

FAMILY CHILD CARE HOME INSPECTION REPORT

INSPECTION DATE/TIME/DURATION:

PROVIDER ID:

REGISTRATION #:

JURISDICTION:

REGION:

EXCELS LEVEL:

INSPECTION TYPE	
<input type="checkbox"/>	Initial Application
<input type="checkbox"/>	Conversion
<input type="checkbox"/>	Mandatory Review
<input type="checkbox"/>	Full
<input type="checkbox"/>	Complaint Investigation
<input type="checkbox"/>	Monitoring
<input type="checkbox"/>	Other

AGES	Registered for	# Enrolled	# Present	Resident Children
0-23 Months				
2's				
3's				
4's				
5's (pre-school)				
5-12 (school-age)				
TOTAL				
Overnight				XXXXXX
Head Start	XXXXXXXX		XXXXXX	XXXXXX

COMPLAINT #:

ACCREDITED: Y N ACCREDITED BY: _____ EXP DATE: _____

HOMEOWNER'S INSURANCE COVERAGE: N/A Y N EXP DATE: _____

BUSINESS NAME: _____

PROVIDER NAME: _____

CO-PROVIDER: _____

ADDRESS: _____

PERSONS INTERVIEWED: _____

TITLE(S): _____

TELEPHONE: _____ E-MAIL: _____

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

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

- ____.03B Continuing Registration
 _____.04B Conditional Status

CHAPTER 03 MANAGEMENT & ADMINISTRATION

- ____.01 Advertisement

CHAPTER 03 MANAGEMENT & ADMINISTRATION, CON'T

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

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

CHAPTER 04 OPERATIONAL REQUIREMENTS

- ____.01 Hours of Care
- ____.02 Age Group Enrollment

CHAPTER 05 HOME ENVIRONMENT & EQUIPMENT

- ____.01 Suitability of the Home
- ____.02 Lead-Safe Environment

CHAPTER 06 PROVIDER REQUIREMENTS

- ____.03 Provider Substitute
- ____.04 Additional Adult
- ____.05 Volunteers

CHAPTER 07 CHILD PROTECTION

- ____.03 Applicability to Residents
- ____.05 Parental Access
- ____.06 Authorized Release

CHAPTER 08 CHILD SUPERVISION

- ____.02 Off-Site Supervision
- ____.04 Water Activity Supervision
- ____.05 Overnight Care Supervision

CHAPTER 09 PROGRAM REQUIREMENTS

- ____.01 Activities
- ____.02 Materials/Equipment
- ____.03 Rest Periods

CHAPTER 10 SAFETY

- ____.01 Emergency Safety
- ____.03 Outdoor Safety
- ____.04 Water Safety
- ____.05 Transportation Safety

CHAPTER 11 HEALTH

- ____.01 Child Comfort/Welfare
- ____.02 Exclusion for Acute Illness
- ____.03 Infectious/Communicable Diseases
- ____.04 Medication Administration/Storage
- ____.05 Smoking
- ____.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

- ____.01 Nutrition/Food Served
- ____.02 Food Storage/Cleanliness

CHAPTER 13 INSPECTIONS, COMPLAINTS & ENFORCEMENTS

- ____.01 Inspections

Signature of Provider

Signature of Agency Representative

Date

