FAMILY CHILD CARE HOME INSPECTION REPORT

INSPECTION DATE/TIME/DURATION:
11/20/2025 1:15 PM

PROVIDER ID:
572873

REGISTRATION #:

JURISDICTION:

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

☐ Follow Up

AGES	Registered for	# Enrolled	# Present	Resident Children
0-23 Months		0	3	3
2's	Y ● N	0	0	0
3's	Y ● N	0	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		0	3	3
Overnight		0	0	XXXXXX
Head Start	XXXXXX	0	XXXXXX	XXXXXX

REGION:
3

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:
12/05/2025

BUSINESS NAME:

PROVIDER NAME:
Iyanuloluwa Adesanya

CO-PROVIDER:

ADDRESS:
3630 Double Rock Lane Parkville MD 21234

PERSONS INTERVIEWED:
Iyanuloluwa Adesanya, Adepeju Ojo

TITLE(S):
Provider, Additional Adult

TELEPHONE:
(347) 881-5590

E-MAIL:
a_iyanu@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

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

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CHAPTER 02 REGISTRATION APPLICATION AND MAINTENANCE

D	**.03B**	Continuing Registration
NA	**.04B**	Conditional Status

CHAPTER 03 MANAGEMENT & ADMINISTRATION

D	**.01**	Advertisement

CHAPTER 03 MANAGEMENT & ADMINISTRATION, CON'T

D	**.02**	Admission to Care
D	**.03**	Program Records
D	**.04**	Child Records **[exc. A]**
D	**.05**	Notifications **[exc. C-E]**
D	**.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.

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CHAPTER 04 OPERATIONAL REQUIREMENTS

D ____ **.01** Hours of Care

D ____ **.02** Age Group Enrollment

CHAPTER 05 HOME ENVIRONMENT & EQUIPMENT

N ____ **.01** Suitability of the Home

C ____ **.02** Lead-Safe Environment

CHAPTER 06 PROVIDER REQUIREMENTS

C ____ **.03** Provider Substitute

C ____ **.04** Additional Adult

NA ____ **.05** Volunteers

CHAPTER 07 CHILD PROTECTION

D ____ **.03** Applicability to Residents

D ____ **.05** Parental Access

D ____ **.06** Authorized Release

CHAPTER 08 CHILD SUPERVISION

D ____ **.02** Off-Site Supervision

D ____ **.03** Water Activity Supervision

NA ____ **.04** Overnight Care Supervision

CHAPTER 09 PROGRAM REQUIREMENTS

D ____ **.01** Activities

D ____ **.02** Materials/Equipment

D ____ **.03** Rest Periods

CHAPTER 10 SAFETY

N ____ **.01** Emergency Safety

D ____ **.03** Outdoor Safety

D ____ **.04** Water Safety

D ____ **.05** Transportation Safety

CHAPTER 11 HEALTH

D ____ **.01** Child Comfort/Welfare

D ____ **.02** Exclusion for Acute Illness

D ____ **.03** Infectious/Communicable Diseases

D ____ **.04** Medication Administration/Storage

D ____ **.05** Smoking

D ____ **.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.

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CHAPTER 12 NUTRITION

D ____.01 Nutrition/Food Served

C ____.02 Food Storage/Cleanliness

CHAPTER 13 INSPECTIONS, COMPLAINTS & ENFORCEMENTS

C ____.01 Inspections

NA ____.06 Emergency Suspension

Signature of Provider	Signature of Agency Representative Nichole Allen	11/20/2025 Date