

### ARE YOU READY FOR YOUR INITIAL INSPECTION?

Child Care Group Home Initial Inspection Bureau of Child Care Licensing

> New Child Care Group Home Readiness Checklist Guide

### **Readiness Self Checklist** Welcome To The Presentation

If you are reviewing this presentation, then you should be the individual responsible for

Preparing your Child Care Group Home

### for the Initial Inspection.

You may be the Child Care Group Home's:

- Certificate Holder
- Provider

### **Readiness Self Checklist** For this Presentation, you will need:

A copy of the following items:

New Child Care Group Home Readiness Self Checklist

For rules and regulations referred to on the <u>Checklist</u> that will be used during the inspection, print a copy of the Rules & Statutes:

Child Care Group Home Rules & Statutes

# Are you qualified to be a child care provider?

R9-3-301.A.

**Certificate Holder and Provider Responsibilities** 

**Qualified Provider:** 

To qualify as a child care group home provider, you must:

- Live in the residence
- Be at least 21 years of age
- Have a minimum of a high school diploma or GED
- And, meet one of the qualification options listed in R9-3-301.A.1.(d-e) (next page)

### **PROVIDER QUALIFICATIONS**

### Do you have documentation for ONE of these:

- Scredit hours in childrelated college course work
- 60 hours of training in child-related topics
- 12 months of child care experience



### Do you have Liability Insurance?

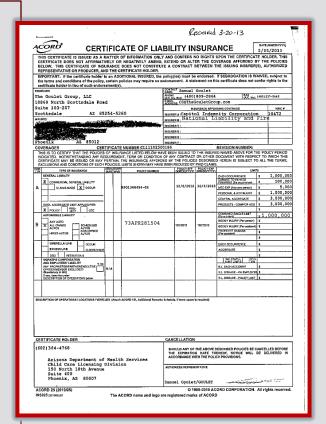
**R9-3-301. C.** 

**General liability insurance** 

Minimum of \$100,000

Provide a copy of the Certificate to the Department

Keep one copy in your files





# Do you have an area picked out to place all required postings?

#### **R9-3-301.G.** Posting of Notices

- Post the following information in a place that can be viewed when entering or leaving the home:
- Child Care Group Home Certificate
- ✓ Name of Provider
- Name of staff member designated to act on behalf of provider when provider is not present in the home



# Do you have an area picked out to place all required postings?

### **R9-3-301.G.** Posting of Notices

Post the following information in a place that can be viewed when entering or leaving the home:

### ✓ Hours of operation

- Weekly activity schedule
- The amount of time in minutes children may watch television, videos, or DVDs (screen time)
- The current weekly menu

### Do you have a system to maintain inspection reports?

### A.R.S. § 36-897. 12.A. & -389.01.K Inspection of Records

Maintain a file for all Department Inspection documents Records of:

- Annual inspection
- Mid-year inspection
- Any announced or unannounced inspection/investigation

### Do you have a system to maintain files?

Staff member files:

**R9-3-301.A. 1- 4.b.** 

Non-staff/household member files:

**R9-3-301.A.3.** and A.4.c.

Pet vaccination documentation:

**R9-3-508.1.2**.

### Do you have a system to maintain files?



#### FILES NEEDED FOR GROUP HOMES

#### ENROLLED CHILDREN'S FILES

Emergency Information & Immunization Record Card
 Proof of immunization or exemption attached
 Special instructions (IEP for special needs)
 Attendance sheets
 Medication forms
 Field trip permission slip
 Transportation permission
 Modified diet, formula & written feeding instructions
 Notices of illness and infestation
 Toeler training instructions

#### OTHER DOCUMENTATION REQUIRED

□ Staff Attendance records Dated Menus (post weekly) Documentation of each accident, emergency & injury Carinsurance & AZ Registration, if applicable Field trip plan & attendance records Copies of all service and repair records on vehicles Evacuation drills & smoke detector checks Certificate of Insurance Documentation of home closures/injuries and emergency responses Notifications of diseases or infestations to parents Gas inspection, if applicable Diaper changing log Documentation of suspected abuse or neglect CRabies Vaccination (dogs, cats & ferrets) Pool water tests Notice board postings Parent Handbook Written weekly schedule □ Fire/emergency plan; evacuation plan; home floor plan G:\Forms\SGH|Files Needed for Group Homes.doc (09/11) CCL form - 217

PROVIDER AND STAFF MEMBER'S FILES
Name, date of birth, address, phone number
Starting date of employment
Cirminal History Affidavit
Griminal History Affidavit
Grimerprint App // Fingerprint Clearance Card
Negative TB skin test or chest x-ray
Good faith reference checks - previous employers
New staff training within 10 days of hire
Annual training documentation
High school diploma or GED
First aid &/or CPR certificates
Copy of driver's license (if transporting)
Central Registry Dackground check
Central Registry Direct Service Position form

#### PROVIDER FILLE, (in addition to above)

#### HOUSEHOLD MEMBER'S FILES

Name, date of birth
Immunization statements or shot records
Date resident began living in the home
Date resident last resided in home, if <u>applic</u>.
Relationship to certificate holder/provider
TB test results (age 12 yrs & older)
Fingerprint application/card, if adult
Criminal History Affidavit, if adult

🗆 1.*	Name		Date	of Birth:	
	Address:		City /	State / Zip:	
	Telephone #:		Posit	ion / Relationship:	
□ <b>2</b> .	Start Date:	Hire Date: (if different)			
3.	End Date:				
4.*			la, diphtheria	e undersigned does hereby t n, mumps and pertussis that a Date:	
□ <u>5</u> .	Criminal History Affidavit , d	original signed & dated			
	Verification of Fingerprint R Copy of the Applicant Fingerp Copy of the Fingerprint Clears DPS contacted (date	rint Registration Application (a nce Card (expiration date	pplication #	)	B.4):
	Documents required by R9 Mantoux TB Test Results (on A health care provider's signe	or w/in 12 months prior to star	t date)	date of test results	date
8.	Good faith efforts to contac Contact 1 Name:	· · · ·	] Contact 2 ame:	Date:	
D 9.*	CPS Registry backgroun	d check* CPS Regist	ry Direct Serv	vice Position form or Affidavit	form
	DHS New Provider Orie	ntation certificate (provider	/owner)	* staff & residents 18 years and	d olde
	Written Documentation of T New Staff Training within 10 Twelve (12) Hours of Annual YEAR: (based on hire date) HOURS:	days of starting date (d	late)	, including at least two or more to	pics
□ 11.	Documents required by R9	-3-301.A.1 or D.1 (provider o	or person left in	n charge)	-
	High School Diploma/Gl	ED Certificate by ploo	weri ne tr	fied (name) by:	
	Work Experience	Training/Education		(date)	
П	Current License or Certifica	tion (R9-3-302.E, R9-3-408.I			
		CPR Certificate	AZ Driver	s License	

#### 2024-05-01

#### **BCCL** Training

### Does at least one staff member present have current CPR and First Aid?

#### **R9-3-301.I.**

First Aid & CPR training must be documented for the staff present in the home.

- First Aid certification for children and infants
- CPR certification for children and infants
  - Must include demonstration of skill



# Do you have a qualified adult in charge in the provider's absence?

### **R9-3-301.D.1.** Staff in charge in provider's absence meets qualifications

**To qualify, the person must be:** 

- at least 18 years of age and
- A high school diploma or a GED
- Meet one of the qualification options listed in R9-3-301.D.1.a-c (next page)

### QUALIFICATIONS for PROVIDER'S DESIGNATED "IN CHARGE" STAFF

- Do you have documentation for ONE of these:
- 6 months child care experience
- 2 credit hours (or more) in child-related college courses
- 30 hours training in child-related topics

## Have you prepared an Illness and Infestation log?

#### R9-3-307. D.2.

Log of communicable diseases and infestations

- Document communicable illnesses and infestations:
  - Of enrolled children
  - Of staff members
  - Of residents

Forms can be found on the <u>Bureau of Child Care Licensing webpage</u> Select the Provider Info button <u>http://azdhs.gov/licensing/childcare-facilities/index</u>

### Do you have a log ready to record monthly fire drills?

#### R9-3-504.B.1-4 and F.1-5.

### Fire Safety, Gas Safety and Emergency Standards

- Have a log to record monthly fire drills and smoke detector tests
  - Drills must be unannounced
  - Done at different times of day
  - Conducted once a month

1. During each r time. Familia 2. Emphasis she	rize children ould be place	wit ed u	th alternate routes.	an erhy	— d each should be giver v evacuation under pro		
DATE(year)	DAY		TIME OF DAY				BATTERY CHECK
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NOVEMBER		1		ĺ			
DECEMBER		1		1			
					I		

# Do you have a complete first aid kit ready for use?

### R9-3-310.A. First aid kit

- A pair of scissors
- Re-closable 1 gallon bags
- Adhesive tape
- Antiseptic solution or sealed antiseptic wipes
- Single-use, non-porous gloves
- Sterile/individually packaged items:
  - Sterile Band-Aids of various sizes
  - Sterile gauze pads
  - Sterile gauze rolls

**TIP: REMOVE** any sample packets of medication, including antibiotic ointment

# 12. Do you have a written accident, evacuation and emergency plan ready?

#### R9-3-504 E. and F.

### Accident, evacuation and emergency plan

- Accessible to staff
- List of emergency information posted on or next to the telephone

The first aid kit is located:	
The staff with	current first aid certification are:
Name	Exp. Date
Name	Exp. Date
Name	Exp. Date
The staff wit	h current CPR certification are:
Name	Exp. Date
Name	Exp. Date
Name	Exp. Date
In the event of an accident or emergency, par	hich will be accomplished by doing the following: ents are to be given written notification within 24 hours, whic mplished by doing the following:
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In the event of an accident or emergency, par will be acco	ents are to be given written notification within 24 hours, whic mplished by doing the following:
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In the event of an accident or emersency, par will be acco The facility's address is: Emergency Phone Numbers (s Fire Department:	rasts are to be given written notification within 24 hours, whic mplished by doing the following: setual phone numbers in case 911 is not available): Police Department:
In the event of an accident or emersency, par will be acco The facility's address is: Emergency Phone Numbers (s Fire Department:	rasts are to be given written notification within 24 hours, whic mplished by doing the following: setual phone numbers in case 911 is not available);
In the event of an accident or emergency, par will be acco The facility's address is: Emergency Phone Numbers (s Emergency Phone Numbers (s Ambulance Service:	rasts are to be given written notification within 24 hours, whic mplished by doing the following: setual phone numbers in case 911 is not available): Police Department:

Forms can be found on the <u>Bureau of Child Care Licensing webpage</u> Select the Provider Info button

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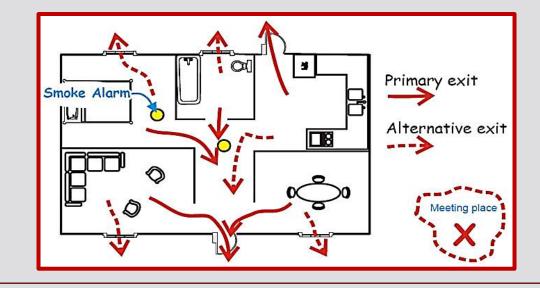
**BCCL Training** 

# Do you have a fire evacuation map created and posted in each activity area?

### R9-3-504 E.

#### Fire evacuation map

Posted in each indoor area of the child care group home approved for child care services



# Do you have the required fire and safety equipment?

#### R9-3-504.A.2.3.

- Smoke detector(s) must be installed in:
  - Each indoor area approved for child care
  - Each hallway



- Test the battery each month
  - Record test (see fire drill log)
  - Replace a battery that is no longer charged

# Do you have the required fire and safety equipment?

- **R9-3-504 A.4. and C. TWO fire extinguishers**
- One is rated at least **1A-10BC** 
  - Mounted in the <u>kitchen</u>
- The other is rated at least **2A-10-BC** 
  - Maintained in a location accessible to staff in approved space



# Do you have attendance forms ready for parents to sign their child in and out?

#### R9-3-305

Sign in and out procedures for children

- Have attendance forms prepared
- Include the child's name, date, time in and signature space, time out and signature space
- Additional sign in and sign out spaces if necessary

# Do you have daily attendance forms for staff to record their time in and out?

R9-3-301.A.4.d.

Staff Attendance Records

- Have a staff attendance form/system in place
- Staff and provider must enter their time of <u>arrival</u> and <u>departure</u> daily

NAME	DATE	ARRIVAL	DEPARTURE	ARRIVAL	DEPARTURI
	_				
		<u> </u>			
	_				
		<u> </u>			
			<u> </u>		

Forms can be found on the <u>Bureau of Child Care Licensing webpage</u> Select the Provider Info button

http://azdhs.gov/licensing/childcare-facilities/index

### Do you have a weekly menu prepared and dated?

R9-3-301. G. 7. and R9-3-406. F. Menu

- Prepare a weekly menu
- Include names of specific foods
  - State actual kind of fruit- example: "peaches"
  - State actual kind of vegetable- example: "celery"
- Dated for current week
- Posted
  - Conspicuous area
  - Before first snack or meal is served

### Does each enrolled child have a completed Record card?

### R9-3-303 and R9-3-304 Enrollment of Children

Emergency, Information, and Immunization Record card

ild's Name:		Data Enroller	4:	Updated:		
me Address (#, Street, City	State, Zip Code):			Date Disearalled:		
me Phone:		Dute of Birth	c	Sez: 🛛 maile 🔲 fo	male	
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Placer (optional):	Courses To	lephone Number:			_	
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	e items must accompany the EIIR card at	t all times:		
	Copy of current official documented immuniz			
	Religious Beliefs exemption form signed by p Medical Exemption form signed by physician	arent guardian	attached	
— <u> </u>	Signed Laboratory Proof of Immunity form at			
		me day yr	mo/day/ yr	no day y
Notification of im	munizations needed sent to Parent(s) or Guardian(s):		mo . mail. 21	and stary - ye
	Updated immunizations received and attached:	mo (day) yr	mo /day/ yr	mo/day/y
	ptoms, name foods or substances to be avoided, and the pt	rocedure to follow		
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Immunization Record:

- Must have before child attends
- Attach it to the child's Emergency Record card

Forms can be found on the <u>Bureau of Child Care Licensing webpage</u> Select the Provider Info button

http://azdhs.gov/licensing/childcare-facilities/index

2024-05-01

BCCL Training



# Is each area ready for enrolled children?

### R9-3-401. B.3.

General Program, Equipment and Health and Safety Standards

- Equipment/tables/shelves in place
- Toys/books set up and accessible
- Dress-up items
- Creative play materials
- Safe and ready for children's use



### Is each area ready for enrolled children?

#### R9-3-401. B.3. continued...

- Arts & crafts items
- Music items
- Manipulatives



# Do you have your written weekly schedule prepared?

R9-3-401. B.4.

Weekly Schedule

- Includes activities for:
  - Each child's age and developmental level
  - Routines that follow a familiar and consistent pattern
  - Outdoor activities for large muscle development
  - Stories, music, dancing, singing and reading
  - Listening and talking opportunities
  - Creative activities

# Do you have a covered and lined garbage can for food waste?

**R9-3. 506. 11. and 12.** 

**Cleaning and Sanitation** 

- Garbage can for food waste
  - Kept clean
  - Covered container
  - Lined with plastic bag
- Food waste and other refuse is removed daily from the residence or, if necessary, more often.

# Do you have drinking water available and accessible?

R9-3-401. B.6.

General Program, Equipment and Health and Safety Standards

- Drinking water available at all times
  - Available for all infants
  - Available for all one- or two-year-old children
  - Accessible to older children

# Do you have a safe place to store hazardous items out-of-reach of children?

#### R9-3-505.D.5.6

General Program, Equipment and Health and Safety Standards

#### Toxic substances

Any item labeled with a child warning label and may be a hazard to a child

#### Flammable materials

- Store them separate from food storage areas
- Stored away from heat producing appliance or equipment

#### Store these items out of children's reach

## Have you made these hazardous items inaccessible to children?

#### R9-3-505. D.9. (a-f)

General Program, Equipment and Health and Safety Standards

- Keep hazardous items out of children's reach
- These can include:
  - Lawn mowers, ladders, toilet brushes, plungers
  - Air conditioners, evaporative cooler, heat pump, or furnace
  - A hot tub or spa
  - A pond or fountain
  - An irrigation ditch, abandoned mine, or well
  - A trampoline

### Is your restroom ready for use by enrolled children?

#### R9-3-506.5

### **Cleaning and Sanitation**

- Each restroom contains within easy reach of enrolled children:
  - Mounted toilet tissue
  - Soap contained in a dispenser
  - Singly dispensed paper towels
- Hazard free
  - Cleaning items are inaccessible
  - Personal toiletries are inaccessible

# Will you have a pet or animal at your home?

#### R9-3-508.

Pet and animal standards:

- Each dog, cat or ferret has a current vaccination against rabies
- Habitats are kept clean
- No reptiles in an area approved for child care services
- Each pet dish is inaccessible
- Litter boxes inaccessible
- Pet feces cleaned up before use of outdoor activity area
- Pets and animals are controlled so that:
  - The cleanliness of the home is maintained
  - No person is endangered

### Do you have shade? Fencing?

**R9-3-502**.

**Outdoor Activity** 

- At least 500 square feet in size and on the premises
- Shade for all children playing in the outside activity area
- Enclosed by a 4 foot high fence (or higher) with vertical and horizontal gaps less than 4" wide

### If you have play equipment:

**R9-3-502**.

**Outdoor Activity** 

- Equipment
  - Arranged safely
  - Safe fall zone requirements resilient surface
  - Tip resistant or is securely anchored

# Do you require a Gas Inspection Report?

R9-3-504.D. Gas Inspection

If gas lines are on the premises...

#### A violation free inspection

- By a licensed plumber
- Individual authorized by local jurisdiction
- Keep a copy of the inspection in your files
- Provide a copy to Department

# Will you administer medications?

#### **R9-3-309.** Medications

<u>The Department's medication authorization form must</u> <u>be used</u>

- Prepare a written statement that specifies:
  - Whether or not prescription or nonprescription medications will be administered to children
  - If medications will be administered:
    - Designate in writing who is responsible for the administration of all medication
- Medication authorization form must be completed by child's parent or health care provider

	Bureau o			
	MEDICATI	ION CONSENT FORM		
First & Last Name of CHILD	¢			
Type/Name of Medication:	Prescription #:	Dosage: Route (meth	101	
Typername of measured.		Doodgos Produc (mean	~~, .	
Start date:	End Date:	Times & frequency:		
REASON:				
Laive permission for the	administration of th	e medication, according to the instructions	isted to	the
child listed above.		•	13100, 10	
Date of authorization:	Signature (parent/gua	rdian):		
POSSIBLE SIDE EFFEC	IS TO WATCH FOR V	WITH THIS MEDICATION:		
	I health care prov	vider's written authorization.		
	I health care prov			
* Injections: Attach	health care pro	vider's written authorization.	YES	N
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Please use the second page to document administration of the medication GNFormsWedexion authorization.doc (8/11) CCL form - 302

Forms can be found on the <u>Bureau of Child Care Licensing webpage</u> Select the Provider Info button

http://azdhs.gov/licensing/childcare-facilities/index

BCCL Training

## Will you provide transportation?

R9-3-408. and R9-301.F.e-f.

Transportation procedures

- To and/or from school:
  - Obtain dated, written permission from the enrolled child's parent before transporting the child and follow all procedures

Include information about transportation in the document you prepare for parents

Forms can be found on the <u>Bureau of Child Care Licensing webpage</u> Select the Provider Info button

http://azdhs.gov/licensing/childcare-facilities/index

### Do you require Motor Vehicle Insurance?

R9-3-408.C.1.

**Proof of vehicle insurance** 

Must be current documentation

For each motor vehicle used to transport an enrolled child:

- Keep proof inside the motor vehicle, with car registration
- Keep copies on premises
- Provide copies to the Department when vehicle insurance coverage and registration change or expire

## Will you offer field trips?

R9-301.F.e-f. Field Trips

- Obtain dated, written permission from the child's parent before the field trip
- Prepare a field trip plan
- Transportation to and from a field trip location see transportation requirements

Forms can be found on the <u>Bureau of Child Care Licensing webpage</u> Select the Provider Info button <u>http://azdhs.gov/licensing/childcare-facilities/index</u>

## Do you have sleeping and napping equipment ready?

R9-3-402

Sleeping and Napping:

- For <u>each child</u> who sleeps or naps at the home, provide:
  - Cot, mat or crib
  - Clean sheet to cover cot, mat, crib
  - Clean blanket or sheet

## Do you have sleeping and napping equipment ready?

R9-3-402.C.4

Sleeping and Napping – When child is IN the crib

Crib does NOT contain:

- Bumper pads, pillows
- Comforters, sheepskins
- Stuffed toys or other stuffed products including boppy pillows

# Do you have a complete diaper changing area prepared?

#### R9-3-507.

#### **Diaper Changing Standards**

- Nonabsorbent, sanitizable surface
  - Kept clear of items not required for diapering
  - In an approved area that is not in a kitchen or eating area
  - Has access to running water and dispensed soap
     within 15 feet of approved diapering location
- Follow cleaning and sanitation requirements
- Document all diaper changes
- Soiled cloth or disposable diapers are disposed of in waterproof, tightly covered and lined containers

## Are you prepared for infant/toddler care?

R9-3-403.

Supplemental Standards for Infants, One- or Two-Year-Olds

- A child is not in a confining piece of equipment for more than 30 minutes while awake:
  - Crib, play pen, swing, feeding chair, infant seat or other confining piece of equipment
- Allow individual pattern of sleeping, waking and eating
- Put infant to sleep on back
- Water only in bottle or sippy cup at nap time
- Change a child's diaper as soon as wet or soiled
- Provide toys too large to swallow
- Use of a walker is not permitted



### List of forms...

#### **Child Care Licensing and Group Home Certification**

(\*\*indicates the Department's approved form is required)

- Communicable Disease Information
- Controlling Persons Guidelines
- Criminal History Affidavit \*\*
- Diaper Changing Log
- Diaper Changing Procedure Chart
- Emergency Information and Immunization Record Card \*\*
- Emergency Preparedness
- Fire Drill and Smoke Detector Battery Log
- Fingerprint Guidelines
- Fingerprint Clearance Card update Form
- Fingerprint Clearance Card Tracker
- Foreign Credentials Evaluation Agencies
- Helpful Telephone List For Child Care Providers

## List of forms continued...

**Child Care Licensing and Group Home Certification** 

(\*\* indicates the Department's approved form is required)

- Incident-Injury Report
- Immunization Information for Enrolled Children
- Individualized Plan
- Infant Feeding Instructions
- Log of Accident, Injury, Emergency, Illness, Infestation and Absence
- Meal Patterns
- Medication Consent Form \*\*
- Poisoning Prevention
- Staff Report
- Toys and Equipment-Guidelines for Compliance
- Travel Permission Form
- Written Documentation of Corrections Instructions

#### **Congratulations!**

You have now completed the Readiness Self Checklist Guide!

Use your checklist to ensure all the listed areas have been addressed

Contact the Bureau of Child Care Licensing
 @602-364-2539 or 800-615-8555 from 8:00 AM - 5:00 PM
 Monday through Friday for assistance (except holidays)

And remember... go to our <u>website</u> for additional helpful forms and resources! <u>http://azdhs.gov/licensing/childcare-facilities/index</u>

> Your State Licensing Officer looks forward to the successful Initial Inspection of your child care group home.

**BCCL** Training