

**Eastern Band of Cherokee Indians  
Child Care Licensing**

Facility:	CDC-	Date:	Page 1 of 5
<b>Statute or Rule:</b>	C N C N/A N E T A	<input type="checkbox"/> <b>Plan of Correction</b>	<input type="checkbox"/> <b>Exit Interview only</b>
<b>10A CAR 09 .0204 (a)</b> New operator must apply for a new license within 30 days prior to assuming responsibilities	□ □ □ □ □		
<b>C.C. § 110B-90.2 (C)</b> Child care personnel shall complete a Criminal History Check by fingerprint <b>10 CAR 09 .2703</b> prior to employment and every 3yrs thereafter. Results on File.	□ □ □ □ □		
<b>.0200 Changes Affecting License</b> .0204 (a-d) Services, space utilization, licensed capacity .0204 (a) Change of controlling person/des. agent/resp. party (30 days prior),	□ □ □ □ □		
<b>.0200/.0700/.2900 General Licensee Responsibilities</b> .0204 (a) Change of director .0201 Immediate access .0713 A.8. Designates qualified individual to act .0701 a. TB test in director's absence .1102 c, d Staff with CPR/First aid on premises, vehicles, field trips .2903 A.3. Supervision of unqualified staff .0302 (d-3) Staff attendance records .0302 d (5) Record of fire drills once/month (12 mos.)	□ □ □ □ □		
<b>.0200/.0300/.0500/.0600/.0800/.1000/.1400/.1700 Statement of Child Care Services</b> .0302   .1702 Desc.of facility's child care srvc. .0302 Description of activities & pgrms /class .0803 Medication administration .0302   .1702 Hours of operations .0804 Infectious and contagious diseases .0302   .1702 Facility street & mailing address, .0607   .0802   .1713   .1714. Accident & emergency phone procedures .0801 A. Child enrollment proc. .0201   .1702 (h) Inspection reports available on-site .0801 C. Child admission & release requirements .0509 (3)   1719 (7) Presence of pesticide .0302 B.4   .1727 B. Discipline Policy .0205 Parental access to premises .1001   .1723 Transportation procedures .1403 G.4   .1723 5. Field Trip Policy	□ □ □ □ □		
<b>.0200/.0400/.0500/.0600/.0700/.0800/.0900/.1000/.2000 Posting of Notices / Required Postings</b> .1702 I. Family CCH License posted conspicuously. .0902 A. Feeding instruction for each infant. .0401 C. Provisional .1003 B. Procedures for pick-up/delivery of children .0403 B. Temporary .0804 B.4. Pres. of any comm. disease or infestation .2204 C. Probationary .0204 C.1. Licensed capacity posted in each indoor activity area .2205 D. Suspension .0508 A. Schedule for each group of children. .2206 C. Revocation Orders .1005 B.5. Schedule of off premise activities. .2403 A. Special Provisions for Licensure .0604 I. Signage regarding tobacco restrictions .0713 A.8. Name of ind. design. to act in direct .0606 B.   .1724 B. Safe Sleep Policy in Infant Room abs. .0606 F.   .1724 G. Posting of waivers for placement during sleep. .0713 C. Staff/Child ratios in applicable centers .1403 K.   .1730 I. Swimming pool safety rules .0802 H.   .1719 A.14. First Aid info. sheet .1719 A.12 Emergency telephone numbers inside home. .0901 B. Menus for the current calendar week .0901 G.   1706 E. Special diets or food allergies posted in food prep. area	□ □ □ □ □		
<b>.0300 Enrollment of Children</b> .0302 d (2)   .1721 Emergency Information & Immunization Record (EIIR);	□ □ □ □ □		
<b>.0300 Child Immunization Requirements</b> .0302 d (2) Children's immunization records or exemption .0302 d (2) Include copy to child's record	□ □ □ □ □		

<b>.1003 Admission &amp; Release of Children; Attendance Records</b> .1003 Children's sign in/out records .0302 d.3. Roster documentation (12 mos.)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<b>.1100 Suspected or Alleged Child Abuse or Neglect</b> .1102 b(j) Health and Safety Training Requirements	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

C = Compliant NC = Non – Compliant N/A = Not Applicable NE = Not Evaluated TA = Technical Assistance

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Statute or Rule:	C NC N/A NE TA		
<b>.0300 Fire, Sanitation, and Building Inspections</b> .0304 Fire (within 12 months of previous)   B. Sanitation (at least annually)   C. Building (Changes)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>.0700 Staff Qualifications</b> .0704 (a); .2408 Facility director .0710 (a) Teacher-caregiver .0711 (b) Teacher caregiver aide .0704 (a); .2408 Director designee .0710 (a) Assistant teacher-caregiver .0711 (b) Student-aide/Volunteer caregiver	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>.0700 Staff Records &amp; Reports (12 mos.) .0703 (b)</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>.0703 Training Requirements</b> .1101 (a) Staff orientation within 10 days of hire .1103 (a) hours training every 12 mos., documentation .1101 (d) CPR (participatory)/First aid requirements	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>.0700 Staff-to-Children Ratios for Centers</b> a. Infants 1:5, Max: 10 3-year old children 1:15 Max: 25 1-year-old children 1:6, Max: 12 4-year-old children 1:20 Max: 25 2-year-old children 1:10 Max: 20 5-year-old children 1:25 Max: 25 School-age children 1:15 a (1) Ratios based on youngest child in group .0714 (b) Student-aide not counted as staff .0714 2 staff on premises if 6+ children (including director/designee) .0713 (i, ii) Caregiver emergency relief .0713 (5) Infants not with older children if 6+ children .0713 (6,7) Staff duties not simultaneous with child care duties .0713 (6,7) Adequate personnel to perform administrative, food, etc.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>.0600/.0900/.1100/.1700/.2200 General Child Care Program, Equipment, Health and Safety Standards</b> .2207 (a) Health, safety or welfare of child not placed at risk of harm .0901   .0205 Drinking water accessible, available in indoor/outdoor activity areas .2508 Age-appropriate/developmentally-appropriate grouping .2508 Age-appropriate toys, materials, equipment 0902   .1706 Feeding chair standards/safety strap/tray/sanitize .0601   .1102 Facility premises, buildings, free from hazards .0601 Toys & play equipment maintained free from hazards & in condition for intended use .1707 (e) 68°- 82° in activity areas .0509 (3)   .1719 (6,7) Toxic or flammable. materials, hazardous substances/child warning label, hazardous equip. inaccessible .1719 (6)   .7122 Toxic Plants, cleaning equipment inaccessible .1711   .1807 Staff supervise each enrolled children at all times .0806   .1725 Toileting, clothing, linen .0508   .1718 Activity schedule (with times) posted in activity area .0803 (g.)   .1720 (viii) Child's personal products labeled, written approval, inaccessible .0802 (i)   1711 (e) Monitor child for sun exposure	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

<p><b>.0500/.0600/.0800/.0900/.1700 Supplemental Standards for Infants</b></p> <p>.0510 e (4) Indoor &amp; outdoor activities .0510 (f) No screen time          .0510 (6) Tummy time .1704   .0511. Staff interactions with infants          .0510 Toys, materials, &amp; equipment .0508 (e) Written daily record          .0604 (o, r)   .0606 (h)   .1728 (a) Crib standards .0606 (2)   .1724 (c) No soft products in crib with child          .0902 (d) Food labeled .0806 (c, d, e)   .1718 (h)   .1728 (b, c) Sanitize cribs, sheets, blankets          .0902 (a) Written feeding instructions-posted          .0902 (b, d) Bottles labeled, not propped</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
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Statute or Rule:	C NC N/A NE TA	
<p><b>.1700/N.C. 2819 Standards for Diaper Changing 15A NCAC 18A .2819</b></p> <p>.1725 D, v   (N.C.).2819 Sanitizable, seamless, smooth surface; Clear of unrelated items          .1725 D, iv   (N.C.).2819 Handwashing sink: Water 86-110°, soap &amp; single-use paper towels from dispensers          .1725 E, iv   (N.C.).2819 2 containers, lined &amp; covered          .1725 D, 1   (N.C.).2819 No food/prep in area; Water not drawn; Staff/food prep no diaper changing          (N.C.).2819 Written diaper changing procedures - post &amp; implement          (N.C.).2819 Use separate wash cloth/towel only once for each child          (N.C.).2819 Wash &amp; dry with child's labeled products          (N.C.).2819 Use single-use non-porous gloves          .1725 B, C,   (N.C.).2819 Staff/children wash hands with warm water, soap          .1725 D, 6   (N.C.).2819 Clean, sanitize, dry surface following each diaper change          .1725 H, 1-6   (N.C.).2819 Use single-use paper towels from dispenser          .1725 E, 4   (N.C.).2819 Inaccessible containers          (N.C.).2819 Maintain daily dated log of diaper changes (12 mos.)</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>.1700 Supplemental Standards for 1 &amp; 2-Year-Old Children</b></p> <p>.1718/.0508 .1718 C   .0510 F .0902 d          Age-appropriate safe toys Prohibit screen time for &lt;3 yrs. Bottle labeled  <b>Old</b></p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>.1700/.2800 Supplemental Standards for School-age Children</b></p> <p>.1711(d). Operator does not need to supervise child(ren) while sleeping but operator should be able to hear and respond without delay. .1718   .2508 Age-appropriate toys</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>.0900/.1700 General Nutrition Standards</b></p> <p>(a). Meals to be available (f). Provide milk or juice if not provided by parent          (h). Time periods for meal service (b). Age-appropriate nutritional requirements/Variety          (a). Meal pattern requirements &amp; serving sizes</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>.0900/ .1700/N.C. .2819 General Food Service &amp; Food Handling Standards</b></p> <p>.1725 f, iii   (N.C.).2808 (c) Wash hands before handling/eating food .1706 (s,7)   .0901 (f) 100% full-strength fruit or veg. juice          (NC) .2819 Single use washcloth for inf/spec needs .1706 (d)   .0901 (h) Special dietary instructions          .0901 (b) Weekly menu - Posted &amp; dated          .0901 (b) Substitutions noted</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<p><b>.1700/.1800 Discipline &amp; Guidance</b></p> <p>.1722   .1803 (b) Age appropriate .1722   .1803 Discipline not associated with:          .1722   .1803 (10, j) Holds a child to regain composure .1722   .1803 (d, e, f) Eating, napping, sleeping, toileting          .1722   .1803 (8, h) Physical Activity</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

.1722   .1803 (a) Discipline does not cause harm .1722   .1803 (a) No corporal punishment .1722   .1803 (9, i) Abusive language	.1722   .1803 (10, j) Mechanical restraint .1722   .1803 (3, c) Not administered by another child .1722   .1803 (b, 2) Never separate child from staff		
<b>.0600, .1700 Sleeping Materials &amp; Equipment, Napping</b>			
.0606 a.9   .1724 b Cot, mat, crib accommodates child .1718 a.2   .0806 c. Clean sheet to cover mat	.1728 (a)   .0606 (h) Bed, crib, or cot equipped with firm waterproof mattress at least four inches thick and a fitted sheet shall be provided for each child	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

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<b>Statute or Rule:</b> .1700/.2800/ 15 NCAC 18A	C NC N/A NE TA		
<b>.1700/15 NCAC 18A Cleaning &amp; Sanitation</b> .1725 (j)   15 NCAC 18A .2831 (b) Premises free of insects & vermin 15A NCAC 18A .2822 (a) Premises/furnishings clean 15A NCAC 18A .2824 (b, c, e) Flooring clean 15A NCAC 18A .2818 (c) Lavatory, fixtures clean, sanitized .1725 (d, ii, iv)   15A NCAC 18A .2818 (a, d) Toilet room contains, within easy reach of children: Mounted toilet tissue, sink with running water, dispensed soap & single-use paper towels or air dryer .1725 (g)   15A NCAC 18A .2803 (a-c) Staff & children wash hands after toileting .17225 (l) Store garbage in waterproof containers with tight fitting covers 15A NCAC 18A .2822 (a-c) Toys, materials, equipment in clean condition 15A NCAC 18A .2817 (a) All toilet fixtures shall be easily cleanable, and in good repair	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>.1723 (b1, b2, b3) Pets &amp; Animals</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>Accident &amp; Emergency Procedures: .1700/1000/.0800/.0600/.0300/.0100</b> .0604 (s)/.0802 (h)   .1713 First aid kit sufficient quantity, first aid information sheet .0102 (17) Sterile bandages, gauze pads, rolls, Antiseptic, Scissors, Adhesive tape .0102 (17) Single use/non-porous gloves .0302, .0604 (R), .0607 Written fire and emergency plan; update every 12 months .0604 (S)   .1003 (c) Location of first aid kit .0607 Directions for verbal notification of parents within 30 minutes of accident or emergency; directions for written notification to parent within 24 hours .0607 (d, i, 6) Facility's address, emergency. phone numbers .0302 (b, 4, i) Post written fire & emergency plans .1714 (g, 7) Building evacuation plan posted near designated exit in activity area .1003 (K) Operating phone OR 2-way communication system that connects with individual with direct access to in & out phone .0802 (e-g) Documents and notifies parent of injury or emergency requiring medical treatment	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>.0800 Illness &amp; Infestation</b> .0804 (b) (1-3) Immediately separate child, notify parent .0802 (5) Written notice regarding communicable illness or infestation to staff, parent, & local Health Dept. (24 hrs.)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>.0800/.1700 Medications</b> .0803  .1720 Written policy regarding medication c. Written parental permission: of medication b (2) First & last name of child Date & time medication admin.	b (2, i)Labeled with child's name m. Record of medications admin. F.1.a Name of child F.1.b. Name, prescription #, & amount F.1.c. Date & time med administered m. (5).Signature of staff member who admin med. l. Return unused medications	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

<b>.1000, .1720 Transportation</b> .1003 (i)   .1723 (e) Written permission to transport .1002 (b)   .1723 (c) Proof of insurance. in vehicle .1001 Restraint system	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
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<b>Statute or Rule:</b>	C NC N/A NE TA	
<b>.1000, .1700 Transportation – cont'd</b> .1004 (a-c) Staff-to-child ratios B. .1003 (e)   .1723 (i) Driver qualifications .1003 (e, a)   .1723 (i) 18 years of age, Valid driver's license	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	.1003 (l)   .1723 (m) List of children transported .1001 (a-c)   .1723 (h) Children secured in seat belts .1003 (k) Driver does not use telephone or audio headphones while vehicle in motion
<b>.1005/.2500/.1700/.0700 Field Trips</b> .1005 b (4) Written parental permission: Date & purpose, depart/return times, destination info .1005 b (5) Field trip plan: Names of participants, depart/return times, license #, destination info .1721 (ii) Maintain field trip and plan (12 mos.) .1714 (d)   .0600 (d) Copy of Emergency Plan	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	.1005 b (6) List of children; .0713 6+ children, teacher-caregiver + 1 staff
<b>.1400/ .1400/ .1700/ .2400/ .2500 Facility Square Footage Requirements</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Summer Camp: .2502
<b>.1400/10A NCAC 09 .0600 Outdoor Activity Area</b> 10A NCAC 09 .0605 (i) Enclosed by fence 10A NCAC 09 .0605 (i) Minimum of 4 feet high 10 A NCAC 09 .0605 (g) Open spaces/fencing does not exceed 3.5 or >9 inches	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	10A NCAC 09 .0601. Equipment and furnishings are maintained sturdy, stable, and free of hazards 10A NCAC 09 .0605 (L) Rubber material or resilient 6" fall surface. 10A NCAC 09 .0605 (j, 1-2) Asphalt or concrete not installed under swings or climbing equipment
<b>.1400 Swimming Pools (.1403 J-L)</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	No portable pools (.1403, b)
<b>.0600/.1003 Fire &amp; Safety</b> .0604 (f)   Electrical extension cords not used .0604 (c) Unused electrical outlets covered w/safety plug or insert	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	.0604 (d) Fans mounted & inaccessible to children .1003 (c), .1723 (k) Fire extinguishers
<b>OTHER:</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <b>Documents requested:</b>		

**NOTE: Deficiencies must be corrected immediately. An exit interview was conducted, deficiencies, if any, were discussed with the facility representative. This abbreviated evaluation is not all inclusive of ARS § 36-891 et seq and these rules. Other areas may be inspected at the Surveyor's discretion. The Department reserves the right to amend the findings of this document after programmatic review.**

**The Written Documentation of Correction is due within 10 days of receipt of the Statement of Deficiencies.**

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Licensing Surveyor(s)

Date

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Facility Representative

Date