

A. Child Care Provider Information:

Business Name:	Myra's Child Care	Home Care Loca	ation:	Marpo Heights			
Name of Provider	: Myra C. Diaz			(street name, Vi	llage, Islai	nd)	
		Da	ate:	Time		Type of Cheo	k-in:
			23-Oct-24		9:30 AM	Initial Visit	_
			11/1/24		8:00 AM	Follow-up	-
						IV	_ Initial Visit
						FOL	Follow-up
						U	Unannounced

C. Child Care Services Information:

Child Care Service is provided in (Check one):

D. Child Care Provider Acknowledgment:

The LEFFN / LFFN provider in the process of renewal will go through an initial check-in visit, after all required documentation has been received (reference CCDF Provider Application for details). If CCDF provider meets all requirements, a CCDF Provider Certificate

The LEFFN / LFFN provider will be subject to one announced and one unannounced health and safety check-in within the year from $M^{(M)}$ the date on their CCDF Provider Certificate.

HOWEVER, the home where you provide care may be visited more than two times a year; depending on improvement efforts MDightowards meeting CCDF Health and Safety standards.

- \checkmark If the standard was observed or verified through postings, documentations, etc...
- X If the standard was not seen during the time of the visit or verified through evidence of documentation, postings, etc...



CCDF LEFFN or LFFN PROVIDER

E. Health and Safety Standards:

No.	IV	FOL	(1) KITCHEN / EATING AREA	COMMENTS
1	\checkmark		(1-a) Kitchen is clean, sanitized, and safe for the child(ren).	
2	\checkmark		(1-b) Healthy meals and snacks are provided and water is offered throughout the day.	
3	\checkmark		(1-c) Proper hand-washing procedure is posted by the working sink(s) where hand washing practices occur in the kitchen.	
No.	IV	FOL	(2) TOILETING AREA	COMMENTS
4	\checkmark		(2-a) Children have access to a working toilet with toiletries, and the toileting area is dry	
5	\checkmark		(2-b) Each child has their own labeled toothbrush and kept separate from the adults' toothbrushes.	
6	\checkmark		(2-c) The proper hand-washing procedure is posted by the sink(s) in the bathroom area where the child(ren) and provider wash their hands.	
No.	IV	FOL	(3) CHILD(REN)'S FILE	COMMENTS
7	N/A		(3-a) Care Plan is signed by a physician (Child(ren)'s allergy and / or medical need information).	
8	х	\checkmark	(3-b) Parents have completed the Child's Immunization Record and the Authorization for Emergency Medical / Dental Care forms	2024.10.23 Advised to update immunization records and authorization forms of all children.
9	\checkmark		(3-c) Accident and / or incident report is filled out daily.	
No.	IV	FOL	(4) POSTINGS OF REQUIRED DOCUMENTS	COMMENTS

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PROFESSIC	NAL SOLUTIO	DNS, LLC		
10	\checkmark		(4-a) Required documents are posted and visible: Business License, CCDF Provider Certificate, Health Certificate Clearance.	
11	\checkmark		(4-b) The "No Smoking" and "Exit" signs are posted, and there is a daily activity schedule for children within view.	
12	\checkmark		(4-c) The provider has contact information for two additional authorized individuals besides the parents or guardians.	
No.	IV	FOL	(5) EMERGENCY PREPAREDNESS AND RESPONSE PLANS	COMMENTS
13	\checkmark		(5-a) The provider has unobstructed emergency exit(s), and the Emergency Evacuation Exit Plan is posted by every exit door at adult eye level.	
14	\checkmark		(5-b) Emergency and disaster drills are conducted and recorded.	
15	\checkmark		(5-c) Home-based child care has an Emergency Preparedness and Response Plan (EPRP).	
No.	IV	FOL	(6) OBSERVABLE PRACTICES AND ROUTINE	COMMENTS
16	\checkmark		(6-a) Provider assists children in performing proper hand-washing procedures throughout the day during important routines, including meals, toileting, diaper changes, outdoor play, and upon entering.	
17	\checkmark		(6-b) The provider cares for no more than 4 children for LEFFN or 6 children for LFFN, and parents have full access to their children at any time.	
18	\checkmark		(6-c) The child care provider will not use physical or harsh discipline, and food will not be used as a reward or punishment.	
19	\checkmark		(6-d) The provider forbids smoking on the premises during operational hours and around the children.	

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No.	IV	FOL	(7) ELECTRICAL HAZARDS	COMMENTS
20	\checkmark		(7-a) Breaker box is covered & out of child(ren)'s reach.	
21	\checkmark		(7-b) Electrical cords are securely installed and kept clear of pathways to prevent electrical and tripping hazards.	
No.	IV	FOL	(8) PRACTICES THAT PREVENT HAZARDS THAT PREVENT ILLNESSES	COMMENTS
22	\checkmark		(8-a) Cleaning chemicals are kept out of children's reach or in a locked cabinet and the home has the necessary supplies for regular cleaning.	
23	\checkmark		(8-b) The provider follows a posted cleaning schedule and conducts a Daily Health Check for all enrolled children.	
24	\checkmark		(8-c) There is a specific, clean, and comfortable area for sick child(ren) that is kept separate from the other child(ren).	
No.	IV	FOL	(9) SLEEPING AREA	COMMENTS
25	\checkmark		(9-a) A clean and comfortable napping area is provided for each child and labeled accordingly.	
No.	IV	FOL	(10) SAFETY SUPPLIES	COMMENTS
26	\checkmark		(10-a) The first aid kit must be visible and accessible at all times.	
27	\checkmark		(10-b) The home is equipped with a fire extinguisher, which is inspected as required and securely placed in a safe, convenient location that is out of child(ren)'s reach.	
28	\checkmark		(10-c) The home is equipped with working smoke detectors installed in each required room, except the kitchen.	

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No.	IV	FOL		(11) DIAPERING AREA	COMMENTS
29	\checkmark			(11-a) If applicable, diaper changing or use of the changing table is performed away from the eating area.	
30	\checkmark			(11-b) The changing table or mat is water-resistant and easily wipeable, and is sanitized and air-dried after each use.	
31	\checkmark			(11-c) Soiled diapers are wrapped tightly in a plastic bag and disposed of in a closed bin that is stationed far from the eating area.	
32	\checkmark			(11-d) Proper Diaper Changing procedure is posted near the designated area for changing diapers.	
No.	IV	FOL		(12) PLAYGROUND / OUTDOOR SPACE	COMMENTS
33	\checkmark			(12-a) The playground is in an enclosed area that prohibits vehicles from entering using barriers such as cones, flower pots, or a fence.	
34	\checkmark			(12-b) The playground is well-maintained, free from odor and animal feces or excrements, with equipment that is age-appropriate, properly sized for the child(ren) using it, and free from sharp edges and rust.	
35	\checkmark			(12-c) Adult supervision is provided at all times during operational hours, both indoors and outdoors.	
36	х			(12-d) Playground surfacing is free from tripping hazards, such as large roots where children normally run through.	

NOTES:

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PROFESSIONAL SOLUTIONS, LLC		
INITIAL CHECK-IN VISIT:		
McDiag		
Provider's Signature: Myra Dia	DATE: 10/23/34	(PRINT / SIGNATURE)
Visit Conducted by: Brica Thomburgh		
Visit Conducted by: Krica Thornburgh	DATE: 10/23/24	(PRINT / SIGNATURE)
TYPE OF CHECK-IN VISIT: Follow-up		
mcDiag		
Provider's Signature: Myra Dia	DATE: 11/1/24	(PRINT / SIGNATURE)
Stice & Thomsaugh		
Visit Conducted by: Brica Thornburgh	DATE: 11/1/24	(PRINT / SIGNATURE)
TYPE OF CHECK-IN VISIT: Follow-up		
Provider's Signature:	DATE:	(PRINT / SIGNATURE)
Visit Conducted by:	DATE:	(PRINT / SIGNATURE)
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CHILD CARE ACTION PLAN (CAP) Areas for Improvement						
Health & Safety Checklist or Caring for Our Children, 4th Edition	Discrepancy Referenced	Action to be taken to help meet the standards	Estimated Completion Date			
H&S	3-b	will update children immunization records and authorization forms	Date 11/1/24			
H&S	5-0		11/1/2-			
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