MONITORING CHECKLIST CHILD CARE PROGRAMS

| Program Name | License Number | Subtype | Visit Type | Purpose of Visit | Visit Date | Visit Time |
|--------------|----------------|---------|------------|---------------------|------------|------------|
| | | | 65 | | 46 | |

Children Present:

| Single Age Group | Child:Staff Ratio | Mixed Age Group | Child:Staff Ratio |
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| | All items listed below are compliant unless marked as "NC" Non-compliant or "NR" Not Reviewed | | | | | | |
|------|---|----|----|--|--|--|--|
| Item | Requirement descriptions | NC | NR | | | | |
| 01 | Necessity, issuance and maintenance of a permit or license | | | | | | |
| 02 | Other business, shared facility and collaborations | | | | | | |
| 03 | Policy | | | | | | |
| 04 | Emergency Preparedness | | | | | | |
| 05 | Reporting | | | | | | |

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| Program Name | License Number | Subtype | Visit Type | Purpose of Visit | Visit Date | Visit Time |
|--------------|----------------|---------|------------|------------------|------------|------------|
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| | All items listed below are compliant unless marked as "NC" Non-compliant or "NR" Not Reviewed | | |
|------|---|----|----|
| Item | Requirement descriptions | NC | NR |
| 06 | General Records and Documentation | | |
| 07 | Posted Records and Documentation | | |
| 80 | Program Records and Documentation | | |
| 09 | Personnel and Non-Personnel Records and Documentation | | |
| 10 | Child Records and Documentation | | |
| 11 | Background Investigations | | |
| 12 | Prohibited Individuals | | |
| 13 | General Qualifications, Responsibilities and Professional Development | | |
| 14 | Director and Personnel in Charge | | |
| 15 | Teaching Personnel | | |
| 16 | Support Personnel | | |
| 17 | Other Personnel and Non-Personnel | | |
| 18 | Licensed Capacity | | |
| 19 | Ratios and Group Sizes | | |

MONITORING CHECKLIST CHILD CARE PROGRAMS

| Program Name | License Number | Subtype | Visit Type | Purpose of Visit | Visit Date | Visit Time |
|--------------|----------------|---------|------------|------------------|------------|------------|
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| | All items listed below are compliant unless marked as "NC" Non-compliant or "NR" Not Reviewed | | | | | | |
|------|---|----|----|--|--|--|--|
| Item | Requirement descriptions | NC | NR | | | | |
| 20 | Supervision | | | | | | |
| 21 | Discipline | | | | | | |
| 22 | Learning Program Principles | | | | | | |
| 23 | Higher Risk Activities | | | | | | |
| 24 | Water Activities | | | | | | |
| 25 | Animals | | | | | | |
| 26 | Parent Communication and Family Engagement | | | | | | |
| 27 | Health Protection and Disease Control | | | | | | |
| 28 | Medication | | | | | | |
| 29 | Rest Time | | | | | | |
| 30 | Diapering and Toileting | | | | | | |
| 31 | Nutrition | | | | | | |
| 32 | Food Service | | | | | | |
| 33 | Facility | | | | | | |
| 34 | Indoor and Outdoor Play Areas | | | | | | |

MONITORING CHECKLIST

CHILD CARE PROGRAMS

| Program Name | License Number | Subtype | Visit Type | Purpose of Visit | Visit Date | Visit Time |
|--------------|----------------|---------|------------|------------------|------------|------------|
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| | All items listed below are compliant unless marked as "NC" Non-compliant or "NR" Not Reviewed | | |
|------|---|----|----|
| Item | Requirement descriptions | NC | NR |
| 35 | Equipment | | |
| 36 | Hazards | | |
| 37 | Cleanliness and Sanitation | | |
| 38 | Transportation | | |
| 39 | Addendum Requirements for Child Care Centers | | |
| 40 | Addendum Requirements for Day Camps | | |
| 41 | Addendum Requirements for Drop In Programs | | |
| 42 | Addendum Requirements for Out of School Time Programs | | |
| 43 | Addendum Requirements for Part Day Programs | | |
| 44 | Addendum Requirements for Programs for Sick Children | | |

| Weapons Declaration: | | | |
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MONITORING CHECKLIST CHILDCARE PROGRAMS

| Program Name | License N | umber | Subtype | Visit Type | Purpose of | Visit | Visit Date | Visit Time | | |
|---------------------------|---------------------------|----------|---------|-------------------------|----------------|--------|-----------------|--------------|--|--|
| | | | | | | | | | | |
| Fire Drill Date | | | | Smoke Detector | Test Date | | | | | |
| Tornado Drill Date | | | | Carbon Monoxi | de Test Date | | | | | |
| Fire Extinguisher Expirat | ion Date | | | Fire Inspection | Date | | | | | |
| Health Inspection Requir | red to be paid for by OKD | HS? | | Health Inspecti | on Date | | | | | |
| Equipment Inventory Co | mpletion Date | | | Physical Enviro | nment Checklis | t Comp | letion Date | | | |
| Annual Insurance Expira | tion Date | | | Exception Declared Date | | | | | | |
| Water Testing Due Dates | S | | | | | | | | | |
| Lead | | Bacteria | | Nitrates | | | | | | |
| | | | | | | | | | | |
| | Pet Name | | | | Pet Vaccinati | on Ex | piration Date | | | |
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| | | _ | | | | | | | | |
| Auto Make | Auto Model | | Year | Insurance Ex | piration | Ve | hicle Quarterly | / Inspection | | |
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MONITORING CHECKLIST

Child Care Programs

| Program Name | License Number | Subtype | Visit Type | Purpose of Visit | Visit Date | Visit Time |
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| Person with Child P | assenger Safety Training | | | Date Compl | etea | |
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| Person with D | river Safety Training | | | Date Compl | eted | |
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| Program Daysand Hours of Ope | ration: | | | | | |
| | of Operation | | | Hours of Ope | ration | |
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MONITORING CHECKLIST Child Care Programs

| Program Name | License Number | Subtype | Visit Type | Purpose of Visit | Visit Date | Visit Time |
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| Discussion | | | | | | |
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