Registered Family Chil	•		Oregon Department of Early Learning
Health & Safety Review Chec Visit and Licensing Specialist Information			and Care
Announced On Site Health & Safety		Visit Number:	
•		VISII NUITIDEI.	
License Expiration Date:		n a Ni waala aw	
Licensing Specialist (LS): General Facility Information			
•			I
•		License Num	nber:
Facility Address:			
Email Address:		_ Phone Numbe	er:
Provider:	Substitute Provider:		
Program Details	Days of the Week Care is Provided:	Hours of Ope	eration (optional):
USDA CACFP Participant	☐ Monday ☐ - · ·		
☐ Animals/Pets on site	□ Tuesday ☐ Friday		
☐ Transportation Provided	☐ Wednesday ☐ Saturday ☐ Sunday		
☐ Swimming	☐ Thursday		
Exception(s) Provide a Brief description. Be su	ure to include any ongoing exceptions. The full exception	will be printed on the	license certificate.
The Drawider (and are substitute provider) is re-	s at this time. sponsible for knowing and following all the rules ap	nalisankla ta thair ak	ild aggetic once anything
child care children are present, including all rule	sporsible for knowing and following all the rales aps s not directly referenced in this document and/or r for the registration of child care programs does no	not reviewed during	g this visit. Parental
	CHECKLIST ITEM		VISIT RESULTS
Children in Care			
(d) Any child(ren) age 17 years or younge	AR 414-210-0100(9); I foster children, age 9 years or younger; unger for whom the provider is responsible; al er, including the provider's own children, foster the provider is responsible, with special need	children, child	☐ In Compliance ☐ Not In Compliance ☐ Discussed
24 months of age. (b) Four school-age ch younger. (c) More school-age children if as long as there are no more than 10 child	age or younger, of which only two children m hildren, in addition to the six children preschoo there are fewer than six children preschool-a	l-age or	☐ In Compliance ☐ Not In Compliance ☐ Discussed
Supervision	ovider must ensure that children have the full	attention of	
caregivers at all times who must: (a)Be a children to assist and respond when need relying on audio or video devices. Children frequently and must be in approved activ	ware of what each child is doing; (b)Be near of the full of the control of children at the control of children at the control of children at the control of the control of direct visual contact shall be monitored ity areas; (d)Be physically present when there de; and (e)Be physically present when kinders of the control o	enough to all times, without ed regularly and e are children	☐ In Compliance ☐ Not In Compliance ☐ Discussed

younger children are playing outside, unless the outside play area is fully fenced and hazard free.

CHECKLIST ITEM	VISIT RESULTS	
0500(2)A provider must provide sufficient light in any room where children are napping or resting so that caregivers can clearly see each child's face from any point in the room. (3) Background noise (e.g. music, sound machine, white noise machine) must not be so loud as to prevent a caregiver from being able to respond to the needs of the children. (4) When the caregiver is in a separate room from children, doors shall be kept open wide enough so the caregiver can easily step into the room to do frequent audio and visual checks of the children.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
Daily Routine and Activities		
210-0520(3) A provider must follow a consistent daily routine that allows for flexibility to respond to the needs of the individual children and group of children. (4) The daily routine must include: (a) Regular activities such as eating, napping, and toileting; (b) A balance of active and quiet activities; (c) Individual choice time and group activities; and (d) Daily indoor and outdoor activities.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
0520(6) A provider must ensure daily outdoor play for each child, regardless of age, provided weather and environmental conditions do not pose a health or safety risk.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
0520(7) There must be activities for children according to their ages, interest, abilities and cultures. Children's activities must include opportunities for movement, gross and fine motor, pretend play, art, and literacy.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
Food and Food Service		
210-1100(1) A provider must ensure that all food and beverages are selected, stored, prepared, and served in a sanitary manner.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
1100(2)Children must not be in the kitchen or food preparation areas when foods are being prepared unless a caregiver is present and children are protected from hazards such as hot foods, sharp utensils, etc.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
1100(5) Children that are in care more than 3 ½ consecutive hours must be served a meal or snack every 3 ½ hours. (7)Children scheduled to attend prior to 7:00 am or after 6:30 pm must be offered breakfast or dinner.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
1100(9) A provider must ensure that all meals, snacks, and beverages follow current USDA Child and Adult Food Program (USDA-CACFP) meal pattern requirements, including portion sizes.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
Infant and Toddler Care		
 210-0600(4) A provider must not leave an awake child in a play yard, for the purposes of playing, for more than 30 minutes in any 2-hour period. (5) Restrictive infant equipment, including, but not limited to, bouncers, exersaucers, swings, infant seats, high and low chairs or structured infant carriers may be used for no more than 30 minutes in any 2-hour period. (a) Children who are actively engaged in eating, outdoor walks, or car rides can exceed the 30-minute limit for restrictive infant equipment used in these activities. (b) Car seats may not be used except for transportation purposes. 	☐ Discussed	
210-0610(1) A provider must ensure that children under 12 months of age shall comply with the following requirements for those children: (a) A provider must have and follow a written feeding plan and schedule that includes the types and amounts of formula, human milk, and food that is obtained from the child's parent(s) and updated regularly. (b) A provider must feed the child on their own feeding schedule and fed when hungry. (c) A provider must clearly mark formula, human milk, bottles, and food provided by the parent(s) with the child's full name and date and refrigerate if required. (d) A provider may not give infant formula to an infant who consumes human milk, without parental consent. (e) A provider must give human milk only to the child specified to receive it by the parent(s).	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A	
Notes:		

CHECKLIST ITEM	VISIT RESULTS
O610(1)(f) Human milk must: (A) Be labeled with the child's full name and the date expressed; (B) Be stored for no more than: (i) 24 hours in the refrigerator when thawed or defrosting; or (ii) Six months from the expression date in the freezer. (C) Be refrigerated or frozen until immediately before warming; and (D) Not reused after 2 hours from serving.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
O610(1)(g) When formula is served, the caregiver must follow the manufacturer's instructions for mixing, storing, and discarding of any formula, unless requested by the child's parent(s) and with a medical practitioner's written permission. (h) Whole milk, skim milk, 1 percent milk, and 2 percent milk must not be served unless requested by the child's parent(s) and with a medical practitioner's written permission. (i) A provider must not serve juice of any kind to infants, unless advised by a medical practitioner. (j) When bottle feeding, bottle may only contain formula or human milk, and may not be combined with cereal, fruit juice, or other foods without a medical practitioner's written permission. (k) A provider must not give infants under six months of age water to drink without written approval by a medical professional.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
O61O(1)(I)A provider must warm bottles only in one of the following ways: under running, warm tap water; using a commercial bottle warmer; stove top warming methods, or slow-cooking device; or by placing them in a container of warm water. (A) Bottles must not be warmed in microwave ovens. (B) Once warmed, a bottle must not be returned to the refrigerator or re-warmed.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
OólO(1)(m) Solid foods fed to infants must be selected from the Child and Adult Care Food Program Meal Pattern (CACFP): (A) Solid foods must not be fed to infants less than four months of age; (B) Commercially packaged baby food must be served from a dish and not directly from the factory-sealed container; (C) Leftovers in the serving container must be discarded; and (D) Solid foods, with the exception of finger foods, must be fed with a spoon. (n) Honey or food containing honey must not be served to infants.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
0610(2) When bottle feeding, a provider must: (a) Hold infants up to 6 months of age and older children who cannot hold their own bottles or sit alone; and (b) Ensure the infant's head is elevated while being fed. (3) A provider must not lay a child of any age down with a bottle or training cup. (4) A provider must not prop a bottle by any means at any time. (5) When feeding solid foods, a provider must ensure that infants are fed in an upright position.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
210-0620(1) A provider must provide an individual crib, portable crib, or play yard for each infant. (a) Each crib, portable crib, or play yard must: (A) Comply with Consumer Product Safety Commission(CPSC) standards for use by infants and have documentation from the manufacturer or retailer stating that either the crib was manufactured after June 28, 2011 or the play yard was manufactured after February 28, 2013; (B) Have a firm, flat, non-inclined sleep surface; (C) Have a clean, firm, tight-fitting mattress. The mattress must: (i) Be designed to fit the specific equipment used, with no gap between the mattress and sides of the product; (ii) Be covered in a durable, washable, waterproof, form-fitting material; (iii) Be firm enough that it maintains its shape and does not indent or conform to the shape of the infant's head; and (iv) Be covered in a tight-fitting sheet that remains tightly-fitted with normal use and does not have any slack or bunching. (d) Sheets must be changed when soiled, before use by another child, and at a minimum of weekly.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
210-0620(6) A provider must provide a variety and adequate supply of developmentally appropriate materials that are stimulating to a child's senses. Materials must not be a choking hazard including toys and removable parts with a diameter less than 1-1/4 inches, plastic bags, Styrofoam, and rubber or latex balloons.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A

CHECKLIST ITEM	VISIT RESULTS
Infant Safe Sleep	□ N/A for all- no infants
O630(1) In addition to safe equipment (OAR 414-305-0620), a provider must follow safe sleep practices for infants to reduce the risk of sudden unexpected infant death (SUID) as follows: (a) While sleeping, infants must be monitored frequently to ensure they are breathing, not overheated, not in distress, and do not need assistance.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
0630(1)(b) Infants must be placed on their backs on a flat, firm, non-inclined surface for sleeping. (c) Infants who can roll from back-to-front or back-to-side may remain in the sleep position they assume.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
0630(1)(d) Except for a plain pacifier, there must not be any items (e.g., pacifier clips, bottles, toys, pillows, stuffed animals, blankets, bumpers) in or attached to the crib, portable crib or play yard.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
O630(1)(e) Infants must not have their heads or faces covered by items such as blankets or linens at any time. (f) There must not be any items (e.g. blankets, tents, sheets) placed over the top or on the sides of a crib, portable crib or play yard.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
0630(1)(g) Items that may cause suffocation or strangulation such as headwear (e.g. hoods, hats, headbands), bibs, necklaces, and garments with ties or drawstrings must be removed from the infant and sleep equipment prior to laying an infant down to rest.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
O630(1)(h) Swaddling or other clothing or covering that restricts the infant's arm or leg movement is prohibited at all times, even if the child is not sleeping. (i) Weighted blankets, weighted clothing, or other weighted objects must not be placed on or near the sleeping infant.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
0630(1)(j) If the caregiver is engaged in an activity with child care children and is carrying a sleeping infant in a structured infant carrier, the caregiver must move the infant to a safe sleep surface as soon as the activity is finished. (k) A caregiver may hold a sleeping infant provided the caregiver can immediately observe, see, or feel any signs of distress. The caregiver must be awake, alert, and focused on the infant; and	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
0630(1)(1) If an infant arrives asleep in a car seat or falls asleep in a place other than their crib, portable crib or play yard, the caregiver must immediately move the infant to an appropriate sleep surface.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
210-0660(1) A provider must clean and sanitize infant and toddler toys regularly and when soiled. (2) A provider must wash, rinse, and sanitize the following after each use: (a) Bottles and training cups, if used; and (b) High chairs, tables and chairs. (3) A provider must wash, rinse, and disinfect the following immediately after use: (a) A diaper-changing surface; (b) Toilet training seat inserts or potty chairs; and (c) Bathtub or other receptable used for bathing a child, and (d)Any surface contaminated with bodily fluids.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
Diaper Changing and Toileting	
210-0650(1) A provider must change wet or soiled diapers promptly. Unless the child is asleep, a child's diaper must be checked at a minimum of every 2 hours, or more frequently to meet the individual child's needs. Diapers must be changed when a child exhibits behavior that suggests a wet or soiled diaper.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
O650(2) If infants and toddlers are in care, a provider must have a diaper changing area. (a) The diaper changing area must be located so that handwashing can occur immediately after diapering without contact with other surfaces or other children. (b) The diaper changing surface must be sturdy, smooth, non-absorbent, easily cleanable, and free of tears or repairs. (c) The diaper changing surface must be kept free of all objects except for diapering items and not used for other purposes. (d) Children must never be left unattended on an elevated changing surface. (e) A disinfecting solution must be kept in each diaper-changing area ready for immediate use and stored out of children's reach.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
Notes:	

CHECKLIST ITEM	VISIT RESULTS
Behavior and Guidance	
210-0700(2) A provider's behavior and guidance policy must include the use of positive guidance to help children develop self-regulation, self-direction, and respect for others through: (a) Setting and teaching simple, consistent, clear and positive rules and limits that children can understand; (b) Setting up the environment for success with engaging activities that encourage positive behavior and self-regulation; (c) Reinforcing positive behaviors with encouragement and descriptive praise; (d) Taking steps to prevent problems before they occur and explaining safe, natural and logical consequences related to a child's behavior; (e) Helping children recognize and appropriately express their feelings and understand the feelings of others; (f) Modeling and teaching social skills such as taking turns, cooperation, waiting, treating others kindly, and problem solving; and (g) Redirecting or helping a child change their focus when necessary.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
210-0700(3) A provider must ensure that only caregivers shall provide guidance to a child. (4) A provider must provide guidance that is fair, consistently applied, timely, and appropriate to the behavior, age, and development of the child.	☐ In Compliance☐ Not In Compliance☐ Discussed
210-0700(5) A provider must appropriately intervene to stop the unfair treatment of a child based on the individual child's family, gender, race, ethnicity, economic status, ability, religion, or cultural background. Interventions may include, but are not limited to: (a) Redirecting an inappropriate conversation or behavior; (b) Being aware of situations that may involve unfair treatment of a child, responding appropriately, taking actions to prevent future occurrences; and (c) Refusing to ignore the unfair treatment.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
Home Structure and Safety	
210-0810(3) The exit requirements listed in OAR 414-210-0810(4) apply to: (a) Registered family child cares with initial licensure on or after July 1, 2025; or (b) An existing registered family child care that applies for a change of address on or after July 1, 2025. 0810(4)All floors of the home used for child care activities must have two exits. (a) One exit on each floor must be a door that exits directly outside to ground level and meets the following: (A) The door may not exit through a garage or carport. (B) The door must be able to be opened from the inside without the use of a key, or special knowledge or effort. (C) The interior pathway leading to the door must not: (i) Be within three feet of a permanently installed cooking appliance; nor (ii) Be required to pass through a storage room or through a room that can be locked to prevent access. (b) The second exit may either be a door that exits directly outside to ground level or an operable window that meets the following requirements: (A) A minimum net clear opening of 5 square feet; (B) A minimum net clear height of 24 inches; (C) A minimum net clear width of 20 inches; (D) The bottom of the opening located no more than 44 inches from the finished floor; and (E) The bottom of the opening located no more than 48 inches off of the ground outside of the home. If higher than 48 inches, steps or a platform must be placed under the window to reduce the distance to 48 inches.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
O810(12)A registered family child care's electrical system must not pose a risk to children. (a) Unused electrical outlets accessible to children preschool-age and younger must be tamper-resistant or have outlet covers that are not easily removed by children. (b) Electrical wiring and power strips with surge protectors must be inaccessible to child care children. (c) Electrical cords must be in good working condition, not torn or frayed, and not have any exposed wires (d) Extension cords may only be used for a brief, temporary purpose and must not replace direct wiring.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
210-0810(13) When the indoor temperature is lower than 68°F or higher than 85°F, a provider must utilize strategies to help children stay warm or cool.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
210-0810(14) A provider must ensure the following home safety measures: (a) Phone service is available in the home during operating hours. (b) Floors must be free of splinters, large unsealed cracks, sliding rugs and other hazards. (c) Windows above the ground floor that are accessible to children preschool-age and younger must be equipped with a lock to prevent opening more than 4 inches. (d) Vertical blinds, continuous looped blinds, and drapery cords must either be out of reach of children or have tension or tie-down devices to hold the cords tight. (e) Indoor platforms and lofts more than 30 inches in height must have protective barriers. (f) A movable barrier, e.g. baby gate, must be placed at the top and/or bottom of all stairways accessible to infants and toddlers. (a) Clear alass panels must be clearly marked at children's eve level.	☐ In Compliance ☐ Not In Compliance ☐ Discussed

CHECKLIST ITEM	VISIT RESULTS	
Water Supply and Plumbing		
210-0820(11) If using a private well, additional testing must be completed prior to initial license and, at a minimum, every two years after initial testing. (a) Well water must be tested for: (A)Coliform and E.coli bacteria; (B)Nitrate; and (C)Arsenic. (b)Testing must be completed by an Oregon Environmental Laboratory Accreditation Program (ORELAP) accredited laboratory. (c)Test results must be submitted to the local public health authority for evaluation. (e) For registered family child care homes initially licensed prior to July 1, 2025, testing identified in (11) must be completed prior to the next renewal and at a minimum every two years after initial testing.	☐ In Compliance☐ Not In Compliance☐ N/A	
Toilets and Handwashing sinks		
210-0830(1) A registered family child care home must have at least one flush toilet and one handwashing sink available to children at all times. (a)Toilets must be supplied with toilet paper. (b)All handwashing sinks must: (A) Have mixing faucets with both hot and cold running water. Registered family child care homes with certification in effect on September 15, 2002, shall comply with the requirement for mixing faucets when bathroom facilities are remodeled. (B) Have soap and single-use towels or clean cloth towels that are laundered daily or when visibly soiled; and (C) Not be used for preparation of food or drinks, or dish washing. (c) Easily cleanable steps or a broad-based platform with a non-slip surface so that children can use the toilets and sinks comfortably and without adult assistance must be provided.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
Prevention and Management of Hazards		
210-0840(1) A provider must ensure that the following items are inaccessible to children: (a) All toxic or potentially dangerous items; (b) Cleaning, sanitizing and disinfecting supplies and equipment; (c) Poisonous plants; (d) Tobacco products, smokeless or vaping devices; (e) Alcohol; (f) Flammable materials, including matches and lighters, and corrosive materials; (g) Knives and other sharp objects; and (h) Motorized yard or power tools.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
0840(2) Toxic substances must be stored separately from medication, food service equipment, and food supplies. (3) Products must be stored in the original labeled containers. Any smaller containers or solutions mixed by caregivers must be labeled with the contents of the container.	☐ In Compliance☐ Not In Compliance☐ Discussed	
0840(5) A provider must recognize, address or remove potentially dangerous items and situations, using protective barriers to prevent children's access, if needed. Caregivers must: (a) Regularly inspect the indoor and outdoor play areas and equipment for hazards, such as missing parts or broken equipment, sharp edges, splinters, and trash; (b) Ensure open containers of water such as bathtubs, buckets, and mop pails are emptied immediately after use; (c) Ensure sand boxes are free of animal waste and trash; and (d) Ensure that all plastic bags that are large enough to fit over a child's head are inaccessible to children.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
0840(11) Firearms, BB guns, pellet guns and arrows must be kept under lock, such as a key, combination, or biometric lock. A child safety lock or trigger lock does not meet this requirement. (a) Ammunition must be stored and locked separately. (b) Firearms, BB guns, and pellet guns must be kept unloaded. 1200(4) If firearms and ammunition are stored in the vehicle, they must be stored as specified in OAR 414-210-0840(11).	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A	
0840(12) A provider must prevent access to all pools and other bodies of water such as hot tubs, spas, ponds, creeks, fountains, ornamental ponds, rain barrels.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A	
Maintenance and Sanitation		
210-0850(1) The home and grounds shall be kept clean and free of litter or rubbish and unused or inoperable equipment, and vehicles. (a) All garbage, solid waste, and refuse must be disposed of regularly, in a safe and sanitary manner. (b) Outdoor garbage storage must be inaccessible to children.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A	
210-0850(3) A provider must maintain the building, equipment, and vehicles in good repair, in a clean and sanitary condition. (a) Floors, walls, ceilings and fixtures of all rooms must be kept clean and in good repair. (b) Surfaces and objects that are frequently touched must be routinely cleaned, sanitized and disinfected. (c) The kitchen and bathrooms used for child care must be cleaned and sanitized or disinfected as needed and at least daily.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	

CHECKLIST ITEM	VISIT RESULTS	
210-0850(4) All toys, equipment and furniture used by children must be cleaned, rinsed and sanitized regularly and whenever soiled.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
Fire Protection		
210-0860(1) Doorways, evacuation routes, and exits must be kept free of materials, furniture, equipment and debris to allow unobstructed access to the outdoors.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
210-0860(5) There must be at least one 2-A-10 BC rated fire extinguisher on each floor of the home, unless the floor is not under the direct control of the provider.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
0860(6) Smoke alarms and carbon monoxide detectors must be: (a) Installed on each floor level of the home and in any area where children nap. If installed outside of a room used for napping, it must be located within 6 feet of the doorway to the room;	☐ In Compliance☐ Not In Compliance☐ Discussed☐	
Furniture, Equipment and Play Materials		
210-0900(1) A provider must ensure furniture, equipment and play materials used by child care children are maintained in a hazard free condition. (2) Broken play materials, furniture and equipment must be removed from areas accessible to child care children.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
0900(4) Activities that include a tool that could pose a safety risk (e.g., iron, glue gun, woodworking tool) are limited to preschool and school-age children. (a) Caregivers must first instruct children in the tool's proper use and safety measures. (b) Caregivers must be within arm's reach of the children participating in the activity to reduce the risk of injury.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
210-0900(5) A provider must provide an individual bed, mat, cot, or other sleep equipment for (a) Each toddler and preschool-age child at nap time; (b) Each school-age child who wants to rest; and (c) A child that needs to be isolated due to illness. 0900(6) Mats, cots, and other sleep equipment must: (a) Be durable and in good repair; and (b) Be able to be cleaned and sanitized. 0900(7) Floors mats must be: (a) Designed for sleeping; and (b) Covered in a water-resistant material.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
Outdoor Play Areas		
210-0920(1) Elevated play equipment taller than 18 inches may not be placed on concrete, asphalt, lumber, or similarly hard surface.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
0920(4) Trampolines, other than rebounders, are prohibited. (a) Rebounders are permitted only when used according to manufacturer's instructions. (b) If a trampoline is in the child care activity area, a provider must ensure that child care children cannot access the trampoline.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
Handwashing		
210-1000(1) Caregivers and children must wash their hands with soap and warm running water: (a) After using the toilet; (b) After diaper changing; (c) After assisting someone with toileting; (d) Before handling food; (e) Before and after eating; (f) Before assisting with feeding; and (g) When switching between working with raw foods and ready-to-eat foods. (7) For children who are not able to wash their own hands, caregivers may wash children's hands with a single-use cloth rather than under running water.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
Notes:		

CHECKLIST ITEM	VISIT RESULTS
Injuries	
1020(2) A provider must maintain, at a minimum, the following first aid supplies at the home, in any vehicle used to transport children in care, and for group activities away from the home: (a) Non-medicated adhesive bandages (assorted sizes); (b) Adhesive tape; (c) Sterile gauze pads (various sizes) (d) A sling, or a large triangular bandage; (e) Bottled water (for cleaning wounds or eyes); (f) Liquid handwashing soap or handwashing gel; (g) Sealed antiseptic towelettes or solution to be used as a wound cleaning agent; (h) Scissors; (i) Tweezers; (j) Disposable latex-free, powder-free gloves; (k) Plastic bags (for disposing of blood and other body fluids); (l) Mercury-free and glass-free thermometer; (m) Cold pack; (n) Chlorine bleach or other disinfectant for cleaning of blood and other bodily fluids; (o) Flexible rolled gauze; and (p) A chart or handbook of first aid instructions.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
1020(3) A provider must ensure that first aid supplies are readily available and kept inaccessible to children. (4) A provider must maintain the first aid supplies in a clean and sanitary manner and replace them as needed, including expired items.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
Medications	
 1030(1) Before a provider gives a child any prescription or non-prescription medication, the provider must: (a) Have a signed, dated, written authorization by the parent(s) on file. (A) For chronic medical conditions, a provider may obtain permission for 12 months or less with specific instructions including when administration is needed, such as inhalers. (B) Parental authorization over the phone is permitted for single dose administration of non-prescription medication. The date and time of the consent must be documented and signed by the parent upon picking up their child. 	☐ In Compliance ☐ Not In Compliance ☐ Discussed
1030(1)(b) Ensure that the original container is labeled with the name of the medication, dosage, and directions for administration and storage. (A) For prescription medication, the label must include the child's name, the date the prescription was filled, the prescribing physician's name, and length of time to give the medication. (B) If parent instructions differ from the container instructions, a provider must have a licensed physician's written instructions for that medication. (C) Medication must not be administered after the expiration date. (D) Any medication provided by the parents must be labeled with the child's name.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
1030(2) A provider must immediately document any medication administered, listing the name of the child, type of medication, date, time, and dosage given, any side effects exhibited by the child, and the signature of the person administering the medication. (3) A provider must inform parent(s) daily of all medications administered to their child.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
1030(5) A provider must ensure that medication is stored through one of the following methods: (a) Under a child safety device or child safety lock; or (b) In a locked room. (6) Emergency medication may either be inaccessible to children as defined in OAR 414-210-0100(19) or kept with a caregiver. (7) A provider must keep medications requiring refrigeration in a separate tightly-covered, leakproof container clearly marked "medication" and inaccessible to children.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
1030(8) The application of sunscreen and diaper cream does not need to be documented, but a provider must: (a) Have annual written parental authorization; (b) Use only as needed and according to manufacturer's instructions; (c) Inform parents of the type of sunscreen used if provided by the registered family child care; (d) Label the item with the child's name if provided by the parent, and use only for that child; and (e) Allow children to apply sunscreen to themselves with direct caregiver supervision and written	☐ In Compliance ☐ Not In Compliance ☐ Discussed

CHECKLIST ITEM	VISIT RESULTS	
Policies		
210-0200(1) A provider must have written information and policies identified in OAR 414-210-0200(1)(a)-(g) and provide them to substitute providers, parents, and volunteers. Information must be provided at the time of enrollment and when information changes. (a) Name, business address, and business telephone number of the person(s) who has immediate responsibility for the daily operation of the home; (b) Parent responsibilities for providing current required information and what parents are expected to provide; (c) Emergency preparedness and response plan; (d) Information on transportation, when provided by the provider or other caregiver; (e) Behavior and guidance policy; (f) Prevention of and duty to report suspected child abuse and neglect; and (g) Night care, if provided.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
Emergency Preparedness and Response	T	
210-0210(1) A provider must have a written plan for emergency preparedness that addresses evacuation, relocation, shelter-in-place and lockdown procedures, and responding to medical emergencies and other incidents, The plan must be followed, unless otherwise instructed by emergency personnel. (5) A provider must review the written plan and all emergency procedures: At least once per licensing period and update the procedures as needed.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
 210-0210(2) The plan must include a provider's procedures for: (a) Responding to a lost or missing child; (b) Ensuring that all children in attendance are supervised and accounted for during and after an emergency; (c) The way that caregivers and children are alerted of the emergency; (d) Notifying emergency authorities, including the poison control provider, when necessary; (e) Evacuating children to a designated safe area or relocating children to alternate shelter. Designated safe areas and alternate shelters must be a minimum of 50 feet from the home being evacuated; (f) Moving children to a designated location in the home for sheltering-in-place and lockdown emergencies; (g) Responding to natural and human-made disasters including power outages; (h) Responding to serious illness, serious injury or death of a child or caregiver; (i) Responding to incidents involving a hostile intruder; (j) Addressing the needs of individual children, including children with disabilities or other specific needs, and children with chronic medical conditions; (k) Ensuring children's emergency contact information and medical authorization and caregivers' emergency contact information is accessible during and after an emergency; (l) Notifying parents after the emergency ends and how children will be reunited with their families as the evacuation, relocation, or sheltering/lockdown is lifted; (m) Maintaining continuity of care after a natural or human-made disaster, including access to copies of records, documents, and computer files necessary for continued operation stored in either a portable file or at an off-site location; (n) Ensuring pool and swimming safety if applicable and (o) The plan must identify a licensed physician, hospital, or clinic to be used for emergency medical care. 	☐ In Compliance☐ Not In Compliance☐ Discussed	
210-0210(4) A provider must have an emergency light source, such as a flashlight, in working condition,	☐ In Compliance	
stored in an easily accessible location.	☐ Not In Compliance☐ Discussed	
Required Postings		
210-0260(1) A provider must display the following near the entrance, or in some other area of the home where they may be clearly viewed by parent(s) and caregivers of children in care: (a) The most current registration issued by CCLD; (b) All serious valid complaints and serious non-compliance letters for 12 months from the date of the letter; (c) A notice of any current or pending legal sanctions posted immediately and while in effect, including throughout any appeal period; (d) The DELC website [www.oregon.gov/DELC] and phone number [1-800-556-6616], and a statement advising parents that they can access information about their child care provider on the child care safety portal; and (e) A notice that the items listed in (3) of this rule are available.	☐ In Compliance ☐ Not In Compliance ☐ Discussed	
210-0260(2) A provider shall display a floor plan identifying the locations of the following near the entrance, or in some other area of the home where they may be clearly viewed by all individuals responsible for evacuation procedures: (a) Exits; (b) Primary evacuation routes; (c) Secondary evacuation routes; and (d) Fire extinguishers.	☐ In Compliance☐ Not In Compliance☐ Discussed☐	
Notes:		

CHECKLIST ITEM	VISIT RESULTS
Items Available to View	
210-0260(3) A provider must have the following items available in a prominent and frequently visited location for the parents and public to view: (a) The most recent CCLD inspection and rules for registration of child care homes are available upon request; (b) The most recent water test results summary provided by CCLD (also see OAR 414-210-0820, Water Supply and Plumbing); (c) Information on how to report a complaint to CCLD regarding registration requirements; (d) The Oregon Child Abuse and Neglect Hotline number and requirement to report suspected abuse or neglect; (e) A notice that parents must be permitted access to their child and all child care areas while their child is in care. Advance notice is not required.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
 (f) The provider's behavior and guidance policy; (g) Emergency numbers to include 9-1-1, where available, or local law enforcement, local mental health crisis line, fire department, and ambulance service; and (h) A plan to ensure that any visitor or other adult not enrolled or conditionally enrolled in the CBR does not have unsupervised access to children. 	Date of lead test expiration:
Recordkeeping- Children's Records	
210-0220(1) A provider must obtain the following information for each child, in paper or electronic format, prior to the first day of attendance that includes the parent's signature: (a) The child's name, date of birth, and home address; (b) Date the child entered care; (c) Name(s), home and business address(es) and telephone number(s) of the custodial parent(s) or legal guardian(s); (d) Name and contact information of the person to be called in an emergency if the parent(s) cannot be reached; (e) Name and telephone number of person(s) to whom the child may be released; (f) The name and telephone number of the school that the child attends, if applicable; (g) Name and telephone number of child's medical provider(s) or emergency care facility, if applicable; (h) Immunization record or exemption as required by OAR 414-210-0225; (i) Authorization to obtain emergency medical care and to transport the child for emergency medical treatment; (j) Developmental and health history of any problems that could affect the child's participation in child care; (k) A written care plan for any child with a specific need as described in OAR 414-210-1050. The written plan must be readily accessible to caregivers caring for the individual child; and (l) Verification that parents have received a copy of the provider policies.	☐ In Compliance☐ Not In Compliance☐ Discussed
210-0600(1) For infants and younger toddlers, a provider must obtain the following information: (a) Schedule of feeding; (b) Types of food introduced and timetable for new foods; (c) Sleep schedule; and (d) Child's way of communicating and being comforted.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
210-0220(2) A provider must ensure that all children's records are immediately accessible to caregivers during hours of operation for use in an emergency or for children with chronic health issues or specific care needs.	☐ In Compliance☐ Not In Compliance☐ Discussed
210-0720(5) If physical restraint is used, a provider must: (a) Report the use of physical restraint pursuant to OAR 414-210-0270, Notifications; (c) Document the incident in the child's file, including the date, time, duration, caregivers involved, and what happened before, during, and after the child was restrained. (6) If physical restraint is used more than once on a specific child, the provider must develop a written plan with input from individuals who have knowledge of the child's behaviors. A provider must notify CCLD when a written plan has been developed.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
210-1050 When caring for a child who has or is at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who requires health and related services of a type or amount beyond that required by children generally, a provider must have a written care plan.	☐ In Compliance☐ Not In Compliance☐ Discussed
Recordkeeping- Parental Permissions	
210-0230(1) A provider must have the following current permissions from parent(s) when applicable: (a) Documentation of permission for a person not listed in the child's records to pick up the child; (b) Signed and dated permission for each medication, prior to administration, that includes: (A) The child's name; (B) The name of and the reason for the medication; (C) The dosage, dates, and times to administer the medication, and how the medication will be given; and (D) Whether the medication needs to be refrigerated. (c) For chronic medical conditions, a provider may obtain permission for 12 months or less with specific instructions including when administration is needed, such as diaper cream and inhalers (also see OAR 414-210-1030, Medications). (d) Prior to transporting a child, a provider must have the following information: (A) The child's name; and (B) A specific pick-up and drop-off plan that addresses the location, times, and transfer of supervision. (e) Prior to a school-age child arriving or leaving the facility on their own. (f) Permission to bathe a child, if necessary. (g) Prior to a field trip or other activity away from the immediate neighborhood. (h) Prior to a child participating in a high risk activity, such as swimming or mountain biking, and share a safety plan with parents. (i) Prior to using photographs or recordings of the child publicly (e.g. social media, advertisements).	☐ In Compliance ☐ Not In Compliance ☐ Discussed
Notes:	

CHECKLIST ITEM	VISIT RESULTS
Recordkeeping- Caregiver Records	
210-0240 A provider must maintain a current personnel record for any substitute provider, in paper or electronic format, which includes: (1) The CBR confirmation letter sent from CCLD to the provider. If the provider does not yet have a CBR confirmation letter for the caregiver, the provider must have written documentation the provider has verified with CCLD that the caregiver is enrolled in the CBR and linked to the home. Documentation must include the date, time, and name of the CCLD staff member the provider spoke with; (2) Current pediatric CPR and first aid training certification; (3) Current food handler certification, prior to serving or preparing food; and (4) Evidence of participation in an orientation.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
210-0370(2) The provider's Oregon food handler's certification and pediatric CPR and first aid certification must remain current while the registration is active.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
Ongoing Training 210-0380(3) During the two years preceding the license renewal date, a provider must complete at least 10 clock hours of formal training or education related to child care. (a) At least 6 clock hours of the 10 hours of training must be in child development; (b) At least 1 clock hour of training in the Core Knowledge Category (CKC) of health, safety, and nutrition (HSN) in the first 12 months of the licensing period; and (c) An additional 1 hour in CKC of HSN completed in the second 12 months of the licensing period.	☐ In Compliance☐ Not In Compliance☐ Discussed
Recordkeeping- Program Records	
210-0250 A provider must maintain the following program records, either in paper or electronic format: (1) The current day's attendance for each child in care as defined in OAR 414-210-0400(1). The daily attendance record must include: (a) The child's full name; and (b) Times recorded as children arrive and depart so that the record shows the children in attendance at any given time. (2) Documentation of any substitute provider caring for children, including their name, date providing care, and arrival and departure times.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
210-1020(1) A provider must complete a report of any serious injury or incident, and include: (a) The child's full name and age; (b) The date of occurrence, time, type, circumstances, witnesses, and location at the home or off-site; (c) Time and date of notification of parents; (d) The signature of the reporting caregiver; and (e) The signature of the parent indicating that they reviewed it or received a copy of the report within 48 hours of when the incident occurred. An email or text with confirmation of receipt will count as a parent signature.	☐ In Compliance☐ Not In Compliance☐ Discussed
210-0250(5) Documentation of the administration of any medication that includes: (a) The child's name; (b) Medication administered; (c) The date and time when medication was administered; (d) The dosage or amount of medication administered; and (e) Any side effects exhibited by the child.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
210-0250(4) A visitor log to document all adults, excluding persons authorized to drop off and pick up a child, that includes name, relationship to home (e.g., volunteer, vendor, guest, etc.), and recorded time in and out of the home.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
0860(7) Fire drills must be practiced monthly at various times during child care operating hours. (a) Fire drills must include a drill using an alternate evacuation route at least once per year. (c) Caregivers must have an alert method (for example, a smoke alarm, strobe light, loud bell or whistle) to warn the occupants of the home of an emergency or drill. (e) One other aspect of the emergency preparedness and response plan in addition to the monthly fire drills shall be practiced at least every other month. (8) A provider must maintain a written record of each emergency preparedness drill.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
Transportation (if applicable)	☐ N/A for all
Is the vehicle used to transport children a van designed for 10 or more passengers and manufactured prior to 2010? If yes, inspection form (CCLD-0119) is required. If no, select N/A.	N/A Inspection form received
210-1200 (1)If a provider transports children, the provider must be in compliance with all applicable state laws, including current vehicle insurance that covers the driver, the vehicle, and all occupants. (7) A provider must never leave children unattended inside or outside of a vehicle.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
Notes:	

CHECKLIST ITEM	VISIT RESULTS
1200(3) When children are taken on field trips, a provider must ensure that: (a) Caregivers check a written list of children on the field trip frequently to account for the presence of all children and: (A) Prior to boarding and exiting the vehicle; and (B) Any time the group changes locations on site (e.g. when moving from one exhibit to the next). (b) When 6 or more children are taken on a field trip: (A) Each child must wear an easily identifiable item, such as a label, shirt or wristband, listing the name and telephone number of the registered family child care; and (B) Caregivers are easily identifiable.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
1200(8)A provider must maintain the following items in the vehicle as well as at the home: (a) An operable phone; (b) Proof of vehicle insurance; (c) Emergency medical information on each child including parents' contact information, special medical needs, medications, allergies, the name and phone number of the child's doctor, and emergency medical authorization forms; (d) When transporting children with chronic medical conditions (such as asthma, diabetes, or seizures), their emergency care treatment plans, supplies and medication; and (e) A first aid kit that is easily accessible to staff and not children.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
Swimming and Water Activities (if applicable)	□ N/A for all
1300 Providers that provide swimming or have an on-site pool must meet all rules listed in OAR 414-210-1300.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
1300(4) In natural bodies of water, such as shallow surf, lakes, rivers, and streams, a provider must limit activity to wading by children 36 months of age and older and must not allow swimming.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
(5) A provider must not permit children to use or have access to a hot tub, spa, portable wading pool, or other similar equipment.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
Animals (if applicable)	□ N/A for all
210-1400(1) A provider must ensure that any animal accessible to child care children is: (a) In good health and shows no signs of carrying disease; (b) Friendly toward children with no signs or history of aggression; (c) Kept free of fleas, ticks, and worms; (d) Fully immunized according to a licensed veterinarian's recommendations, including rabies vaccinations for dogs. Proof of current compliance with immunizations shall be kept on file in the home (Review); and (e) Kept in a cage or tank with the exception of cats and dogs. (2) All animals shall be kept away from food preparation surfaces. If animals have access to food preparation surfaces, the surfaces shall be cleaned and sanitized prior to meal preparation.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
1400(5) A provider may allow an animal, other than a cat or dog, such as a poisonous animal, reptile, amphibian, monkey, hook-beaked bird, chicken, duck, hermit crab, rodent or ferret on the premises only if: (a) The animal is housed in and remains in a cage, tank or other measure which precludes any direct contact by children; or (b) The exotic animal is present as part of an educational program run by a zoo, museum or another professional animal handler.	☐ In Compliance ☐ Not In Compliance ☐ Discussed ☐ N/A
1400(6) A provider must ensure that all contact between an animal and a child is supervised by staff who are close enough to remove the child immediately if the animal shows signs of aggression or distress or the child shows signs of treating the animal inappropriately.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
1400(7) Parents must be made aware of the presence of any animals on the premises. (8)Animal waste items such as litter boxes and pet training pads shall not be located in areas accessible to children or areas used for food storage or preparation.	☐ In Compliance ☐ Not In Compliance ☐ Discussed
Night Care A check mark indicates the item has been discussed with the program.	☐ N/A for all
A provider is subject to rules 414-210-1500 (1-9) when providing night care (defined as care given between 9:00 p.m. and 5:00 a.m.)	

lte	ems to Discuss A check mark indicates the item has been discussed with the program.
	210-0225(1) A provider must comply with Oregon Health Authority's administrative rules (see OAR 333-050-0040) relating to the immunization of children. If a child is enrolled in a public or private elementary school, immunizations are not required to be documented by the child care facility.
	210-0235(2) A provider may only release a child to a parent or another person named and identified by the parent(s). A person picking up the child must show identification if not known to the caregiver. (3)Except as excluded by a court order, parents must be permitted access to their child and all child care areas while their child is in care. Advance notice is not required.
	210-0250(6) Written record of suspected child abuse and neglect reports made to the Department of Human Services Child Welfare or law enforcement.
	210-0255(3) A provider must have at least one caregiver on site who can access any records that are stored in paper or electronic formats.
	210-0270 A provider must notify CCLD, the appropriate agency and/or the parent(s) of each instance listed in the Notifications section 0270 of these rules, within the required time frame. [See PTA-0976]
er co	210-0310(2) Residents of the child care home who are under 18 years of age must be enrolled or conditionally enrolled in the CBR by their 18th birthday. A provider must receive confirmation from CCLD that an individual 18 years of age or over, is enrolled or conditionally rolled in the CBR before the individual can: (a) Reside in the child care home; (b) Stay overnight on the premises for longer than 14 nesecutive days, not to exceed a total of 30 days in a calendar year, unless not required to enroll in the CBR as provided in subsection (4) this rule; (c) Work in the child care home; or (d) Volunteer in the child care home.
	210-0310(6) Individuals with conditional enrollment in the CBR shall not have unsupervised access to children. Any visitor to the child care home or other adult who is not enrolled in the CBR shall not have unsupervised access to ildren.
	210-0320 (4)The provider must have no other employment, paid or unpaid, either in or out of the home, during hours child care children are in care.
	210-0510(1) When communicating or interacting with children, a provider must maintain an environment for healthy, culturally responsive child development. Examples of this may include: Giving encouragement and positive feedback, modeling active listening and respectful communication, speaking to children at their eye level, giving kind greetings and goodbyes, validating feelings and ideas, using a calm and encouraging tone of voice, and being curious about the individuality of every child and family. 210-0510(2) A provider must encourage positive interactions between children. Examples of this may include: modeling social skills and empathy, helping children understand the feelings of others, providing support to children who find it difficult to make friends, and encouraging play between children of all abilities and backgrounds.
	210-0520 (5) A provider must not provide or allow children preschool-age or younger to have more than 5 hours of screen time per week. School-age children may not be provided or allowed more than 10 hours of screen time per week.
	0600(8) All caregivers must take appropriate precautions to prevent shaken baby syndrome and abusive head trauma.
	0650 (1)A provider must change wet or soiled diapers promptly. Unless the child is asleep, a child's diaper must be checked at a minimum of every 2 hours, or more frequently to meet the individual child's needs. Diapers must be changed when a child exhibits behavior that suggests a wet or soiled diaper.
m	0-0650(3) If a provider uses cloth or reusable diapers, the soiled diapers must: (a) Not be rinsed; (b) Be placed in a securely sealed, pisture-proof bag; (c) Be stored in a separate disposal container; and (d) Be cleaned by a commercial laundry service or given daily to exclude parent or guardian.
Sa an bo	210-0620(1)(b) Bassinets are prohibited. (c) Stacking, wall, or modular cribs are prohibited. A provider may not use the following equipment for infants, which have been identified as unsafe for infants by the Consumer Product fety Commission (CPSC) and the American Academy of Pediatrics: (a) Baby walkers, which are devices that allow an infant to sit inside d are equipped with rollers or wheels and move across the floor; (b) Baby doorway jumpers, which are devices that allow an infant to unce while supported in a seat by an elastic "bungee cord" suspended from a doorway; (c) Accordion safety gates; and Unstructured infant slings or wraps.
	210-0810(10)(b) Fireplaces, fireplace inserts, and wood/corn pellet stoves, if used, must: A) Have a secure, stable protective barrier; and (B) Be inspected and cleaned annually.
	210-0840(4) A provider must take steps to prevent children's exposure to the following, if they exist on the premises: Any sources of lead and lead based paint. Painted surfaces must be in good condition, both inside and outside, to avoid exposing ldren to lead-based paint; (b) Asbestos; (c) Toxic mold; and (d) Other identified toxins and hazards.
	210-0840(6) A provider must not permit the use of any tobacco products such as cigarettes, cigars, and smokeless or vaping devices, drug paraphernalia, hemp, marijuana and marijuana infused products on the premises during operating hours or when child care children are present. This includes:
	In the child care home; (b) In the outdoor play area; (c) Within 10 feet of any entrance, exit, or window that opens or any ventilation ake that serves an enclosed area; or (d) In any vehicles where child care children are present or on any field trip.

Items to Discuss	A check mark indicates the item has been discussed with the program.
210-0840(7) All mariju (a) Under a child safety dev (b) In a locked room.	uana, marijuana derivatives and associated paraphernalia must be stored through one of the following methods: vice or child safety lock; or
(9) No one shall consume (istribute marijuana on the registered family child care premises. alcohol on the registered family premises during operating hours or when child care children are present. Ise or store illegal controlled substances on the registered family child care premises.
(a) Automatic insecticides	ered family child care must keep the home free of insects, rodents, and other pests. dispensers, vaporizers, or fumigants must not be used. nust not be applied or used when child care children are present. After their application, child care children must
not enter the area until ind	dicated by the manufacturer's instructions.
bike, kick scooter, ska	ust encourage the use of helmets and have them available for children while using a bicycle, tricycle, balance teboard, roller or in-line skates. comply with Oregon bicycle laws while child care children are riding on public paths or roadways.
(a) Separate the child all times; (b) Notify th 1010(4) A provider must de	who has been admitted into care shows signs of illness, as described in this rule, a provider must: If from the other children in a location where the child can be supervised by caregivers and carefully observed at the parent to remove the children from care as soon as possible; Evelop a written care plan at the time of enrollment, or when an allergy is identified, for each enrolled child who as threat to the child's health, safety and wellbeing.
210-0710 A provider n requested by parents	nust not use or threaten to use any of the following prohibited actions listed in OAR 414-210-0710 (1-12) even if
Visit Summary	
Comments:	

This checklist covers selected rules from the Rules for Registered Family Child Care Homes (CCLD-0086) . Knowledge of an compliance with all of the rules within that document must be maintained at all times for child care homes. To view a full sample checklist, visit the Resource Library at www.oregon.gov/delc or request a copy from your licensing specialist.
Information Provided:
☐ Connecting with CCLD (<u>PTA-0460</u>) ☐ Child Care Licensing Division Finding Review Procedure (<u>CCLD-0125</u>) ☐ Child Care Licensing Division Complaint Procedures (<u>CCLD-0127</u>)
Fire Drill Observation
Fire Drill Observed: Yes No Evacuation time: Fire Drill Observations:
THE BILL ESSELVATIONS.
License Issued: Email and Signature
A copy of this report will be emailed after this visit to the email address(es):
Primary: Secondary:
\square Passed \square Did Not Pass \square Passed Review but other noncompliance
License Effective Date:
License End Date:
Date: Licensing Specialist Signature:
Other information or Follow-up (if needed):

Follow-up Completed: 🗆 In person 🗀 By phone 🗀 By email 🗀 Other (Photo(s), ORO verification, etc.)
☐ Pass ☐ Did Not Pass ☐ Passed Review but other noncompliance
License effective date: License End date:
Date: Licensing Specialist Signature:
You are entitled to language assistance services and other accommodation at no cost. If you need help in your language or other

You are entitled to language assistance services and other accommodation at no cost. It you need help in your language or other accommodation, please contact the Child Care Licensing Division at 503-947-1400. Please notify your licensing specialist if you would like to receive a mailed copy of this report.