LETTER OF COMPLIANCE INSPECTION REPORT

INSPECTION DATE/TIME/DURATION:
7/25/2022 9:21 AM

PROVIDER ID:
346699

LICENSE #:
162893

JURISDICTION:

INSPECTION TYPE	
	Initial Application
	Conversion
	Mandatory Review
✔	Full
	Complaint Investigation
	Monitoring
	Other

☐ Follow Up

Approved Capacity: 85

AGES	Approved for	# Enrolled	# Present
2's	● Y N	12	12
3's	● Y N	12	11
4's	● Y N	12	11
5's (pre-school)	● Y N	0	0
5-15 (school-age)	Y ● N	0	0
TOTAL		36	34
Head Start	XXXXXX	0	XXXXXX

REGION:
1

COMPLAINT #:

EXCELS LEVEL:

NURSERY SCHOOL: ☐ Y ● N

FATALITY:
0

SERIOUS INJURY:
0

ACCREDITED: ☐ Y ● N

ACCREDITED BY:

EXP DATE:

WORKERS COMPENSATION INSURANCE COVERAGE: ☐ Y ● N

EXP DATE:

OPERATOR NAME:
Church of Philippi Inc.

FACILITY NAME:
Philippi Christian Preschool

ADDRESS:
7422 Race Rd Hanover MD 21076

PERSON(S) INTERVIEWED:
Young Mee Kim

TITLE(S):
Director

TELEPHONE:
(410) 579-1555

E-MAIL:
preschool7422@gmail.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

C ____	**.03.06A**	Notifications	
C ____	**.04.01B**	Capacity	
C ____	**.05.01A**	Building Safety	
C ____	**.05.08A**	Appropriate Facilities and Supplies	
C ____	**.05.11**	General Cleanliness and Disposal of Refuse	
C ____	**.05.12**	Outdoor Activity Area	
C ____	**.07.02**	Abuse and Neglect Reporting	
C ____	**.07.06**	Child Security	
C ____	**.08.01A**	Appropriate Supervision	
C ____	**.08.03**	Group Size and Staffing	
C ____	**.08.07**	Playground Supervision	
C ____	**.10.01A(4)**	Emergency Escape Route Posted	
C ____	**.10.01C**	Emergency Contact Posted	
C ____	**.10.03**	Safe Use of Materials and Equipment	
N ____	**.10.04**	Potentially Hazardous Items	
C ____	**.12.04A**	Food Safety	

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 APPLICATION AND MAINTENANCE

D ____	**.03C**	Maintenance of a Continuing Letter of Compliance

CHAPTER 03 MANAGEMENT AND ADMINISTRATION

NA ____	**.01**	Multi-Site Facilities
C ____	**.02**	Admission to Care
C ____	**.03**	Program Records
N ____	**.04**	Child Records
C ____	**.05**	Staff Records
C ____	**.06**	Notifications **[exc. A]**
D ____	**.07**	Change of Operation
C ____	**.08**	Variances
C ____	**.09**	Advertisement

CHAPTER 04 OPERATIONAL REQUIREMENTS

C ____	**.02**	Enrollment and Attendant

CHAPTER 05 PHYSICAL PLANT AND EQUIPMENT

C ____	**.01**	Building Safety **[exc. A]**

PART 2 – GENERAL COMPLIANCE REVIEW

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

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CHAPTER 05 PHYSICAL PLANT AND EQUIPMENT, CON'T

C ____ **.02** Accessibility
C ____ **.03** Indoor Space
C ____ **.04** Building Repair and Maintenance
C ____ **.05** Lead-Safe Environment
C ____ **.06** Ventilation and Temperature
C ____ **.07** Water Supply
C ____ **.08** Sanitary Facilities **[exc. A]**
C ____ **.09** Lighting
C ____ **.10** Telephone and Communication
C ____ **.13** Swimming Facilities

CHAPTER 06 STAFF REQUIREMENTS

C ____ **.01** Minimum Staff Age
C ____ **.02** Staff Orientation
C ____ **.03** Suitability for Employment
C ____ **.04** Staff Health
C ____ **.05** Substitutes
C ____ **.06** Support Personnel
C ____ **.07** Volunteers

CHAPTER 07 CHILD PROTECTION

C ____ **.01** Prohibition of Abuse, Neglect, Injurious Treatment
C ____ **.03** Child Discipline
C ____ **.04** Parental Access
C ____ **.05** Authorized Release

CHAPTER 08 CHILD SUPERVISION

C ____ **.01** Individualized Attention and Care **[exc. A]**
C ____ **.02** Staff Available for Emergencies
C ____ **.04** Variations in Group Size
C ____ **.05** Supervision during Water Activities
C ____ **.06** Supervision during Transportation
C ____ **.08** Rest Time Supervision

CHAPTER 09 PROGRAM REQUIREMENTS

C ____ **.01** Materials and Equipment
C ____ **.02** Rest Furnishings
C ____ **.03** Storage

CHAPTER 10 SAFETY

C ____ **.01** Emergency Safety Requirements **[exc. A(4), C]**
N ____ **.02** First Aid and CPR
C ____ **.05** Transportation

PART 2 – GENERAL COMPLIANCE REVIEW

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CHAPTER 11 HEALTH

C ____ **.01** Exclusion for Acute Illness

C ____ **.02** Infectious and Communicable Diseases

C ____ **.03** Preventing Spread of Disease

C ____ **.04** Medication Administration and Storage

C ____ **.05** Smoking

C ____ **.06** Alcohol and Drugs

CHAPTER 12 NUTRITION

C ____ **.01** Food Service

C ____ **.02** Modified Diet

C ____ **.03** Food Sources

C ____ **.04** Food Storage and Preparation **[exc. A]**

CHAPTER 12 NUTRITION, CON'T

C ____ **.05** Food Preparation Area and Equipment

CHAPTER 13 ADOLESCENT FACILITIES

C ____ **.01** Approved Plan

CHAPTER 14 EDUCATIONAL PROGRAM

C ____ **.04** Change of Operation

C ____ **.06** Personnel Qualifications

C ____ **.07** Educational Program

C ____ **.08** Child Records

C ____ **.09** Health, Fire Safety, Zoning

CHAPTER 15 INSPECTIONS, COMPLAINTS AND ENFORCEMENTS

C ____ **.02** Inspections

C ____ **.06** Emergency Suspension

Signature of Provider	Signature of Agency Representative	Date
	Shantel Closson	7/25/2022