	XXXXXXX	0	XXXXXX	XXXXXX
INSPECTION TYPE																																																																												
	Initial Application																																																																											
	Conversion																																																																											
✓	Mandatory Review																																																																											
	Full																																																																											
	Complaint Investigation																																																																											
	Monitoring																																																																											
	Other																																																																											
☐	Follow Up																																																																											
AGES	Registered for	# Enrolled	# Present	Resident Children																																																																								
0-23 Months	4	1	0	0																																																																								
2's	● Y N	2	0	0																																																																								
3's	● Y N	3	0	0																																																																								
4's	● Y N	0	0	0																																																																								
5's (pre-school)	● Y N	0	0	0																																																																								
5-12 (school-age)	Y ● N	0	0	0																																																																								
TOTAL		6	0	0																																																																								
Overnight		0	0	XXXXXX																																																																								
Head Start	XXXXXXX	0	XXXXXX	XXXXXX																																																																								
PROVIDER ID: 407400																																																																												
REGISTRATION #: 253820																																																																												
JURISDICTION:																																																																												
REGION: 5		Fatality: 0		Serious Injury: 0																																																																								
EXCELS LEVEL:		COMPLAINT #:																																																																										
ACCREDITED: ☐ Y ☒ N		ACCREDITED BY:			EXP DATE:																																																																							
HOMEOWNER'S INSURANCE COVERAGE: ☐ N/A ☒ Y ☐ N					EXP DATE: 9/09/2021																																																																							
BUSINESS NAME:																																																																												
PROVIDER NAME: Nina Karimi																																																																												
CO-PROVIDER:																																																																												
ADDRESS: 101 Leafcup Court Gaithersburg MD 20878																																																																												
PERSONS INTERVIEWED: Nina Karimi																																																																												
TITLE(S): Provider																																																																												
TELEPHONE: (240) 273-6227			E-MAIL: n51karimi@yahoo.com																																																																									
☒ Verified ☐ N/A																																																																												

PART 1 - MANDATORY REVIEW ITEMS

INSTRUCTIONS: (1) Review each regulation that applies to the inspection being conducted.
 (2) The compliance status of an item listed under Part 2 may be recorded when deemed necessary.
 (3) Initial/Resumption/Conversion/Full Inspection - Complete both Part 1 and Part 2.

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

<u>C</u> .02.01D	Certificate Conspicuously Displayed	<u>C</u> .07.01	Prohibition of Abuse, Neglect, Injurious Treatment
<u>C</u> .03.04A	Emergency Forms	<u>C</u> .07.02	Abuse and Neglect Reporting
<u>C</u> .03.05C-E	Notification of Changes	<u>C</u> .07.04	Child Discipline
<u>C</u> .04.03	Child Capacity	<u>C</u> .07.07	Child Security
<u>C</u> .05.03	Cleanliness and Sanitation	<u>C</u> .08.01	General Child Supervision
<u>C</u> .05.04	Rooms Used for Care	<u>C</u> .08.03	Supervision of Resting Children
<u>C</u> .05.05	Outdoor Activity Area	<u>C</u> .10.02	Potentially Hazardous Items
<u>C</u> .05.06	Rest Furnishings	<u>C</u> .10.06	Rest Time Safety
<u>C</u> .06.02	Training Requirements		

PART 2 – GENERAL COMPLIANCE REVIEW

INSTRUCTIONS: The compliance status of an item listed under Part 1 is excepted (exc.) from recording under Part 2.

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

CHAPTER 02 REGISTRATION APPLICATION AND MAINTENANCE

<u>X</u> .03B	Continuing Registration
<u>X</u> .04B	Conditional Status

CHAPTER 03 MANAGEMENT & ADMINISTRATION

<u>X</u> .01	Advertisement
--------------	---------------

CHAPTER 03 MANAGEMENT & ADMINISTRATION, CON'T

<u>X</u> .02	Admission to Care
<u>X</u> .03	Program Records
<u>X</u> .04	Child Records [exc. A]
<u>X</u> .05	Notifications [exc. C-E]
<u>X</u> .06	Variances

PART 2 – GENERAL COMPLIANCE REVIEW, CON'T
--

INSTRUCTIONS: The compliance status of an item listed under Part 1 is excepted (exc.) from recording under Part 2.

<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

CHAPTER 04 OPERATIONAL REQUIREMENTS

X.01 Hours of Care

X.02 Age Group Enrollment

CHAPTER 05 HOME ENVIRONMENT & EQUIPMENT

X.01 Suitability of the Home

X.02 Lead-Safe Environment

CHAPTER 06 PROVIDER REQUIREMENTS

X.03 Provider Substitute

X.04 Additional Adult

X.05 Volunteers

CHAPTER 07 CHILD PROTECTION

X.03 Applicability to Residents

X.05 Parental Access

X.06 Authorized Release

CHAPTER 08 CHILD SUPERVISION

X.02 Off-Site Supervision

X.04 Water Activity Supervision

X.05 Overnight Care Supervision

CHAPTER 09 PROGRAM REQUIREMENTS

X.01 Activities

X.02 Materials/Equipment

X.03 Rest Periods

CHAPTER 10 SAFETY

X.01 Emergency Safety

X.03 Outdoor Safety

X.04 Water Safety

X.05 Transportation Safety

CHAPTER 11 HEALTH

X.01 Child Comfort/Welfare

X.02 Exclusion for Acute Illness

X.03 Infectious/Communicable Diseases

X.04 Medication Administration/Storage

X.05 Smoking

X.06 Consumption of Alcohol/Drugs

PART 2 – GENERAL COMPLIANCE REVIEW, CON'T

INSTRUCTIONS: The compliance status of an item listed under Part 1 is excepted (exc.) from recording under Part 2.

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

CHAPTER 12 NUTRITION

X.01 Nutrition/Food Served
X.02 Food Storage/Cleanliness

CHAPTER 13 INSPECTIONS, COMPLAINTS & ENFORCEMENTS

X.01 Inspections

Signature
in file

Signature of Provider



Signature of Agency Representative

Gertrude Tetteh

11/12/2020

Date