

**DWS FFN APPROVAL
ANNOUNCED INSPECTION**

Name: Phone Number: Email:	Location Address: Provider's Home Child(ren)'s Home	Facility Number: Licensor(s):
Inspection Date:	Start Time: End Time:	Attempted Inspection

C - Compliance
NC - Noncompliance

Noncompliant Finding(s) Action Needed	Expiration Date of Approval	First Follow-Up	Second Follow-Up	Third Follow-Up
	Due Date	C NC	C NC	C NC
	Due Date	C NC	C NC	C NC
	Due Date	C NC	C NC	C NC
	Due Date	C NC	C NC	C NC
	Due Date	C NC	C NC	C NC
	Due Date	C NC	C NC	C NC
	Due Date	C NC	C NC	C NC
	Due Date	C NC	C NC	C NC

Number of noncompliant findings:

If the only noncompliant findings were missing documentation, you must submit the documentation to your licensor. Remember to have your name on all documents.

If you don't show compliance by the due date, your approval will be deactivated and you won't be eligible to receive child care payments from the Department of Workforce Services (DWS).

Provider's Signature:

First Follow-Up Inspection

Date: Start Time: End Time: Attempted Inspection

Number of noncompliant findings:

If on-site, Provider's Signature:

Second Follow-Up Inspection

Date: Start Time: End Time: Attempted Inspection

Number of noncompliant findings:

If on-site, Provider's Signature:

Third Follow-Up Inspection

Date: Start Time: End Time: Attempted Inspection

Number of noncompliant findings:

If on-site, Provider's Signature:

Notes

PROVIDER INFORMATION

When Care Is Provided:

DWS Customer Name:

Number of Children:

Relationship:

Grandparent Aunt/Uncle Cousin

Sibling Over Age 18 Friend/Neighbor

DWS Customer Name:

Number of Children:

Relationship:

Grandparent Aunt/Uncle Cousin

Sibling Over Age 18 Friend/Neighbor

Children's Names and Ages:

Children's Names and Ages:

Notes (Include information from Sticky Notes):

BEFORE THE INSPECTION

Review the photos from the Sex Offender Registry and remind the provider that these individuals cannot have unsupervised access to children in care.

Have the provider sign the DWS Payment to Provider Terms and Conditions.

Yes No

Ask: ► Is the home sub-divided with renters and/or landlords living in other areas of the home?

If the home is sub-divided, determine if the renters and/or landlords live in the same home as the provider.

Living in the same home means the individuals:

- daily share a bathroom, kitchen, and/or living area with others in the home; or
- don't have a signed rental/lease agreement with the person who owns the home; or
- don't have a separate mailing address and mailbox (A Post Office Box is not a separate mailing address); or
- don't live in an area with a separate outside entrance and no interior doorway (inside the home) between the living areas; or
- could have unsupervised access to the children in care.

Yes No

Do renters and/or landlords live in the same home as the provider ?

If yes, their background checks and living areas will be assessed.

Notes:

INSPECTION

C - Compliance NC - Noncompliance NA - Not Applicable

*Level 1 Noncompliance

✓Remain until there is compliance

QUESTIONS		Compliance			Notes
1) b)*	Care in the provider's home - Do the children or a parent live here? Care in the child(ren)'s home - Do you live here?	C	NC	NA	
1) c)*	When the provider lives in the same home as the child(ren) - Are you a sibling of the child(ren)?	C	NC	NA	
1) e)*	When care is in the child(ren)'s home - Is a parent of the child(ren), including a DWS customer working from home, there when care is provided?	C	NC	NA	
7) b) i)	Do you take the child(ren) off the premises (for example, to run errands or go to a park)? If yes - Is the parent aware of this?	C	NC	NA	
7) b) ii)	Do you allow the child(ren) to leave the premises, such as to go to a neighbor's house or ride bikes on the street? If yes - Is the parent aware of this?	C	NC	NA	
✓4) b)*	Are there infants in care? If yes - When they are sleeping, how do you supervise them?	C	NC	NA	
✓5) g) ii)*	- Do you place them on their backs for sleeping?	C	NC	NA	
✓5) l)*	Are there any animals accessible to the (child)ren? If yes - Do they have a history of dangerous, attacking, or aggressive behavior?	C	NC	NA	
6) c)*	Do you ensure that the children are not subjected to physical, emotional, or sexual abuse while in care?	C	NC	NA	
6) d)*	If you witness or suspect abuse, neglect, or exploitation of the children, will you report it to Child Protective Services?	C	NC	NA	
7) a)	Does the parent of the child(ren) have access to all areas used for care? [NA when care is in the child(ren)'s home .]	C	NC	NA	
8) c)	When the children were in care, was there an incident or injury that required attention from a health care provider? If yes - Did you notify us within 24 hours of its occurrence and submit documentation within 5 days?	C	NC	NA	
8) d)	Has any Covered Individual been convicted of a felony or misdemeanor? If yes - Did you notify us within 48 hours?	C	NC	NA	
8) e)	Have you changed your name, your telephone number or email, your child care schedule, or the children in care? If yes - Did you notify us within 10 calendar days?	C	NC	NA	

DOCUMENTATION		Compliance	Notes
2) b)*	Ask ► Since the last inspection, has anyone 12 or older moved into the home? If yes - ► Did they pass the Background Check?	C NC NA	
2) c)*	Ask ► Since the last inspection, has anyone 12 or older stayed in the home for more than 2 weeks? If yes - ► Did they pass the Background Check?	C NC NA	
2) d)*	Ask ► Since the last inspection, has anyone in the home turned 12 years old? If yes - ► Did you submit Background Check information? [N/A when care is in the child(ren)'s home and the child is a sibling of the children in care.]	C NC NA	
2) a)* 2) e)*	Ask ► Who are the Covered Individuals? Did all Covered Individuals pass a current background check? [When care is in the provider's home - everyone 12 years old and older who live in the home] [When care is in the child(ren)'s home - everyone 12 years old and older who live in the home except the DWS customer(s) and 12 to 17 year old siblings of children in care]	C NC NA	
9) a)	Does the provider have current First Aid certification?	C NC NA	Not Assessed
9) b)	Does the provider have current infant/child CPR certification from a class that included hands-on testing?	C NC NA	
10) a) i)	Does the provider have current First Aid and CPR certifications available for review?	C NC NA	
10) a) ii)	Does the provider have a record of the dates and times each child was in care?	C NC NA	
10) a) iii)	Does the provider have documentation of current immunization records for each child who does not attend school?	C NC NA	
10) a) iv)	Does the provider have his/her Health and Safety Plan?	C NC NA	
10) a) v)	Does the provider have documentation of fire and disaster drills?	C NC NA	
10) a) vi)	Does the provider have documentation of ongoing training?	C NC NA	

INDOOR AND OUTDOOR		Compliance	Notes
	--Children in care are all children younger than 13 years old, including the provider's children and any children who are in the home when care is provided.--		
	Ask ► Other than the child(ren) of the DWS customer(s), are there any other children younger than 13 years old in the home when care is provided? If yes, how many?		
✓3) a) i) ii)* ✓3) b) i) ii)*	<p>provider's home</p> <p>--When all children in care are siblings who are related to the provider and there are no other children in care - no limit</p> <p>--When there are children in care who are not siblings who are related to the provider - no more than 8 children and no more than 2 of those children can be younger than 2 years old</p> <p>(License or RC required when there are more than 4 unrelated children in care.)</p>	<p>child(ren)'s home</p> <p>--When all children in care are siblings and there are no other children in care - no limit</p> <p>--When there are children in care who are not siblings - no more than 8 children and no more than 2 of those children can be younger than 2 years old</p> <p>(Only the children living in the home can be in care.)</p>	C NC NA
✓4) a)*	Are all children actively supervised? (School-age children can be outdoors when providers are indoors and can hear them.) Ask ► How many children are in care?	C NC NA	
✓5) f)*	Ask ► Are there firearms on the premises? If yes - Ask ► Are they loaded? - Are they in a cabinet, safe, or area that is locked with a key, combination, or fingerprint lock?	C NC NA	
5) g)*	Ask if not observed ► Are there infants in care? If yes - Is there equipment designed for their sleep?	C NC NA	
5) h) vi)	Ask is not observed ► Are there portable space heaters, fireplaces, or wood burning stoves* that, when in use, are accessible?	C NC NA	
5) b)	Is the home, outdoor area, toys, and equipment maintained in a safe manner to prevent injury to the child(ren)?	C NC NA	
5) c)	Is there a working telephone?	C NC NA	
5) d)	Is there a working fire extinguisher?	C NC NA	
5) e)	Is there a working smoke detector on each floor of the home?	C NC NA	
6) b)	Is there a flushing toilet and a working hand washing sink?	C NC NA	

INDOOR AND OUTDOOR		Compliance	Notes
5) h) i)	Are there accessible prescription medications, over the counter medications, vitamins, or herbal supplements?	C NC NA	
5) h) ii)*	Are there accessible empty refrigerators or freezers?	C NC NA	
5) h) iii)*	Are there accessible exposed live electrical wires?	C NC NA	
5) h) iv)*	Are there accessible open containers of alcohol?	C NC NA	
5) h) v)*	Are there accessible illegal substances?	C NC NA	
5) h) vii)	<p>Are there any of the following accessible toxic substances?</p> <p>ammonia anti-freeze bleach (undiluted) corroded batteries drain cleaners energy shots fertilizer with weed killer florescent light tubes gasoline gunpowder gun solvent hydrocarbons insecticide insect repellent iodine jewelry cleaner kerosene laundry detergent pods lighter fluid</p>	<p>linseed oil liquid correction fluids model glue nail glue nail polish remover/other solvents containing acetone paint thinner pesticides rubber cement rubbing alcohol silicone spray spray paint super glue Tiki Torch Fuel tile grout sealer turpentine vinyl adhesive remover water sealant WD-40 weed killer windshield washer fluid</p>	C NC NA
5) h) viii)	Are there accessible poisonous plants?	C NC NA	
5) h) ix)*	Are there accessible open flames?	C NC NA	
6) a)	Is there a clean and sanitary environment for the child(ren)?	C NC NA	
6) e)*	Did the provider have appropriate interactions with the child(ren)?	C NC NA	

OUTDOOR Check when there is no outdoor area.		Compliance	Notes
5) j) i) (1)*	Are there accessible unanchored swings and/or large metal slides?	C NC NA	
5) j) i) (2)*	Are there accessible raised decks or balconies or open stairwells 5 feet or higher without protective barriers or with protective barriers with gaps greater than 5 by 5 inches?	C NC NA	
5) j) i) (3)*	Are there accessible motor vehicles on blocks?	C NC NA	
5) j) i) (4)*	Are there accessible rebar or metal rods less than 36 inches long sticking up from the ground or out of walls?	C NC NA	
5) j) ii)*	Is there accessible stationary play equipment over hard surfaces such as cement or asphalt?	C NC NA	
4) e)*	Ask if not observed ► Is there a trampoline? If yes - Ask ► How do you supervise children when they are on the trampoline?	C NC NA	
4) c)*	Ask if not observed ► Do you use wading pools? If yes - Ask ► How do you supervise children in the wading pool?	C NC NA	
4) d)*	Ask if not observed ► Is there a swimming pool that's not emptied after each use? If yes - Ask ► How do you supervise children when they are in the swimming pool?	C NC NA	
5) j) iii)	Is there equipment? If yes - Ask if not observed ► How do you ensure equipment is used in a safe manner to prevent injury to the child(ren)?	C NC NA	
Notes:			