

LETTER OF COMPLIANCE INSPECTION REPORT

INSPECTION DATE/TIME/DURATION: 5/22/2026 1:30 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: 100</th> </tr> <tr> <th>AGES</th> <th>Approved for</th> <th># Enrolled</th> <th># Present</th> </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>7</td> <td>3</td> </tr> <tr> <td>5-15 (school-age)</td> <td>☒ Y N</td> <td>84</td> <td>49</td> </tr> <tr> <td>TOTAL</td> <td></td> <td>91</td> <td>52</td> </tr> <tr> <td>Head Start</td> <td>XXXXXXX</td> <td>0</td> <td>XXXXXX</td> </tr> </table>		Approved Capacity: 100				AGES	Approved for	# Enrolled	# Present	2's	Y ☒ N	0	0	3's	Y ☒ N	0	0	4's	☒ Y N	0	0	5's (pre-school)	☒ Y N	7	3	5-15 (school-age)	☒ Y N	84	49	TOTAL		91	52	Head Start	XXXXXXX	0	XXXXXX
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WORKERS COMPENSATION INSURANCE COVERAGE: ☐ Y ☒ N		EXP DATE:																																																									
OPERATOR NAME: St Joseph School																																																											
FACILITY NAME: Saint Joseph School Pre-K / School Age																																																											
ADDRESS: 105 Church Lane Cockeysville MD 21030																																																											
PERSON(S) INTERVIEWED: Kammeran Giggers																																																											
TITLE(S): Director																																																											
TELEPHONE: (410) 683-0600		E-MAIL: kgiggers@sjpray.org ☒ 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>	.03.06A	Notifications
<u>C</u>	.04.01B	Capacity
<u>C</u>	.05.01A	Building Safety
<u>C</u>	.05.08A	Appropriate Facilities and Supplies
<u>C</u>	.05.11	General Cleanliness and Disposal of Refuse
<u>C</u>	.05.12	Outdoor Activity Area
<u>C</u>	.07.02	Abuse and Neglect Reporting
<u>C</u>	.07.06	Child Security

<u>C</u>	.08.01A	Appropriate Supervision
<u>C</u>	.08.03	Group Size and Staffing
<u>C</u>	.08.07	Playground Supervision
<u>C</u>	.10.01A(4)	Emergency Escape Route Posted
<u>C</u>	.10.01C	Emergency Contact Posted
<u>C</u>	.10.03	Safe Use of Materials and Equipment
<u>C</u>	.10.04	Potentially Hazardous Items
<u>C</u>	.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

<u>C</u>	.03C	Maintenance of a Continuing Letter of Compliance
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CHAPTER 03 MANAGEMENT AND ADMINISTRATION

<u>C</u>	.01	Multi-Site Facilities
<u>C</u>	.02	Admission to Care
<u>C</u>	.03	Program Records
<u>N</u>	.04	Child Records
<u>N</u>	.05	Staff Records

<u>C</u>	.06	Notifications [exc. A]
<u>C</u>	.07	Change of Operation
<u>C</u>	.08	Variances
<u>C</u>	.09	Advertisement

CHAPTER 04 OPERATIONAL REQUIREMENTS

<u>C</u>	.02	Enrollment and Attendant
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CHAPTER 05 PHYSICAL PLANT AND EQUIPMENT

<u>C</u>	.01	Building Safety [exc. A]
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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 and Supplies [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]
- C .02 First Aid and CPR
- C .05 Transportation

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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
N .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

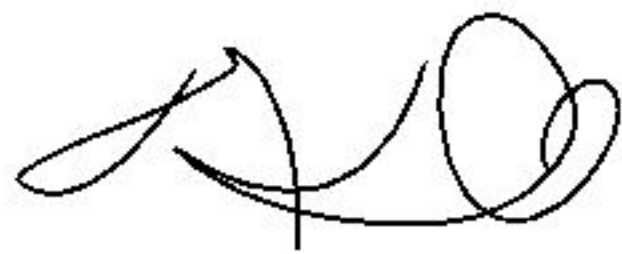
- C .01 Approved Plan

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
NA .06 Emergency Suspension



Signature of Provider



Signature of Agency Representative

Alexis Thomas

5/22/2026

Date

