



**Georgia Dept
of Early Care
and Learning**

BRIGHT FROM THE START

**Health and Safety Standards
for Informal Providers
Receiving Subsidy**

Effective January 2021





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Overview

In September 2016, the Office of Child Care (OCC), Administration for Children and Families (ACF), Department of Health and Human Services (HHS) issued a final rule which made regulatory changes to the Child Care and Development Fund (CCDF) based on the Child Care and Development Block Grant (CCDBG) Act of 2014. The changes strengthen requirements to protect the health and safety of children in child care; help parents make informed consumer choices and access information to support child development; provide equal access to stable, high-quality child care for low-income children; and enhance the quality of child care and the early childhood workforce.

As part of the reauthorization of CCDBG, the Childcare and Parent Services (CAPS) division at Bright from the Start: Georgia Department of Early Care and Learning (DECAL) made policy changes to comply with the federal mandates.

The Health and Safety requirements are designed to protect the health and safety of children and are applicable to child care providers of services for which assistance is provided. Such requirements are subject to monitoring pursuant to §98.42. This Health & Safety Standards manual is intended to be a guide for Informal Providers in what to expect during annual monitoring inspections. It outlines the health and safety standards that will be reviewed by child care licensing staff during on-site visits.

CAPS Informal Provider Health and Safety Standards

A. Activities

Providers should provide a daily planned program of varied and developmentally appropriate activities that promote the social, emotional, physical, cognitive, language and literacy development of each child. Staff should use a variety of teaching methods to accommodate the needs of the children's different learning styles.

Individual Attention. Personnel shall provide individual attention to each child as evidenced by:

1. Responding promptly to the child's distress signals and need for comfort.
2. Playing with and talking to the children.
3. Providing and assisting the child with personal care in a manner appropriate to the child's age level, i.e., providing the child privacy in dressing, diapering and toileting functions as the developmental age of the child dictates.

Staff shall not engage in, or allow children or other adults to engage in, activities that could be detrimental to a child's health or well-being, such as but not limited to, horse play, rough play, wrestling, and picking up a child in a manner that could cause injury.

B. Bathrooms

Flush toilets and hand washing sinks with running water shall be provided in the following minimum ratios for the use of all children:

Number of Children	Toilets and Sinks *
1-12	1
13-25	2
26-50	3
51-75	4
76-100	5

101-125	6
126-150	7
151-175	8

Each additional group of twenty-five (25) children shall require one (1) additional toilet and sink.

* For children being potty-trained, at least one (1) flush toilet shall be provided. If used, nursery potty chairs may not be substituted for a required flush toilet.

Location of Bathrooms. Bathrooms shall be located on each floor in or adjacent to child care areas and rooms.

In lieu of the requirements set forth in subparagraphs (1) and (2) above, School-age only facilities shall provide at least one (1) toilet and (1) sink for each group of twenty-five (25) children on the premises.

Supplies. Bathrooms shall be within easy reach of children and equipped with soap, toilet tissue and single-use towels or cloth towels used only once between launderings.

Cleanliness. Bathrooms shall be cleaned daily with a disinfectant.

C. Children's Records

Informal Provider must maintain a file for each child while such child is in care and for a period of one (1) year after such child is no longer enrolled. The file shall contain emergency contact information including, but not limited to, the following:

(a) Identifying information about the child to include: name, date of birth, sex, address, living arrangement if not with both Parents.

(b) Identifying information about the Parent(s) to include: names of both Parents, if applicable, home and work addresses, and home and work telephone numbers.

(c) Identifying information about the person(s) to contact in emergencies when the Parent cannot be reached to include name(s) and telephone number(s).

These records must be readily accessible to on-site staff at all times and shall be made available to the Department in printed or written form upon request.

D. Criminal Records Check

Satisfactory Fingerprint Records Check Determination or Satisfactory Comprehensive Records Check Determination Required

(a) The Informal Provider must ensure that every actual and potential resident (including residents age 17 and older) must submit both a Records Check Application to the Department and Fingerprints to an authorized fingerprinting site.

(b) Every Informal Provider must have a current and valid satisfactory Comprehensive Records Check Determination on file prior to being present at the Home while any child is present for care or before residing in the Home. The Comprehensive Records Check Determination must have a Records Check Clearance Date that is no older than the preceding 12 months of the license date; provided, however, if the Informal Provider has had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, a new satisfactory Comprehensive Records Check Determination is required.

No actual or potential Informal Provider with an Unsatisfactory Records Check Determination may be present at a home when any child is present for care.

Valid Evidence of a satisfactory criminal records check must be maintained at the home for the Informal Provider, each resident of the home for the duration with care of children plus one year, and such evidence must be made immediately available to the Department upon request.

Recheck Required. A new Fingerprint Records Check Determination is required at the following times:

1. A Provider must immediately require a new Fingerprint Records Check Determination if the provider knows or reasonably should know that the Informal Provider or Resident of the home has been arrested or charged for any covered Crime; and

2. A Provider must require a new Fingerprint Records Check Determination for the Informal Provider and Resident such that the time between the new and the prior records check determination is not more than five years.

E. Discipline

Disciplinary actions used to correct a child's behavior, guidance techniques and any activities in which the children participate or observe at the program shall not be detrimental to the physical or mental health of any child.

Personnel shall not:

(a) Physically or sexually abuse a child or engage or permit others to engage in sexually overt conduct in the presence of any child enrolled in the Program;

(b) Inflict corporal/physical punishment upon a child;

(c) Shake, jerk, pinch or handle a child roughly;

(d) Verbally abuse or humiliate a child which includes, but is not limited to, the use of threats, profanity or belittling remarks about a child or his family;

(e) Isolate a child in a dark room, closet or unsupervised area;

(f) Use mechanical or physical restraints or devices to discipline children;

(g) Use medication to discipline or control children's behavior without written medical authorization issued by a licensed professional and given with the parent's written consent;

(h) Restrict unreasonably a child from going to the bathroom;

(i) Punish toileting accidents;

(j) Force-feed a child or withhold feeding a child regularly scheduled meals and/or snacks;

(k) Force or withhold naps;

(l) Allow children to discipline or humiliate other children;

(m) Confine a child for disciplinary purposes to a swing, highchair, infant carrier, walker or jumpseat;

(n) Commit any criminal act, as defined under Georgia law which is set forth in O.C.G.A. § 16-1-1 *et seq.*, in the presence of any child enrolled in the program.

F. Equipment and Toys

All indoor and outdoor furniture, activity materials, and equipment shall be used:

- (a) In a safe and appropriate manner by each Employee and child in attendance; and
- (b) In accordance with the manufacturer's instructions, recommendations, and intended use.

All equipment and furniture shall be used only by the age-appropriate group of children. Equipment and furniture shall be:

- (a) Free from hazardous conditions such as, but not limited to, sharp rough edges or toxic paint;
- (b) Kept clean;
- (c) Placed so as to permit the children's freedom of movement and to minimize danger of accident and collision;
- (d) Secured if equipment and furniture is of a weight or mass that could cause injury from tipping, falling, or being pulled or pushed over. Potentially unstable equipment and furniture that might injure a child if not secured include, but are not limited to, televisions, chests of drawers, bookcases, shelving, cabinets and fish tanks. Examples of items not required to be secured include, but are not limited to, child-sized tables and chairs, rocking chairs, and cribs.

G. First Aid and CPR

All Staff who provide direct care to children must obtain certification in first aid and cardiopulmonary resuscitation within the first 90 days of employment. The hours obtained completing this certification will not count toward required annual training hours. Staff employed prior to September 30, 2016 must satisfactorily complete certification by December 29, 2016. Staff members employed after September 30, 2016 must satisfactorily complete certification within 90 days from date of hire.

H. Hygiene

Handwashing, Children. Children's hands shall be washed with liquid soap and warm running water:

- (a) Before and eating meals and snacks, and handling or touching food; and
- (b) After toileting and diapering.

Handwashing, Staff. Staff shall wash their hands with liquid soap and warm running water:

- (a) Before and eating meals and snacks, and handling or touching food;
- (b) After diapering each child; and
- (c) After toileting or assisting children with toileting.

I. Medications

Parental Authorization. Except for first aid or as authorized under Georgia law, Personnel shall not dispense prescription or non-prescription medications to a child without specific written authorization from the child's physician or parent. Such

authorization will include when applicable, date; full name of the child; name of the medication; prescription number, if any; dosage; the dates to be given; the time of day to be dispensed; and signature of parent.

Dispensing Records. The Informal Provider shall maintain a record of all medications dispensed to children by Personnel to include the date, time and amount of medication that was administered; any noticeable adverse reactions to the medication; and the signature or initials of the person administering the medication.

Storage. Medications shall be kept in a locked storage cabinet or container which is not accessible to the children and stored separate from cleaning chemicals, supplies or poisons. Medications requiring refrigeration shall be placed in a leakproof container in a refrigerator that is not accessible to the children.

J. Policies and Procedures

The Informal Provider shall have a written policy regarding the following:

- The exclusion of children with contagious illness
- Notification of parents in the event their child becomes ill while at the facility
- The notification of all parents of enrolled children when a reportable contagious illness is present in the facility
- The prevention of and response to food and allergic reactions
- Emergency preparedness and response. A written plan for handling emergencies, including but not limited to severe weather, loss of electrical power or water and death, serious injury or loss of a child, a threatening event, or natural disaster which may occur at the program. The program will have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, and continuity of operations. The plan must apply to all children in care and will include specific accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions. Such plan shall include assurance that no Personnel will impede in any way the delivery of emergency care or services to a child by licensed or certified emergency health care professionals.
- The handling and appropriate disposal of bodily fluids and storage of hazardous materials (soiled clothing and bedding)
- Recognition and reporting of child abuse and neglect

Informal Provider shall conduct drills for fire, tornado and other emergency situations. The fire drills will be conducted monthly and tornado and other emergency situation drills will be conducted every six months. The program shall maintain documentation of the dates and times of these drills for two years.

The Informal Provider shall provide the Parent(s) with a copy of the program's policies and procedures.

K. Personnel Records

The Informal Provider must maintain a personnel file on all Staff for the duration of the term of employment plus one calendar year, and it shall contain the following:

- (a) Identifying information to include: name, date of birth, current address and current telephone number;
- (b) All training required by these standards which shall include: title of training, date of training, trainer's signature, location of training and number of clock hours obtained;
- (c) Verification of a Satisfactory Records Check Determination.

L. Physical Plant

Required approvals. The construction of a new building or any planned structural changes to an existing program building shall obtain approval from the local zoning authorities, fire safety agencies and local building authorities. Construction and maintenance work shall take place only in areas that are not accessible to the children.

Fire Safety. A program must be in compliance with applicable laws and regulations issued by the state fire marshal, the proper local fire marshal or state inspector, including a certificate of occupancy if required prior to receiving any children for care.

Indoor Storage Areas. Potentially hazardous equipment, materials and supplies shall be stored in a locked area inaccessible to children. Examples of items to be stored include non-food related products under pressure in aerosol dispensing cans, flammable and corrosive materials, cleaning supplies, poisons, insecticides, office supplies and industrial-sized or commercial buckets with a capacity of three gallons or more or any other similar device with rigid sides which would not tip over if a toddler fell into the container head first.

M. Playgrounds

Fence or Approved Barriers. Playgrounds shall be protected from traffic or other hazards by a four (4) foot or higher secure fence or other barrier. Fencing material shall not present a hazard to children and shall be maintained so as to prevent children from leaving the playground area by any means other than through an approved access route. Fence gates shall be kept closed except when persons are entering or exiting the area.

Equipment. Playground equipment shall provide an opportunity for the children to engage in a variety of experiences and shall be age-appropriate. The outdoor equipment shall be free from hazards such as, but not limited to, lead-based paint, sharp corners, and shall be regularly maintained in such a way as to be free of rust and splinters that could pose significant safety hazard to the children. All equipment shall be arranged so as not to obstruct supervision of children. Climbing and swinging equipment shall be anchored and have a resilient surface beneath the equipment. The fall-zone from such equipment must be adequately maintained to assure continuing resiliency.

Safety and Upkeep of Playground. Playgrounds shall be kept clean, free from litter and free of hazards, such as but not limited to non-resilient surfaces under the fall-zone of play equipment, rocks, exposed tree roots and exposed sharp edges of concrete or equipment.

N. Staffing and Supervision

Staffing: The total number of children in care cannot exceed six. Of the children in care, no more than two can be unrelated for pay.

Supervision. Children shall be supervised at all times. "Supervision" means that the appropriate number of Staff members are physically present in the area where children are being cared for and are providing watchful oversight to the children. The persons supervising in the child care area must be alert, and able to respond promptly to the needs and actions of the children being supervised.

O. Staff Training

Each Informal Provider with direct care responsibilities shall complete health and safety training within 90 days of becoming a Provider. The state-approved training hours obtained will count toward required annual training hours. The training must address the following health and safety topics:

- (a) Prevention and control of infectious diseases;
- (b) Prevention of sudden infant death syndrome and use of safe sleeping practices;
- (c) Administration of medication, consistent with standards for parental consent;
- (d) Prevention of and response to emergencies due to food and allergic reactions;

- (e) Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic;
- (f) Prevention of shaken baby syndrome and abusive head trauma;
- (g) Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a human-caused event (such as violence at a child care facility);
- (h) Handling and storage of hazardous materials and the appropriate disposal of bio contaminants; and
- (i) Precautions in transporting children (if applicable).
- (j) Recognition and reporting of child abuse and neglect
- (k) Child Development

The Health and Safety Orientation Certificate that includes all topic requirements can be obtained by locating a training vendor offering this course at GaPDS.decal.ga.gov. DECAL provides this training at no charge to Georgia participants through Pennsylvania State University, Better Kid Care On Demand training at <https://extension.psu.edu/programs/betterkidcare/early-care/ccdbg>. Choose the course for Georgia Health and Safety Orientation Training.

Ongoing Training

On an annual basis, all supervisory and caregiver personnel, shall attend ten (10) clock hours of training which is task-focused in early childhood education or child development or subjects relating to job assignment and is offered by an accredited college, university or vocational program or other Department-approved source.

P. Swimming Pools and Water-related Activities (If applicable)

Accessibility of Pools. All swimming and wading pools shall be adequately fenced and inaccessible to children except during supervised activities.

Supervision of Children in Water Over Two (2) Feet Deep. For water-related activity (such as swimming, fishing, boating or wading) in water over two (2) feet deep, continuous supervision of children must be provided as follows:

Ages of Children	Staff:Child Ratio*
Under two and one-half (2 1/2) yrs.	1:2
Two and one-half (2 1/2) to four (4) yrs.	1:5
Four (4) yrs. and older who cannot swim a distance of fifteen (15) yards unassisted **	1:6
Four (4) yrs. and older who can swim a distance of fifteen (15) yards unassisted **	1:15

* At least one person must have current evidence of having completed successfully a training program in lifeguarding offered by a water-safety instructor certified by the American Red Cross or YMCA or YWCA or other recognized standard-setting agency for water safety instruction. Such person may be a program staff member or an employee of a water facility (e.g., local swimming pool).

** In lieu of requiring each child to take a swimming test to determine whether the child can swim a distance of fifteen (15) yards unassisted, program staff may accept copies of certificates or cards from a recognized water-safety instruction

organization showing that the child has successfully completed a swimming class which required the child to swim a distance.

Supervision of Children in Water Less than Two (2) Feet Deep. For water-related activity (such as swimming, fishing, boating or wading) in water less than two (2) feet deep (such as a wading pool), continuous supervision must be provided in accordance with normal Staff:child ratios which are as follows:

Ages of Children	Staff:Child Ratio*
Infants less than one (1) year old or children under eighteen (18) months who are not walking	1:6
One (1) year olds who are walking	1:8
Two (2) year olds	1:10
Three (3) year olds	1:15
Four (4) year olds	1:18
Five (5) year olds	1:20
Six (6) years and older	1:25

Additional Supervision. At least one (1) additional Staff member above the required Staff:child ratios for any water-related activity (such as swimming, fishing, boating, or wading) shall be available to rotate among the age groups as needed when any of the following circumstances are present:

- (a) the majority of the children in a group are not accustomed to or are afraid of the water;
- (b) the majority of the children in a group comprised of children who cannot swim a distance of 15 yards unassisted cannot touch the bottom of the water facility without submerging their heads;
- (c) the water facility is particularly crowded;
- (d) the children have special needs which impact on their ability to participate safely in the water-related activity.

Q. Transportation (If applicable)

If children are transported in a vehicle, the Informal Provider shall:

- (a) Have a Current driver's license.
- (b) Restrain children by either individual seat belts or appropriate child restraints in accordance with current state and federal laws and regulations.
- (c) Leave no child unattended in a motor vehicle.
- (d) Obtain written authorization for the Child to receive emergency medical treatment when the Parent is not available, as required by these rules, shall be maintained in the vehicle

Supervision of Vehicles. A child shall never be left unattended in a vehicle.

R. Field Trips (If applicable)

Parental Permission. An Informal Provider shall obtain written permission from Parent(s) in advance of the child's participation in any field trip and such permission must be signed and dated by a Parent.

List of Trip Participants. A list of children and adults participating in the trip shall be left at the Informal Providers home as well as be taken on the trip in the possession of the adult in charge of the trip.

Emergency Medical Information. Emergency medical information on each child to include allergies; special medical needs and conditions; current prescribed medications that the child is required to take on a daily basis for a chronic condition; the name and phone number of the child's doctor; the local medical facility that the program uses in the area where the program is located; and the telephone numbers where the Parent(s) can be reached shall be left at the program as well as be taken on the trip in the possession of the adult in charge of the trip.

S. Required Reporting

The Informal Provider shall report or cause to be reported the following:

(a) Child Abuse, Neglect or Deprivation. Within twenty-four (24) hours or the next work day, suspected incidents of child abuse, neglect or deprivation shall be reported to the local County Department of Family and Children Services in accordance with state law and to the Department, notifying that such a report was made.

(b) Communicable Diseases. Any cases or suspected cases of notifiable communicable diseases (COVID-19, Tuberculosis, Measles, etc.) or any viruses or illnesses identified during a public health emergency, immediately to the Department and to the local County Health Department as required by the rules of the Georgia Department of Public Health, Rule 511-2-1, Notification of Disease. (5) Annual Reports.

(c) Incident Reports. The following incidents must be reported to the Department within twenty-four (24) hours or the next work day:

1. Any death of a child while in the care of the program; and

2. Any serious illness or injury requiring hospitalization or professional medical attention other than first aid of a child while in the care of the program.

T. Diapering (If applicable)

Handwashing Sink. A hand washing sink with running heated water shall be located adjacent to the diapering area.

Diaper Changing Surface. If diapers are changed on a diaper changing table/surface, the surface shall be smooth, nonporous, and equipped with a guard or rails to prevent falls. Between each diaper change, the diaper change surface shall be cleaned with a disinfectant and dried with a single-use disposable towel. Infants and children shall not be left unattended while being diapered or having their clothes changed on the diaper changing surface.

Location of Diapering Area. The area used for diapering shall not be used for food preparation. It must be clear of formulas, food, food utensils and food preparation items.

U. Safe Sleep Requirements (If applicable)

Cribs. A crib that is safety approved in compliance with Consumer Product Safety Commission (CPSC) and American Society of Testing and Materials International (ASTM) safety standards shall be provided for each infant. ("Infant" refers to any child under the age of twelve (12) months or any child who is under eighteen (18) months of age who is not walking.)

Crib Mattress. A mattress shall be provided for each crib and shall be firm, tight-fitting without gaps, at least two inches (2") thick and covered with waterproof, washable material. Before a change of occupant, each mattress shall be cleaned with a disinfectant.

Crib Sheet. Each crib shall have only an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant.

Infant Sleep Position. Informal Provider shall place an infant to sleep on the infant's back in a crib unless the program has been provided a physician's written statement authorizing another sleep position for that particular infant that includes how the infant shall be placed to sleep and a time frame that the instructions are to be followed.

Safe Sleep Environment. Informal Provider shall not place objects or allow objects to be placed in or on the crib with an infant such as but not limited to toys, pillows, quilts, comforters, bumper pads, sheepskins, stuffed toys, or other soft items. Staff shall not attach objects or allow objects to be attached.

Health and Safety Monitoring Checklist

Arrival time:	Departure time:	Visit date:
Consultant name:		Phone #:
Informal Caregiver Name:		Informal Caregiver #: INF-
Street Address:		
City, State, Zip Code, County:		
Enrollment Date: / /	90 days from Enrollment: / /	

N/A – Informal Caregiver was dismissed or no longer provides care for CAPS subsidy

CAPS Missing Informal Provider Documents as of MM/DD/YYYY

The following information is needed to complete the caregiver's record with the CAPS program.

Please send to CAPS.InformalProvider@dec.al.gov within 10 days.

Proof of SSN <input type="checkbox"/>	Proof of Identification <input type="checkbox"/>	Enrollment package for CBC <input type="checkbox"/>	CBC for all over 18 years <input type="checkbox"/>	Direct Deposit <input type="checkbox"/>	CPR Certificate <input type="checkbox"/>
Annual Updates	W-9 <input type="checkbox"/>	Enrollment Affidavit <input type="checkbox"/>	Childcare Provider Agreement <input type="checkbox"/>	No Documents Needed <input type="checkbox"/>	

Staff: Child Ratio:

Children Present			Others Children Living in Home (under 17 years old)		
Relationship	Name	Age	Relationship	Name	Age
Unrelated	1.				
Unrelated	2.				
Related	3.				
Related	4.				
Related	5.				
Related	6.				
Additional children					
Additional children					
Additional children					
Additional children					
			Activities/ Notes		

Indicators	Observations/ Comments/ Notes	Plan of Improvement
<p>Supervision <input type="checkbox"/> No children present</p> <ul style="list-style-type: none"> • Provider physically present with the children and properly supervising; seated within arm's length away from children 3 years and under during mealtime? <input type="checkbox"/> Yes <input type="checkbox"/> No • Provider alert and able to intervene to prevent injuries? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain-----> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme 		
<p>Bathrooms</p> <ul style="list-style-type: none"> • Is there a working toilet? <input type="checkbox"/> Yes <input type="checkbox"/> No 		
<p>Children's Records</p> <ul style="list-style-type: none"> • Arrival/Departure records signed by the parental authority or authorized representative (CAPS Policy 12.4.6.1) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A 		
<p>Criminal Background Checks</p> <ul style="list-style-type: none"> • CBC results on file for provider and any resident 17 years old or older? <input type="checkbox"/> Yes <input type="checkbox"/> No • Is there anyone with only a national fingerprint check conducted by DECAL? <input type="checkbox"/> Yes <input type="checkbox"/> No • If so, is this person supervised by staff with a Comprehensive Background check? <input type="checkbox"/> Yes <input type="checkbox"/> No • CBC one-day letter left on-site? <input type="checkbox"/> Yes <input type="checkbox"/> No <p><input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme</p>		
<p>Core Standard Severity total(s): Low: _____ Medium: _____ High: _____ Extreme: _____</p> <p>Non-core Standard total(s): _____</p>		

<p>Medication <input type="checkbox"/> N/A (No medication dispensed)</p> <ul style="list-style-type: none"> • Stored medication inaccessible to children? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Written permission from parent/guardian to dispense? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Document in writing when medication is dispensed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme <p>If no, explain-----></p>		
<p>Core Standard Severity total(s): Low: _____ Medium: _____ High: _____ Extreme: _____</p> <p>Non-core Standard total(s): _____</p>		
Indicators	Observations/ Comments/ Notes	Plan of Improvement
<p>Physical Plant</p> <ul style="list-style-type: none"> • Is there a working smoke detector at the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Is there a working fire extinguisher at the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Are the heaters and fire places safely covered at the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • If there are weapons in the home, are weapons (guns, hunting knives, related accessories, etc.) locked and out of reach of children? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Are flame producing items (matches, lighters, lighted candles, etc.) out of reach of children? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Are all tobacco items (cigarettes, cigars, etc.) out of reach of children? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Is the electricity on/working at the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No • Is there a working phone at the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No • If animals are at the residence, are they secured safely away from children? <input type="checkbox"/> Yes <input type="checkbox"/> No 		

<ul style="list-style-type: none"> Are hazardous materials (cleaning supplies, etc.) stored securely away from children? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme Are electrical outlets (at the child's level) covered? <input type="checkbox"/> Yes <input type="checkbox"/> No 		
Playgrounds/Equipment <input type="checkbox"/> N/A (no playground or equipment) <input type="checkbox"/> Not observed during visit		
<ul style="list-style-type: none"> Outdoor play area free of serious hazards? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme Fence/barrier around outdoor play area? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain-----> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme		
Core Standard Severity total(s): Low: _____ Medium: _____ High: _____ Extreme: _____		
Non-core Standard total(s): _____		
Indicators	Observations/ Comments/ Notes	Plan of Improvement
Policies and Procedures: Does the program have a written policy regarding the following		
<ul style="list-style-type: none"> The exclusion of children with contagious illness? <input type="checkbox"/> Yes <input type="checkbox"/> No Notification of parents in the event their child becomes ill while at the facility? <input type="checkbox"/> Yes <input type="checkbox"/> No The notification of all parents of enrolled children when a reportable contagious illness is present in the facility? <input type="checkbox"/> Yes <input type="checkbox"/> No The prevention of and response to food and allergic reactions? <input type="checkbox"/> Yes <input type="checkbox"/> No Emergency preparedness and response? <input type="checkbox"/> Yes <input type="checkbox"/> No The handling and appropriate disposal of bodily fluids and storage of hazardous materials (soiled clothing and bedding)? <input type="checkbox"/> Yes <input type="checkbox"/> No Recognition and reporting of child abuse and neglect? <input type="checkbox"/> Yes <input type="checkbox"/> No Has the provider reported serious injuries/incidents within 24 hours or the next work day? (Suspected child abuse or neglect, any notifiable communicable disease, any death of a child while in care of the program or serious incident/injury requiring professional medical attention). <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A 		
Safe Sleep <input type="checkbox"/> N/A (no infants) <input type="checkbox"/> Not observed during visit		

<ul style="list-style-type: none"> • Is there a clean sleep/rest area for each child? <input type="checkbox"/> Yes <input type="checkbox"/> No • If cribs are required, do they meet CPSC/ASTM requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme) • Cribs clear of objects? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme) • Each crib has a firm, tight fitting mattress without gaps? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Each crib has an individual, tight fitting sheet? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Are infants placed on their back to sleep in an appropriate crib? <input type="checkbox"/> Yes <input type="checkbox"/> No <p>If no, explain-----> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme</p>		
<p>Swimming & Water-Related Activities <input type="checkbox"/> N/A (no pool/no swimming activities)</p> <ul style="list-style-type: none"> • Pool area adequately fenced and secured? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Are swimming areas accessible, are there child protected locks and/or other devices to keep children safe? <input type="checkbox"/> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme <input type="checkbox"/> Yes <input type="checkbox"/> No 		
<p>Core Standard Severity total(s): Low: _____ Medium: _____ High: _____ Extreme: _____</p> <p>Non-core Standard total(s): _____</p>		

Indicators	Observations/ Comments/ Notes	Plan of Improvement
<p>Transportation <input type="checkbox"/> N/A (no transportation provided)</p> <ul style="list-style-type: none"> • Written permission to transport from parent/guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No • Emergency medical information for each child on vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Proper restraints used when transporting children? during visit <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not observed <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Children left unattended on the vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Provider have current driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme 		

Staff Training	
<ul style="list-style-type: none"> • Provider first aid and CPR Trained? <input type="checkbox"/> Yes <input type="checkbox"/> No • Provider obtain First Aid and CPR training within 90 days of employment? <input type="checkbox"/> Yes <input type="checkbox"/> No = 1 Point • Provider obtain Health & Safety Orientation Certificate within 90 days of employment? <input type="checkbox"/> Yes <input type="checkbox"/> No = 1 Point • Does provider receive on-going training? <input type="checkbox"/> Yes <input type="checkbox"/> No = 1 Point <p>If yes, list type of training:</p> <ul style="list-style-type: none"> ○ ○ ○ 	

Core Standard Severity total(s): Low: _____ Medium: _____ High: _____ Extreme: _____ Non-core Standard total(s): _____	
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Staff Profile Record

Verification of Health & Safety Orientation Certificate and CPR/First Aid N/A – within 90 days: __/__/____

Adults Living in the home (17 years old and over)		Criminal Record Check			Health & Safety Training			
First Name	Last Name	CRC Expiration Date	CRC Determination	CRC Letter on file	Current First Aid Training	Current CPR Certification	Health & Safety Orientation Certificate	10 hours annual ongoing Health & Safety Training
		__/__/____						
		__/__/____						
		__/__/____						
		__/__/____						
		__/__/____						
		__/__/____						

Federal law requires that programs receiving federal funds have a satisfactory criminal background check determination on file based on a national fingerprint background check.

Compliance Enforcement Worksheet

Violation Class (A, B, C, D)	Violation Level			
	I 0-2 points	II 3-5 points	III 6-10 points	IV 11+ points
D (10 points per indicator) <ul style="list-style-type: none"> • Extreme Harm • Imminent Danger 			I3 - D	D
C (6 points per indicator) <ul style="list-style-type: none"> • High Risk 			I2-D C-III	I3-D C-IV
B (2 points per indicator) <ul style="list-style-type: none"> • Medium Risk 	P1-P3 B-I	P2-P3 B-II	I1-I2 B-III	I2-D B-IV
A (1 point per indicator) <ul style="list-style-type: none"> • Low Risk • CCDF Non-core 	P1-P2 A-I	P1-P3 A-II	P2-P3 A-III	I1-I2 A-IV

Prevention Action Category	Intermediate Action Category (includes Prevention Actions)	Dismissal Action Category
Prevention 1 (P1)	Intermediate 1 (I1)	Dismissal (D)
Technical assistance	Corrective action plan	Dismissal
Prevention 2 (P2)	Office conference	Disqualification
Citation	Intermediate 2 (I2)	
Plan of improvement	Fine (level 1 or 2)	
Prevention 3 (P3)	Intermediate 3 (I3)	
Warning Letter	Per violation fine (level 1 or 2)	

No Violations Observed _____ Core Standard total(s): _____ Non-core Standard total(s): _____ Combined total: _____
 Highest Severity: _____

Informal Provider Signature _____

Printed name _____ Date _____

Consultant Signature _____ Date _____

Health and Safety Core Standards

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
Staff: Child Ratios							
Observe # of children during visit & Informal Provider's documentation;							
Staffing: The total number of children in care cannot exceed six. Of the children in care, no more than two can be unrelated for pay. If the relative care is for more than six related children for pay (as described by Child Care Services licensing rules), they are required to obtain a license from DECAL If the non-relative cares for more than two unrelated children for pay, s/he is required to obtain a license from DECAL.	If no children are present	Never	N/A	N/A	Ratio citation with or without an incident and/or injury with no medical attention or with medical attention as a precaution	Ratio citation with an incident and/or injury requiring professional medical attention OR could be seriously detrimental to the child(ren)	Incident resulting in death, extreme or permanent injury
Supervision							
Observe for adequate supervision, Informal Provider is physically present in the area and able to supervise all children.							
Children shall be supervised at all times. "Supervision" means that the Informal Provider is physically present in the area where children are being cared for and is providing watchful oversight to the children. The Informal Provider must be alert, and able to respond promptly to the needs and actions of the children being supervised.	If no children are present	Never	If Informal Provider observed not circulating; Short term limited visibility (i.e., room dark at naptime) *If TA documented on previous visit, move to Low Risk	Brief break in watchful oversight (excluding adult restroom breaks or stepping away to answer the door) Staff not seated with children during mealtime.	Supervision citation with or without an incident and/or injury with no medical attention or with medical attention as a precaution (i.e., children sleeping behind a closed door, Informal Provider going outside without	Supervision citation with an incident and/or injury requiring professional medical attention OR could be seriously detrimental to the child(ren)	Incident resulting in death, extreme or permanent injury

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
					the children, leaving the children alone, or going to a different level of the Home); No Adult present to supervise children		
Comprehensive Background Checks							
Review all CRC's for Informal Provider, Employees, Provisional Employees, and other adults residing in the Home							
<p>Every staff member with direct care responsibilities must have a Satisfactory Comprehensive Background Check Determination before the individual may supervise any child independently. A staff member with a preliminary fingerprint clearance must be supervised by a staff member with a Satisfactory Comprehensive Background Check Determination. No staff member with an Unsatisfactory Records Check Determination may be present at the home when any child is present for care.</p>	Never	Never	<p>A Resident will be turning 17 years old; A new Resident is entering Home Advise of process to obtain CBCs with citation</p>	N/A	<p>*No Records Check Determination Completed *Has National Fingerprint Check but Satisfactory Comprehensive Records Check Determination not completed or has not begun process AND staff person is not supervised by a person with comprehensive records check. *Records Check Clearance date on Comprehensive Records Check Determination older than preceding 12 months of hire</p>	<p>*Knowledge of a committed crime with or without Satisfactory Comprehensive Records Check Determination completed.</p>	<p>Incident resulting in death, extreme or permanent injury</p>

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
					date OR Records Check Clearance Date on Comprehensive Records Check Determination is not older than the preceding 12 months of license date, but there was a lapse of employment from the industry greater than 180 days (6 months) or longer.		
Diapering Areas and Practices							
Inquire about procedures or observe actual diaper change							
Diapering surface should be clean and non-porous	If no diapered children are currently enrolled	Informal Provider does not provide care for diapered children	Turn textured side over for a smooth surface; Disinfectant not used according to manufacturer's instructions *If TA documented on previous visit, move to Low Risk	Changing pad has tears/non-smooth surface; Surface not properly disinfected;	There is evidence of isolated illness and confirmed lack of proper disinfection	There is evidence of widespread illness due to lack of proper disinfection (by CDC or HD)	Incident resulting in death, extreme or permanent injury
Discipline							
Observe Providers interactions with children, ask about and review policy if children are napping or not present							

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
<p align="center">Disciplinary actions shall not be detrimental to physical or mental health</p>	Never	Never	<p>Observing inappropriate discipline methods: making a child face the wall for time out, a 4 y/r old standing in timeout for 5 min. instead of 4, children under 2 in timeout instead of redirection, behavior charts posted that use marks, colors, etc. by children's names *If TA documented on previous visit, move to Low Risk</p>	<p>Misuse or inappropriate use of time out or redirection; Staff encourages or does not intervene when a Parent disciplines their child within sight and/or hearing of other children; Staff convey understanding of discipline rules and report previous use of inappropriate discipline, such as popping a child's hand</p>	<p>Disciplinary action detrimental to child's physical or mental health which may or may not have resulted in an incident and/or injury with no medical attention or with medical attention as a precaution</p>	<p>Disciplinary action detrimental to child's physical health OR was seriously detrimental to a child's mental health with an incident and/or injury requiring professional medical attention</p>	<p align="center">Incident resulting in death, extreme or permanent injury</p>
<p>Staff shall not: See disciplinary technique below for sanction level</p>							
<p align="center">Physically/sexually abuse a child; Engage in sexually overt conduct in the presence of any child</p>	Never	Never	N/A	N/A	N/A	Physical abuse	<p align="center">Sexual abuse OR incident resulting in death, extreme or permanent injury</p>

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
Inflict corporal/physical punishment	Never	Never	Corporal punishment by a Parent (not employed by the facility) of their own child to any body part (popping on hand, buttocks, legs) not within sight/hearing of other children	N/A	Corporal punishment to any body part (popping on hand, buttocks, legs, etc.) without a bruise or mark	Corporal punishment to any body part (popping on hand, buttocks, legs) with a bruise or mark	Incident resulting in death, extreme or permanent injury
Shake, jerk, pinch or roughly handle	Never	Never	N/A	N/A	Jerk, handle roughly, or pinch without a bruise or mark or injury; Shake a child five years or older without an injury	Jerk, handle roughly, or pinch with a bruise or mark or injury; Shake a child under five years old with or without an injury; Shake a child five years or older with an injury	Incident resulting in death, extreme or permanent injury
Verbally abuse or humiliate (includes use of threats, profanity or belittling remarks about a Child or his family)	Never	Never	Tone of voice; Raised voice with negative implications; Mild threat to call Parent about behavior ("Do we need to call your mom?" or "You know what's going to happen when your mom gets here?") *If TA documented on previous visit, move to Low Risk	Raised voices with profanity or belittling remarks or threats; Use of profanity in general	Humiliating a child; Threatening physical harm; Screaming at a child, where child displays behavior demonstrating that he/she is afraid or upset	Extreme or repeated threats, humiliation, or belittling remarks	N/A

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
Isolate in a dark room, closet or unsupervised area	Never	Never	N/A	N/A	Isolation	Isolation with aggravating circumstances such as but not limited to the door being closed or the room being dark	Incident resulting in death, extreme or permanent injury
Use of mechanical or physical restraints or devices	Never	Never	N/A	N/A	Use of mechanical and/or physical restraints which may or may not have resulted in an incident and/or injury with no medical attention or with medical attention as a precaution	Use of mechanical and/or physical restraints with an incident and/or injury requiring professional medical attention OR restraints used for an egregious amount of time or there were egregious circumstances	Incident resulting in death, extreme or permanent injury
Use medication to control behavior	Never	Never	N/A	N/A	N/A	Use of medication for discipline and/or to control behavior, other than as prescribed by a physician	Incident resulting in death, extreme or permanent injury
Restrict unreasonably from going to the bathroom	Never	Never	N/A	Informal Provider fails to respond appropriately and/or timely to a child's request or need to toilet (Staff states, "You should have gone to the bathroom during the bathroom break and now you can't go.")	Child(ren) not allowed to go to the bathroom as punishment, which may or may not have resulted in an incident and/or injury with no medical attention or with medical attention as a precaution	Child(ren) not allowed to go to the bathroom as punishment with an incident and/or injury requiring professional medical attention OR was not allowed to go for an egregious amount of time	N/A

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
Punishing toileting accidents	Never	Never	N/A	Informal Provider uses an appropriate form of discipline as punishment immediately following a toileting accident (a 3 year old is put in time out for 3 minutes following a toileting accident)	Informal Provider uses an inappropriate form of discipline as punishment immediately following a toileting accident (a child is made to stand in the corner facing the wall following a toileting accident or a child was forced to clean up their own accident)	Restriction/punishment for bathroom accidents with an incident and/or injury requiring professional medical attention OR with aggravating circumstances	Incident resulting in death, extreme or permanent injury
Force-feed or withhold feeding regularly scheduled meals/snacks	Never	Never	N/A	Feeding of a child was intentionally delayed but still occurred during the current meal or snack service	Feeding of a child was delayed but still occurred after the current meal or snack but before the next meal or snack; Child was compelled to eat with no incident or injury	Child(ren) physically force fed (a child's mouth is held and made to eat) which resulted in a serious incident and/or injury requiring professional medical attention; Food withheld (and not given to child for the entire day or for all meals or snack services)	Incident resulting in death, extreme or permanent injury

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
Force or withhold naps	Never	Never	Telling child(ren) that they must lay in a particular position on the mat or cot *If TA documented on previous visit, move to Low Risk	Force or withhold naps with no physical contact	Physically force/withhold naps without an incident or injury	Physically force naps with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Allow Children to discipline or humiliate other Children	Never	Never	Informal Provider requires child(ren) to report the bad behavior of other child(ren) *If TA documented on previous visit, move to Low Risk	Informal Provider allows and/or encourages child(ren) to humiliate other child(ren) (name calling, belittling remarks, threats, use of profanity, etc.)	Informal Provider allows and/or encourages child(ren) to physically discipline each other with or without an incident and/or injury with no medical attention or with medical attention as a precaution	Informal Provider allows and/or encourages child(ren) to physically discipline each other with an incident and/or injury requiring professional medical attention OR discipline with aggravating circumstances	Incident resulting in death, extreme or permanent injury
Confine a Child for disciplinary purposes to equipment	Never	Never	N/A	Child(ren) confined for discipline without an incident or injury	Child(ren) confined for discipline which resulted in an incident and/or injury with no medical attention or with medical attention as a precaution; Child(ren) confined for discipline for an extended amount of time	Child(ren) confined for discipline with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
Medications							
View stored medication; Review samples of medication documentation							
<p>Authorization: Specific written authorization from the Child's physician or Parent to dispense prescription or nonprescription medication to Child</p> <p>Storage: Medication stored as authorized/instructed and inaccessible to children</p> <p>Dispensing records: Include Child's name, name of medication, date(s) and time(s) administered, name of person administering</p>	If medication has not been administered since last visit or since medication was last evaluated; If forms are inaccessible	If Informal Provider does not administer any medication	If planning to dispense medication in the future; Isolated instance of incomplete paperwork other than missing parent signature *If TA documented on previous visit, move to Low Risk	<p>Authorization: Medication is on site with no medication authorization, but not dispensed</p> <p>Storage: Medication not stored as authorized/instructed OR medication accessible but not handled or ingested by a child (located in cubbies, drawer, etc.)</p> <p>Records: Incomplete dispensing documentation: not documenting date(s)/time(s) dispensed, name of person or medication etc.</p>	<p>Authorization: Dispensed medication without authorization with no adverse reaction; Medication not dispensed as authorized</p> <p>Storage: Medication handled with no incident or injury</p> <p>Records: Dispensed medication not documented at all with no incident or injury</p>	<p>Authorization: Dispensed medication without authorization with an adverse reaction; Medication dispensed to the wrong child</p> <p>Storage: Child ingested and/or handled medication with an incident and/or injury</p> <p>Records: Dispensed medication not documented at all with an incident and/or injury (i.e., over medicating a child)</p>	Incident resulting in death, extreme or permanent injury
Physical Plant: Hazards							
Evaluate for accessible hazards throughout home							
Hazardous materials (cleaning supplies, tobacco, etc.) stored securely away from children	Never	Never	Hazards in a room currently not in use for child care but potentially accessible to children; Isolated minor hazards: brooms,	Hazards accessible with or without being handled by a child (plastic grocery bags, aerosol cans, items that say "Keep Out of	Serious/dangerous hazards handled by a child OR easily ingestible hazards (open container) that are accessible with or without being handled	Hazards accessible and handled or ingested with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
			dustpans, toothpaste, etc. *If TA documented on previous visit, move to Low Risk **Soap that says "Keep Out of Reach of Children" never moves higher unless an incident and/or injury occurs	Reach Children" etc.)	by a child which may or may not have resulted in an incident or injury with no medical attention or with medical attention as a precaution (cup of bleach on a shelf, sharp knife lying on a table, 3 gallon bucket of water)		
Weapons, (guns, hunting knives, related accessories, etc.) locked and out of reach of children	Never	If there are no firearms in the Home	If planning to have a firearm in the future	N/A	N/A	Weapons that are not safely stored or are accessible	Incident resulting in death, extreme or permanent injury
Working smoke detector and fire extinguisher at the residence	Never	Never	Smoke detector beeping indicating new batteries are required; Fire extinguisher on same level but more than 30 feet from the kitchen	No operable smoke detector on each floor of the Home; Fire extinguisher accessible to children	No smoke detector in Home; No fire extinguisher in Home; Inoperable fire extinguisher (empty or needing to be recharged)	No smoke detector or fire extinguisher with a fire in the Home	Incident resulting in death, extreme or permanent injury
Flame producing items (matches, lighters, lighted candles, etc.) out of reach of children	Never	Never	N/A	N/A	Flame producing items accessible to children	Flame producing items accessible to children that results in an incident and/or injury	Incident resulting in death, extreme or permanent injury

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance =1 pt.	Non-compliance= 2 pts.	Non-compliance= 6 pts.	10 points - Potential CAPS Dismissal
Heaters and fire places safely covered at the residence	Never	If there are none in the Home	If present in the Home, but not in use	N/A	Heater and heating equipment accessible and in use which may or may not have resulted in an incident and/or injury with no medical attention or with medical attention as precaution	Heater and heating equipment accessible and in use with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury
Playgrounds							
Observe playgrounds for cleanliness/hazards; playground equipment for hazards/anchoring; fencing for hazards/height (measure); measure depth of fall zones under equipment							

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
<p>Play areas protected from traffic or other hazards by fencing or other barriers at least four feet in height and approved by the Department; Fencing material shall not present a hazard to children</p>	<p>If severe weather in the area, assess the playground from the perimeter or window. If severe weather alert issued, document on the checklist.</p>	<p>Never</p>	<p>IF NO FENCE/BARRIER, request Supervision Plan. TA -Not completely enclosed and child(ren) did not leave premises; TA - Isolated minor fencing issue in a limited area: small gap (less than 3.5 inches wide and no entrapment or escape hazard; Isolated damage to fence and hazardous area made inaccessible to children Fence not four feet high;</p>	<p>Cite under HAZARDS - Minor fencing hazards: loose wires, bolts measuring over 2 threads, rust, splintering wood, potential impalement hazard, exposed sharp prongs, nails or screws, fence not secured, etc. Potential entrapment hazard (gap that measures between 3.5 - 9 inches)</p>	<p>N/A</p>	<p>Cite under SUPERVISION Actual entrapment occurs, with an incident and/or injury with no medical attention or with medical attention as a precaution OR Child left premises due to: fence not completely enclosed, gate open, fence not four feet high; Cite under HAZARDS - Entrapment or fence hazards with an incident and/or injury requiring professional medical attention</p>	<p>Incident resulting in death, extreme or permanent injury</p>
<p>Climbing & swinging equipment that are not portable shall be securely anchored</p>	<p>If severe weather in the area, assess the playground from the perimeter or window. If severe weather alert issued, document on the checklist.</p>	<p>If there is no climbing or swinging equipment required to be anchored</p>	<p>If adding non-portable playground equipment that would need anchoring</p>	<p>Non-portable equipment anchored but not stable</p>	<p>Non-portable equipment not anchored which may or may not have resulted in an incident and/or injury with no medical attention or with medical attention as a precaution</p>	<p>Non-portable equipment not anchored with an incident and/or injury requiring professional medical attention</p>	<p>Incident resulting in death, extreme or permanent injury</p>

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
<p>Outside play area shall be free of hazards such as, sharp edges of concrete or non-play equipment, broken glass, debris, open drainage ditches, holes, stagnant water, etc.</p>	<p>If severe weather in the area, assess the playground from the perimeter or window. If severe weather alert issued, document on the checklist.</p>	<p>Never</p>	<p>Isolated minor hazards: small amount of trash/debris, minimal roots or yard debris. Mops or brooms outside of high traffic area; If one inch or less of standing water is observed *If TA documented on previous visit move to Low Risk</p>	<p>Widespread minor hazards: tripping hazards, yard debris, trash/debris; Presence of nests of and/or biting ants/stinging insects; Mops, brooms, or rakes accessible or in high traffic area; Standing water without a drowning hazard (1-2 inches); Tools/equipment in an enclosed but unlocked shed (not accessed by children); With no incident or injury</p>	<p>Dangerous playground hazards: lawn mowers, tools, discarded equipment or appliances; Children accessed nests of and/or biting ants/stinging insects; Standing water with a drowning hazard (2 inches or more); With or without an incident and/or injury with no medical attention or with medical attention as a precaution</p>	<p>Playground hazards with an incident and/or injury requiring professional medical attention (exposed nail causing an impalement/puncture injury, bitten by ants/stinging insects, exposed root causing broken arm, etc.)</p>	<p>Incident resulting in death, extreme or permanent injury</p>
<p>Climbing & swinging equipment that are not portable shall have a resilient surface beneath the equipment and fall zones which is adequately maintained to assure continuing resiliency</p>	<p>If severe weather in the area, assess the playground from the perimeter or window. If severe weather alert issued, document on the checklist.</p>	<p>If there is no climbing or swinging equipment requiring resilient surfacing beneath and in fall zones</p>	<p>Compacted resilient surfacing; Portable equipment is observed on a hard surface and can be moved during the visit; Isolated grass growing in resilient surfacing</p>	<p>Inadequate amount of resilient surface: Climbing equipment under 5 feet tall (more than 0 inches but less than 3 inches); Climbing equipment that is 5 feet or greater in height or swinging equipment (more than 0 inches but less than 6 inches);</p>	<p>No resilient surface with no incident or injury</p>	<p>No/inadequate resilient surface with an incident and/or injury requiring professional medical attention</p>	<p>Incident resulting in death, extreme or permanent injury</p>

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
				Inadequate fall zones			
**NOTE: Resilient surfacing is NOT required under infant/toddler bucket swings or infant/toddler swings that require the child to be buckled in	<p>A crib that is safety approved in compliance with Consumer Product Safety Commission (CPSC) and American Society of Testing and Materials International (ASTM) safety standards shall be provided for each infant. ("Infant" refers to any child under the age of twelve (12) months or any child who is under eighteen (18) months of age who is not walking.)</p>						
Observe or inquire about all infant sleep safety practices; Observe cribs used for sleeping infants	<p>A mattress shall be provided for each crib and shall be firm, tight-fitting without gaps, at least two inches (2") thick and covered with waterproof, washable material. Before a change of occupant, each mattress shall be cleaned with a disinfectant.</p> <p>Each crib shall have only an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant.</p> <p>Staff shall place an infant to sleep on the infant's back in a crib unless the Informal Provider has been provided a physician's written statement authorizing another sleep position for that particular infant that includes how the infant shall be placed to sleep and a time frame that the instructions are to be followed.</p> <p>Safe Sleep Environment. Staff shall not place objects or allow objects to be placed in or on the crib with an infant such as but not limited to toys, pillows, quilts, comforters, bumper pads, sheepskins, stuffed toys, or other soft items. Staff shall not attach objects or allow objects to be attached to a crib with a sleeping infant, such as, but not limited to, crib gyms, toys, mirrors and mobiles.</p>						
Cribs that meet CPSC and ASTM safety standards are provided for each infant	Never	If Informal Provider does not serve infants	If planning to care for infants in the future; Noncompliant crib(s) not being used, located in an area not used for childcare and removed from facility during the visit with sufficient	Noncompliant crib(s) not being used, located in an area not used for childcare and unable to be removed from facility during the visit with sufficient compliant cribs available for # of enrolled infants	Noncompliant crib(s) in childcare area regardless of whether the crib is being used, which may or may not have resulted in an incident or injury with no medical attention or with	Noncompliant crib(s) used with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
			compliant cribs available for # of enrolled infants		medical attention as a precaution; Insufficient # of compliant cribs for # of enrolled infants which may or may not have resulted in an incident or injury with no medical attention or with medical attention as a precaution		
Crib construction: Good repair and free of hazards; Stack cribs and cribs with drop sides not used	Never	If Informal Provider does not serve infants	If planning to care for infants in the future	N/A	Crib(s) not in good repair and/or hazards are present without an incident or injury; Stack crib(s) or crib(s) with drop sides used, which may or may not have resulted in an incident and/or injury with no medical attention or with medical attention as a precaution	Crib(s) not in good repair and/or hazards are present with an incident and/or injury requiring professional medical attention; Stack crib(s) or crib(s) with drop sides used with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury
Mattress: Firm, tight-fitting without gaps, at least 2 inches thick and covered with a waterproof, washable material; Disinfected before change of occupant	Never	If Informal Provider does not serve infants	If planning to care for infants in the future; Noncompliant mattress not being used and located in an	Mattress not two inches thick; Not covered with waterproof, washable material; Not disinfected	Mattress is not tight-fitting or firm which may or may not have resulted in an incident and/or injury with no medical	Mattress is not tight fitting or firm with incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
			area not used for childcare	before a change of occupant	attention or with medical attention as a precaution		
<p>Sheets: Individual and tight fitting and changed daily or more often as needed and prior to the change of an occupant</p>	If Informal Provider serves infants, but none are currently enrolled and no sheets in use	If Informal Provider does not serve infants	<p>If planning to care for infants in the future; If Informal Provider serves infants, but none are currently enrolled and sheet(s) not tight-fitting on crib mattress; Isolated instance of a sheet not tight-fitting in an unoccupied crib and the sheet can be changed during the visit *If TA documented on previous visit move to Low Risk</p>	Crib sheet is not changed daily or more often as needed; Crib sheet not changed prior to change of occupant	Crib sheet not tight-fitting and crib in use, which may or may not have resulted in an incident and/or injury with no medical attention or with medical attention as a precaution	Crib sheet not tight-fitting with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury
<p>Staff shall place an infant to sleep on the infant's back unless the Parent has provided a physician's written statement authorizing another sleep position for that particular infant that includes how the infant shall be placed to sleep and a time frame that the instructions are to be followed. When an infant can easily turn over from back to front and back again, Staff shall continue to put the infant to sleep initially on the infant's back but allow the infant to roll over into his or her preferred position and not re-position the infant. Sleepers, sleep sacks and wearable blankets that fit according to the commercial manufacturer's guidelines and will not slide up around the infant's face may be used when necessary for the comfort of the sleeping infant, however swaddling shall not be used unless the Informal Provider has been provided a physician's written statement authorizing its use for a particular infant that includes instructions and a time frame for swaddling the infant. Staff shall not place objects or allow objects to be placed in or on the crib with an infant such as but not limited to toys, pillows, quilts, comforters, bumper pads, sheepskins, stuffed toys, or other soft items and shall not attach objects or allow objects to be attached to a crib with a sleeping infant such as but not limited to crib gyms, toys, mirrors and mobiles.</p>							

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
Back to Sleep - Infant placed on back to sleep unless the Parent has provided a physician's written statement authorizing another sleep position for that particular infant that includes how the infant shall be placed to sleep and a time frame that the instructions are to be followed	If Informal Provider serves infants, but none are currently enrolled and no sheets in use	If Informal Provider does not serve infants	If planning to care for infants in the future	Physician's written statement missing specific instructions and/or time frames	Infant(s) not placed on back to sleep with no physician's written statement and no incident or injury	Infant(s) not placed on back to sleep with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Rolling Infant - When an infant can easily turn over from back to front and back again, Staff shall continue to put the infant to sleep initially on the infant's back but allow the infant to roll over into his/her preferred position and not re-position the infant	If Informal Provider serves infants, but none are currently enrolled and no sheets in use	If Informal Provider does not serve infants	If planning to care for infants in the future	N/A	Infant(s) not allowed to roll over into their preferred position or repositioned without an incident or injury	Infant(s) not allowed to roll over into their preferred position or repositioned with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Sleepers/Swaddling - Sleepers, sleep sacks and wearable blankets fit according to the manufacturer's guidelines and will not slide up around the infant's face; Swaddling shall not be used unless the Informal Provider has been provided a physician's written statement authorizing its use that includes instructions and a time frame for swaddling the infant	If Informal Provider serves infants, but none are currently enrolled and no sheets in use	If Informal Provider does not serve infants	If planning to care for infants in the future	Physician's written statement missing specific instructions and/or time frames	Sleepers, sleep sacks, and wearable blankets not used according to manufacturer's guidelines without an incident or injury; Swaddling used and no written physician's statement on file without an incident or injury	Sleepers, sleep sacks, and wearable blankets not used according to manufacturer's guidelines and do not fit appropriately with an incident and/or injury; Swaddling used and no physician's written statement on file with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Objects in Crib - No objects shall be placed or allowed on/in the crib with a sleeping infant	If Informal Provider serves infants, but none are currently	If Informal Provider does not serve infants	If planning to care for infants in the future; Objects in or on an unoccupied crib	N/A	Objects in or on a crib with a sleeping infant (such as but not limited to: toys, pillows, comforters, bumper	Objects in or on a crib with a sleeping infant (such as but not limited to: toys, pillows, quilts, comforters, bumper	Incident resulting in death, extreme or

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
	enrolled and no sheets in use				quilts, comforters, bumper pads, sheepskins, stuffed toys, blankets or other soft items) without an incident or injury	pads, sheepskins, stuffed toys, blankets, or other soft items) with an incident and/or injury	permanent injury
Objects Attached to Crib - No objects shall be attached to crib with a sleeping infant	If Informal Provider serves infants, but none are currently enrolled and no sheets in use	If Informal Provider does not serve infants	If planning to care for infants in the future; Objects attached to unoccupied crib	N/A	Objects attached to a crib with a sleeping infant (such as but not limited to: crib gyms, toys, mirrors and mobiles) without an incident or injury	Objects attached to a crib with a sleeping infant (such as but not limited to: crib gyms, toys, mirrors and mobiles) with an incident and/or injury	Incident resulting in death, extreme or permanent injury
The infant's sleeping area is to be comfortable for a lightly clothed adult within a temperature range of 65 to 85 degrees, depending on season; adequate lighting	If Informal Provider serves infants, but none are currently enrolled and no sheets in use	If Informal Provider does not serve infants	If planning to care for infants in the future	Sleeping area not comfortable due to the temperature not being within the required range without an incident or injury; Lighting not adequate without an incident or injury	Sleeping area not comfortable due to temperature not being within the required range which resulted in an incident or injury with no medical attention or with medical attention as a precaution; Lighting not adequate which resulted in an incident or injury with no medical attention or with medical	Sleeping area not comfortable due to temperature not being within the required range with an incident and/or injury requiring professional medical attention; Lighting not adequate with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
					attention as a precaution		
Wedges, other infant positioning devices and monitors shall not be used unless a Parent provides a physician's written statement that includes time frame for use	If Informal Provider serves infants, but none are currently enrolled and no sheets in use	If Informal Provider does not serve infants	If planning to care for infants in the future; Positioning device in unoccupied crib	Physician's written statement missing specific instructions and/or time frames	Wedge, positioning device, monitor used without a physician's written statement without an incident or injury	Wedge, positioning device, monitor used without a physician's written statement with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Infants shall not sleep in equipment other than safety-approved cribs, such as but not limited to, a car seat, bouncy seat, high chair or swing; Infants who arrive at the home asleep or fall asleep in such equipment, on the floor, or elsewhere shall be transferred to a safety approved crib	If Informal Provider serves infants, but none are currently enrolled and no sheets in use	If Informal Provider does not serve infants	If planning to care for infants in the future	N/A	Infant(s) allowed to sleep in equipment not approved for infant sleep without an incident or injury	Infant(s) allowed to sleep in equipment not approved for infant sleep with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Swimming Pools & Water-Related Activities	Observe swimming pool to determine if inaccessible; Observe swimming or ask Informal Provider about procedures						
Pool area should be adequately fenced and secured If the swimming areas are accessible, child protected locks and/or devices should be used to keep children safe	If there is no pool on the premises	If there is no pool on the premises	If planning to provide swimming activities in the future; Wading pool without water is accessible; If children not outside and the	Pool area accessible but not accessed by children (gate latched but not locked)	Swimming pool accessible and accessed by child(ren) but no child(ren) entered the water; Wading pool used for water related activities	Swimming pool accessible and/or wading pool used for water related activities accessible with an incident and/or injury; Any other swimming related	Incident resulting in death, extreme or permanent injury

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance =1 pt.	Non-compliance= 2 pts.	Non-compliance= 6 pts.	10 points - Potential CAPS Dismissal
			gate to the pool is unlocked		accessible with <u>no</u> incident or injury	incident and/or injury	
Transportation	Review driver's license and observe child restraints/ask Informal Provider about procedures						
All children shall be secured in a child passenger restraining system or seat safety belt in accordance with applicable state and federal laws	If vehicle is not on site during the visit	Informal Provider does not provide transportation	If planning to provide transportation in the future; Vehicle is not currently in use	N/A	No restraints or improperly restrained in accordance with state and federal laws (torn or frayed seat belts in use) with or without an incident and/or injury with no medical attention or with medical attention as a precaution	No restraints or not restrained in accordance with state and federal laws with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury
Driver shall have a current driver's license	If Informal Provider does not provide transportation	Informal Provider does not provide transportation	If planning to provide transportation in the future	N/A	Driver does not have a driver's license and is providing transportation with no incident or injury	Driver does not have a driver's license with an incident and/or injury	Incident resulting in death, extreme or permanent injury

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
Written authorization for the child to receive emergency medical treatment shall be maintained in the vehicle	If documentation is inaccessible during visit	Informal Provider does not provide transportation	If planning to provide transportation in the future; Incomplete emergency medical information for less than 50% of transported children *If TA documented on previous visit, move to Low Risk	Incomplete emergency medical information for 50% or more of transported children; No emergency medical information for at least one transported child	Missing/incomplete emergency medical information for all children transported with no incident or injury	No emergency medical information on the vehicle with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Child(ren) shall never be left unattended in a vehicle	If not observed during the visit	Informal Provider does not provide transportation	If planning to provide transportation in the future	N/A	N/A	Child(ren) left on a vehicle unattended	Incident resulting in death, extreme or permanent injury
Additional Non-Core CCDF HEALTH & SAFETY STANDARDS							
Immunizations			Some immunization records	No Immunization records			
Appropriate Disposal of Bio contaminants				No Policies/Procedures on how to dispose of items containing body fluids			
Prevention of infectious Diseases				Health & Hygiene practices; Policies & Procedures			

Health & Safety Core Standards for informal providers receiving subsidy	NE	NA	Technical Assistance	Low Risk	Medium Risk	High Risk	Extreme
				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
Policies and Procedures <ul style="list-style-type: none"> • Exclusion of Children with contagious illness; notification of parents in the event their child becomes ill while at the facility; • The notification of all parents of enrolled children when a reportable contagious illness is present in the facility? • The prevention of and response to food and allergic reactions? • Emergency preparedness and response? • The handling and appropriate disposal of bodily fluids and storage of hazardous materials (soiled clothing and bedding) • Recognition and reporting of child abuse and neglect? • Has the program reported serious injuries/incidents? 				If "No" is selected in any area, 1 point will be added to the Non-core standard overall			
Prevention & Response to Food and Allergic Reactions				No Policies and Procedures and no allergies documented for children that have allergies			
Emergency Preparedness and Response Planning				No Policies/Procedures for Emergency Preparedness or Response			
Pediatric First Aid & CPR				All staff do not have First Aid & CPR within 90			

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				Non-compliance = 1 pt.	Non-compliance = 2 pts.	Non-compliance = 6 pts.	10 points - Potential CAPS Dismissal
				days of employment			
Recognition & Reporting of Child Abuse				No Policies/Procedures for recognition or reporting of Child Abuse/Neglect			
Health & Safety Orientation Certificate				All Staff do not have Health & Safety Orientation Certificate within 90 days of employment			
Annual 10 hours of Health & Safety Training				All Staff have not obtained 10 hours of health & safety training annually			
Reporting Serious Injuries				Program did not report a serious injury			