

CHILD CARE CENTER INSPECTION REPORT

INSPECTION DATE/TIME/DURATION: 10/30/2023 3:08 PM		<table border="1" style="width:100%; border-collapse: collapse;"> <tr><th colspan="2">INSPECTION TYPE</th></tr> <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> </table>		INSPECTION TYPE		☐	Initial Application	☐	Conversion	☐	Mandatory Review	☒	Full	☐	Complaint Investigation	☐	Monitoring	☐	Other	☐	Follow Up	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><th colspan="4">Approved Capacity 60</th></tr> <tr> <th>AGES</th> <th>Licensed for</th> <th># Enrolled</th> <th># Present</th> </tr> <tr><td>6 wks. – 17mos.</td><td>Y ☒ N</td><td>0</td><td>0</td></tr> <tr><td>18 mos. – 23 mos.</td><td>Y ☒ N</td><td>0</td><td>0</td></tr> <tr><td>2's</td><td>Y ☒ N</td><td>0</td><td>0</td></tr> <tr><td>3's</td><td>Y ☒ N</td><td>0</td><td>0</td></tr> <tr><td>4's</td><td>Y ☒ N</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></tr> <tr><td>5-15 (school-age)</td><td>☒ Y ☒ N</td><td>61</td><td>38</td></tr> <tr><td>TOTAL</td><td></td><td>61</td><td>38</td></tr> <tr><td>Overnight</td><td>Y ☐ N ☒</td><td>0</td><td>0</td></tr> <tr><td>Head Start</td><td>XXXXXXX</td><td>0</td><td>XXXXXXX</td></tr> </table>		Approved Capacity 60				AGES	Licensed for	# Enrolled	# Present	6 wks. – 17mos.	Y ☒ N	0	0	18 mos. – 23 mos.	Y ☒ N	0	0	2's	Y ☒ N	0	0	3's	Y ☒ N	0	0	4's	Y ☒ N	0	0	5's (pre-school)	☒ Y ☒ N	0	0	5-15 (school-age)	☒ Y ☒ N	61	38	TOTAL		61	38	Overnight	Y ☐ N ☒	0	0	Head Start	XXXXXXX	0	XXXXXXX
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PROVIDER ID: 56460		COMPLAINT #:		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">FATALITY: 0</td> <td style="width:70%;">SERIOUS INJURY: 0</td> </tr> </table>		FATALITY: 0	SERIOUS INJURY: 0																																																																
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ACCREDITED: ☐ Y ☒ N		ACCREDITED BY:		EXP DATE:																																																																			
WORKERS COMPENSATION INSURANCE COVERAGE: ☒ Y ☐ N				EXP DATE: 4/01/2024																																																																			
OPERATOR NAME: Bar-T Holding. Inc.																																																																							
FACILITY NAME: Bar-T @ Lakewood																																																																							
ADDRESS: 2534 Lindley Ter Rockville MD 20850																																																																							
PERSON(S) INTERVIEWED: Jessica Fitzgerald																																																																							
TITLE(S): Director																																																																							
TELEPHONE: (240) 314-7146		E-MAIL: lakewood@bar-t.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>	.02.01E	License Conspicuously Displayed	<u>C</u>	.07.06	Child Security
<u>C</u>	.03.05B	Staffing Pattern Posted	<u>C</u>	.08.01A	Child Supervision
<u>C</u>	.03.06A	Notifications	<u>C</u>	.08.02B	Qualified Staff in Charge of Groups
<u>C</u>	.04.01	Capacity	<u>C</u>	.08.03	Group Size and Staffing
<u>C</u>	.05.01A	Building Safety	<u>C</u>	.08.07	Playground Supervision
<u>C</u>	.05.08B	Sanitary Facilities and Supplies	<u>C</u>	.08.08	Rest Time Supervision
<u>C</u>	.05.11	General Cleanliness	<u>NA</u>	.09.04F	No Soft Bedding with Cribs
<u>C</u>	.05.12	Outdoor Activity Area	<u>C</u>	.10.01A(4)	Emergency Escape Route Posted
<u>C</u>	.06.05C	Director – Continued Training	<u>C</u>	.10.01C	Emergency Contact Information
<u>NA</u>	.06.09C	Preschool Teacher – Continued Training	<u>C</u>	.10.03	Safe Use of Materials and Equipment
<u>C</u>	.06.10C	School-age Teacher – Continued Training	<u>C</u>	.10.04	Potentially Hazardous Items
<u>C</u>	.06.11C	Asst. Teacher – Continued Training	<u>NA</u>	.10.05	Rest Time Safety
<u>C</u>	.06.12B(1)-(3)	Aides – Continued Training	<u>C</u>	.12.04A	Food Safety
<u>C</u>	.07.02	Abuse and Neglect Reporting			

PART 2 – GENERAL COMPLIANCE REVIEW

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CHAPTER 02 LICENSE APPLICATION & MAINTENANCE

<u>C</u>	.03C	Maintaining a Continuing license
<u>NA</u>	.04B	Conditional status

CHAPTER 03 MANAGEMENT & ADMINISTRATION

<u>NA</u>	.01	Multi-site facilities
<u>C</u>	.02	Admission to care

<u>C</u>	.03	Program records
<u>C</u>	.04	Child records
<u>C</u>	.05	Staff records [exc. B]
<u>C</u>	.06	Notifications [exc. A]
<u>C</u>	.07	Change of operation

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CHAPTER 03 MANAGEMENT & ADMINISTRATION, CON'T

C .08 Variances

C .09 Advertisement

CHAPTER 04 OPERATIONAL REQUIREMENTS

C .02 Enrollment and Attendance

CHAPTER 05 PHYSICAL PLANT AND EQUIPMENT

C .01 Building Safety [exc. A]

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 and Supplies [exc. B]

C .09 Lighting

C .10 Telephone and Communication

NA .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 Directors of All Child Care Centers [exc. C]

NA .06 Directors – Preschool Centers

C .07 Directors – School Age Centers

NA .08 Directors – Combined Age Centers

NA .09 Child Care Teachers – Preschool [exc. C]

C .10 Child Care Teachers – School Age [exc. C]

C .11 Assistant Child Care Teachers [exc. C]

C .12 Aides [exc. B(1)-(3)]

C .13 Substitutes

C .14 Support Personnel

C .15 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

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CHAPTER 08 CHILD SUPERVISION

- C.01 Individualized Attention/Care [exc. A]
C.02 Supervision by Qualified Staff [exc. B]
C.04 Variations in Group Size
C.05 Supervision during Water Activities
C.06 Supervision during Transportation

CHAPTER 09 PROGRAM REQUIREMENTS

- C.01 Schedule of Daily Activities
NA.02 Activity Plans for Infants and Toddlers
C.03 Activity Materials, Equipment, Furnishings
NA.04 Rest Furnishings [exc. F]
NA.05 Infant and Toddler Equipment
C.06 Storage

CHAPTER 10 SAFETY

- C.01 Emergency Safety Requirements [exc. A(4) & C]
C.02 First Aid/CPR
C.06 Transportation

CHAPTER 11 HEALTH

- C.01 Exclusion for Acute Illness
C.02 Infectious and Communicable Diseases
C.03 Preventing Spread of Diseases
C.04 Medication Administration/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]
C.05 Food Preparation Area and Equipment
NA.06 Infant Feeding

CHAPTER 13 CENTERS FOR CHILDREN WITH ACUTE ILLNESS

- NA.03 Approved Plan of Operation
NA.04 Director Requirements
NA.05 Use of Health Consultant

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CHAPTER 14 ADOLESCENT CENTERS

NA.01 Approved Plan

CHAPTER 15 DROP-IN CENTERS

NA.04 Approved Plan

NA.06 Admission Requirements

CHAPTER 16 EDUCATIONAL PROGRAMS

NA.04 Change of Operation

NA.06 Personnel Qualifications

NA.07 Educational Program

NA.08 Child Record

NA.09 Health, Fire Safety, Zoning

CHAPTER 17 INSPECTIONS, COMPLAINTS & ENFORCEMENTS

C.02 Inspections

NA.06 Emergency Suspension



Signature of Facility Representative



Signature of Agency Representative

Chanelle Lomax

10/30/2023

Date