![A picture containing knife

Description automatically generated]()

Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **GENERAL:** | **Yes** | **No** | **N/A** |
|  | There is a smoke detector in each sleeping room **and** on each level of the home **and** in the open areas/hallways in front of bedrooms? |  |  |  |
|  | There is a working carbon monoxide detector on each level of the home? |  |  |  |
|  | There is at least one 5 lb. fire extinguisher on each level of the home and in the kitchen? |  |  |  |
|  | Fire extinguisher is replaced after each use and a maintenance check completed at least once a year by a person qualified to inspect fire extinguishers?  **Last date of inspection:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Completed by:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | Diagram for fire drill is posted? |  |  |  |
|  | The Ombudsman notice is posted and easily visible to child(ren) in home? |  |  |  |
|  | The Emergency and Disaster Plan is posted? |  |  |  |
|  | The home is safe for children, kept clean, and in good repair? |  |  |  |
|  | Equipment and furniture are safe for children, kept clean, and in good repair? |  |  |  |
|  | Exits in living areas are not blocked by furniture? |  |  |  |
|  | Windows have curtains or shades to provide privacy? Windows are intact and open windows can be closed without difficulty? |  |  |  |
|  | Windows and doors used for ventilation are screened? |  |  |  |
|  | If the home has any mini blinds with cords, they are out of the reach of an infant/toddler? |  |  |  |
|  | Hallways and bedrooms have clear passages, and all rooms including hallways, passages, and outside doorways and walkways have adequate lighting? |  |  |  |
|  | Children have indoor areas for their use? There is at least 40 square feet for each child? This does not include bedrooms, kitchens, bathrooms, utility rooms, unfinished attics, or hallways. Designated indoor space is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | |  | | --- | | Air Conditioning system is operable and in good working order? | |  |  |  |
|  | Type of heating \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is in good working order, well vented, and able to be turned off. |  |  |  |
|  | Electrical switches and receptacles are in good working order and have outlet covers in all outlets? |  |  |  |
|  | If washer and dryer are on the premises, they work properly, and the area is free from clutter? If no laundry facilities are on the premises, the plan for laundry is:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | Old appliances not in use that are stored on the premises are kept chained shut, locked, or have the doors removed? |  |  |  |
|  | Garage is kept locked? |  |  |  |
|  | All chemical cleaners, disinfectants, insecticides, and other poisonous substances are stored away from food storage areas and locked up? |  |  |  |
|  | Paint, thinner, combustibles, glue and gasoline are stored and locked up? |  |  |  |
|  | Vehicles used to transport children in care are:   * **Safe operating conditions; and** * **Inspected and registered according to federal, state, and local laws.** |  |  |  |
|  | **WEAPONS, FIREARMS, EXPLOSIVE MATERIALS, AND PROJECTILES** |  |  |  |
|  | Do any caregivers possess a Licensed to Carry and/or carry a handgun?  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lic #: \_\_\_\_\_\_\_\_\_\_\_\_ Exp: \_\_\_\_\_\_\_\_\_\_\_\_  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lic #: \_\_\_\_\_\_\_\_\_\_\_\_ Exp: \_\_\_\_\_\_\_\_\_\_\_\_  **(Caregivers will be permitted to transport a child in a vehicle where a handgun is present, concealed on their person, if the handgun is in the possession and control of the caregiver and the caregiver is licensed to carry the handgun.)** |  |  |  |
|  | Are any caregivers licensed as a peace officer or law enforcement?  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dept: \_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dept: \_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_  **(Caregivers will be permitted to transport a child in a vehicle where a weapon is present because the caregiver is licensed as a peace officer or law enforcement in the state of Texas.)** |  |  |  |
|  | **If item 25 and/or 26 are completed**, how are the carried weapons stored when in the home? **(separate locked storage for weapons and ammunition is required per Minimum Standard 749.2961)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **(An individual required to carry a weapon at all times by employment, etc. will require an approved variance in order to be permitted to do so.)** |  |  |  |
|  | The professional completing this inspection has observed all weapons, ammunition, hunting knives, explosives, projectiles, and toys that shoot or explode? The professional has been granted access to see inside the properly stored key-locked container/storage method? |  |  |  |
|  | Firearms and weapons are stored in a locked container/storage area that is made of strong, unbreakable material? How are they stored? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | Firearms stored in a container/storage area that has a glass or other breakable front or enclosure, weapons are secured with a trigger lock? |  |  |  |
|  | **IF** firearms and ammunition are stored in the same locked location, have you verified the firearms are attached to a trigger locking device? **IF** firearms are **not** attached to a trigger locking device, firearms and ammunition **must be stored separately** and not accessible by the same key or combination so that a person gaining access to weapons does not have immediate access to ammunition, and vise-versa? |  |  |  |
|  | Explosives (fireworks), Projectiles, Ammunition, and hunting knives  are stored in a locked container/storage area, away from sources of heat?  How stored? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | Firearms that are inoperable and solely ornamental are exempt from above mentioned storage requirements. Inoperable/ornamental weapons are displayed within this home? |  |  |  |
|  | **KITCHEN** |  |  |  |
|  | All food items must be: (1) Covered and stored off the floor; (2) Stored on clean surfaces; (3) Protected from contamination; (4) Stored in a container that is protected from insects and rodents; (5) Refrigerated immediately after use and after meals, if the food requires refrigeration;  (6) Covered when stored in the refrigerator. |  |  |  |
|  | Caregivers have kept furniture, equipment, food contact surfaces, and other areas where food is prepared, eaten, or stored clean and well repaired? |  |  |  |
|  | Utensils and containers intended for one-time use, such as paper and plastic dishes, must not be used more than once? |  |  |  |
|  | Refrigerator and Freezer have a working thermometer in both? |  |  |  |
|  | **MEDICATION** |  |  |  |
|  | Prescription, over the counter, vitamin, herbal, and other medications taken ***orally*** are locked in a container, cabinet, closet, or other secure location and must be separated from topical medications. How stored (and separated from topical)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | Prescription, over the counter, vitamin, herbal, and other medications that are for ***topical*** use only are locked in a container, cabinet, closet, or other secure location and must be separated from oral medications. How stored (and separated from oral)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | The family has a container/method for double-locking controlled substances.  How stored? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | The family has a container/method for locking refrigerated medications.  How stored? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | **BEDROOM** |  |  |  |
|  | Do the bedrooms have at least 40 square feet of space for each occupant?   * **Single occupant bedrooms MUST have at least 80 square feet of floor space** * **No more than four occupants per bedroom are permitted** |  |  |  |
|  | Each child has accessible storage space for clothing and personal possessions? |  |  |  |
|  | Children older than two years **do not** share a room with a caregiver, unless otherwise approved by the Anchor Family Services. |  |  |  |
|  | Children in care five years old or older are not sharing a bedroom with a person of the opposite sex, except for:   * **A child sharing a bedroom with his minor parent; or** * **Non-ambulatory children receiving treatment services for primary medical needs** |  |  |  |
|  | A child in care may use a basement as a bedroom if there is a second fire escape route from the basement. |  |  |  |
|  | Each child has an individual bed/crib and mattress? Bed mattresses have a cover or protector? **If home does not care for infant/toddlers, mark N/A for 48-52.** |  |  |  |
|  | Each crib has a firm, flat mattress that snugly fits the sides of the crib and is waterproof or washable? There are no foam materials or pads being used with the mattress? |  |  |  |
|  | Cribs appear to be safe for children and in good repair? |  |  |  |
|  | Crib sheets fit snugly and do not present an entanglement hazard? |  |  |  |
|  | There is no soft bedding, such as blankets, sleep positioning devices, stuffed toys, quilts, pillows, bumper pads, and comforters in a crib to be used for a child under 12 months old? |  |  |  |
|  | Portable cribs have mesh that is securely attached to the top rail, side rail, and floor plate? Portable cribs have folded sides that securely latch in place when raised? |  |  |  |
|  | Mattresses are off of the floor? |  |  |  |
|  | Beds are clean and comfortable? |  |  |  |
|  | Upper tier bunk bed has railing? Children under five are occupying the lower bunk? |  |  |  |
|  | **BATHROOM** |  |  |  |
|  | Bathroom facilities are working properly, clean, and sanitary? |  |  |  |
|  | Adequate number of towels and linens are available for all household members? |  |  |  |
|  | **OUTDOOR RECREATION** |  |  |  |
|  | Outdoor recreation equipment does not have openings, angles, or protrusions that can entangle a child’s clothing or entrap a child’s body or body parts? |  |  |  |
|  | Outdoor recreation equipment is securely anchored according to prevent collapsing, tipping, sliding, moving, or overturning. |  |  |  |
|  | Climbing equipment, swings, and slides are not installed over asphalt or concrete? |  |  |  |
|  | Outdoor recreation equipment is appropriate, clean, maintained, and is good repair? |  |  |  |
|  | **TRAMPOLINE** |  |  |  |
|  | Does the foster/adoptive home have a trampoline? **If no, mark items 63-65 as N/A.** |  |  |  |
|  | Per manufacturer’s instructions, how many children are allowed on the trampoline at one time? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | Ladders are removed from the trampoline when the trampoline is not in use? |  |  |  |
|  | Trampoline has shock absorbing pads that cover the springs, hooks and frame? |  |  |  |
|  | **POOL/HOT-TUB/BODIES OF WATER** |  |  |  |
|  | This home has an in-ground and/or above-ground pool, hot-tub, fountain, pond, or other body of water. **If no, mark items 67-80 as N/A.** |  |  |  |
|  | Pool is surrounded by a fence or wall that is at least 4 feet tall. Children cannot gain unsupervised access to the pool. |  |  |  |
|  | Fence gates leading to the outdoor pool area are self-closing and self-latching. Fence gates are locked when not in use. |  |  |  |
|  | Doors from the home to the pool have a lock that can be reached only by adults and children over age 10. |  |  |  |
|  | Does the door leading to the pool have a pet door? If so, what are the safety measures to ensure the child does not have unsupervised access to the pool? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | Furniture, equipment, and large materials are not stored near the pool area, which would allow a child to scale the fence or wall to the pool? |  |  |  |
|  | The home has (at least) two of the following life saving devices: (reach pole with a hook or loop, backboard, buoy, or safety throw bag with a brightly colored buoyant rope or throw line.) One additional life-saving device must be available for each 2,000 square feet of water surface, so a pool of 2,000 square feet would require three life saving devices. |  |  |  |
|  | Drain grates are in place, in good repair, and capable of being removed only with tools? |  |  |  |
|  | The bottom of the pool is visible? |  |  |  |
|  | The entire swimming area is visible to anyone supervising the swimming activity? |  |  |  |
|  | Pool chemicals and pumps are inaccessible to children? (fence, etc.) |  |  |  |
|  | Machinery rooms are locked to keep children out? |  |  |  |
|  | Above-ground hot tubs have a locking cover that remains locked when not in use? |  |  |  |
|  | All wading pools are stored out of children’s reach (when not in use) and stored as to not hold water? |  |  |  |
|  | At least one parent in the home is able to carry out a water rescue for the children that will be placed in the home? |  |  |  |

**Correction Plan:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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Foster/Adoptive Parent Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Foster/Adoptive Parent Signature Date

Inspected by (Print Name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Inspector’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_