

Healthy Child Care Lincoln

Health and Safety Checklist with References

Child Care Center:

Director:

Address: Phone:

Date: _____

This Health and Safety Checklist includes references to local, state and national health and safety standards for each item. References are cross-referenced from: *Caring for Our Children: National Health and Safety Performance Standards, 3rd Edition (CFOC)*; Environmental Rating Scales (ITERS-R, Infant/Toddler Environment Rating Scale- Revised Edition; ECERS-R, Early Childhood Environment Rating Scale – Revised Edition); Nebraska DHHS Regulations, Title 391 Chapter 3; Lincoln Municipal Code Chapter 8.14.

Center Director: Email:

Hours/Days of operation: For Profit / Non-Profit

Licensed Capacity: _____ Ages Served: _____

Numbers of children with special health needs: _____ Special needs: _____

Number of children with food allergies: _____

Staff: _____ Fulltime _____ Part-time

Meals Served: _____ B _____ AM _____ L _____ PM _____ S

_____ Brought from home _____ Prepared on site _____ Catered by: _____

Child Care Subsidy: Y / N

Pets: Y / N Type:

Transportation Provided: Y / N Schools: _____

Field trips: _____

Water Play or Swimming activities: _____

Nebraska DHHS Regulations

TITLE 391 CHAPTER 3

3-006.15

AGE OF CHILDREN	STAFF:CHILD RATIO
6 WEEKS TO 18 MONTHS	1:4
18 MONTHS TO 3 YEARS	1:6
3 YEARS	1:10
4 AND 5 YEARS	1:12
SCHOOL-AGE	1:15

Caring For Our Children

STANDARD 1.1.1.2

AGE OF CHILDREN	STAFF:CHILD RATIO	MAXIMUM GROUP SIZE
≤ 12 MONTHS	1:3	6
13-35 MONTHS	1:4	8
3 YEARS	1:7	14
4 YEARS	1:8	16
5 YEARS	1:8	16
6-8 YEARS	1:10	20
9-12 YEARS	1:12	24

Assessment Codes

C	Completely meets standard
P	Partially meets standard
N	Does not meet standard
NA	Standard is not applicable
NO	Not observed

References

CFOC3	Caring for Our Children: National Health and Safety Performance Standards 3 rd Edition, Standard Number
ITERS	Infant/Toddler Environment Rating Scale – Revised Edition, item number(s)
ECERS	Early Childhood Environment Rating Scale – Revised Edition, item number(s)
NE 391	Nebraska Department of Health and Human Services Title 391 Chapter 3 Regulations Governing Licensure of Child Care Centers
LMC 8.14	Lincoln Municipal Code Chapter 8.14 Child Care Programs

***Items in Red and marked with an * should be observed during classroom assessment if possible.**

A separate National Program for Playground Safety (NPPS) assessment is available upon request.

#	Item	C	P	N	NA NO	Notes:	CFOC3	ITERS	ECERS	NE 391 LMC 8.14
FACILITY SITE										
*1	Facilities are located on a well-drained site, free from hazards, in areas protected from: high air pollution, loud or constant noises, heavy traffic, unsafe buildings, deep excavations, radiation or radon hazards, pits, abandoned wells, other risks of entrapment, or any other unsafe or harmful environmental elements. Walkways provide access for people with disabilities and young children with minimal risk of injury.						5.1.1.5	11	14	3-003.01
A. ARRIVAL/DEPARTURE										
*1	A designated plan is in place for safe pick-up & drop-off points in the vicinity of the facility.						5.1.6.1	11	14	
*2	Children are supervised by an adult while boarding and exiting all vehicles.						6.5.2.1	11	14	
*3	All parents/guardians and authorized persons will sign their children in and out on a daily basis.					System Used:	9.2.4.10			
*4	Reasonable and accessible accommodations are made for facility and classroom entrances.						5.1.1.4 5.3.2.2	1, 32	1, 37	
*5	Security measures to prevent entry of potentially threatening individuals are in place and documented in center policy.						5.1.4.4	None	none	
*6	Daily health check includes personal greeting, information gathering and is performed by a skilled caregiver.						3.1.1.1	6, 10	none	
7	Decisions are made upon a child's arrival at the center and throughout the day regarding need for exclusion of ill children based on current, national pediatrics (AAP/CDC) guidelines.						3.6.1.1	10	13	
*8	Staff and children wash hands upon arrival. (or hand sanitizer is used for children >24m)						3.2.2.1 3.2.2.5	10	13	
9	No child will be released to anyone without prior written consent from their parent/guardian. Identification is required for authorized persons prior to release.						9.2.4.8 9.2.4.9			3-006.12
10	Illness symptoms of children/staff are tracked daily.					Health department is notified when:	Appendix E			
B. INDOOR ENVIRONMENT- Classrooms/Large Motor Area										
*1	Child:Staff ratio and Maximum group size met.						1.1.1.2	25	30	3-006.15
*2	All furnishings are sturdy, clean and in good repair.						5.3.1.1	2	2	3-006.31
*3	Tables and chairs for children allow feet to be on a firm surface and the table to be between waist and shoulder.						5.3.1.3	2	2	

#	Item	C	P	N	NA NO	Notes:	CFOC3	ITERS	ECERS	NE 391 LMC 8.14
INDOOR ENVIRONMENT cont.										
*4	Surfaces where activities related to food or toileting/diapering are done are non-porous for easy cleaning and sanitation.						5.3.1.4	7, 9	10	3-006.31
*5	Passageways, stairs and exits are free from obstacles that might cause injury or obstruct egress. All passageways and activity areas are well lighted for their use.						5.1.4.3	11	1, 14	
*6	Securely fastened handrails are available on both sides of ramps and steps at child and adult level. (Handrails at maximum height of 38 inches for children.) Steps have a non-skid surface. Raised platforms, landings, balconies, lofts, porches or similar structures are protected by railings or panels.						5.1.6.6 5.1.5.2	11	14	
*7	Center has at least one operable telephone and a published telephone number.						5.3.1.12	11	14	3-006.30
*8	Center has a phone or intercom system to communicate with individual classrooms and the playground.						5.3.1.12	35	40	
*9	Water that may be in direct contact with children is no more than 120 degrees F.						5.2.1.14	7, 11	14	3-007.02B
*10	Garbage is disposed of in a manner that minimizes odor and transmission of disease. Containers, both indoor and outdoor, are watertight, have tight fitting covers and are fly and rodent-proof.					Garbage is taken out: _____ Recycling: Y/N	5.2.7.3			3-006.31
*11	All electrical outlets in children's reach are modified or covered for shock protection.						5.2.4.2.	11	14	3-006.32
*12	Products and toys recalled by CPSC (Consumer Products Safety Commission) are not in use. Provider has system to keep up-to-date about product recalls. (www.cpsc.gov)						5.3.1.1	11	14	
*13	Plants in any part of child care facility that is accessible to children are nontoxic.						5.2.9.10	11	14	
*14	Only arts and crafts materials that are labeled nontoxic are used in the child care facility and caregivers closely supervise all children using art materials. Art materials are properly cleaned up and stored in original, labeled containers.						5.1.3.3	11, 17, 25	14, 30	
*15	Adult purses/backpacks are out of reach of children.						5.5.0.1	11, 34	39	
*16	Room temperature is maintained at 65 - 75 degrees F during winter months and 68 - 82 degrees F during summer months. If indoor temperature exceeds 82 degrees in a child care space, a means of mechanical air circulation must be operating.						5.2.1.2	1	1	3-006.31A
*17	The ambient noise level does not interfere with the ability to be clearly heard and understood in a normal conversation without raising one's voice.						5.2.3.1	1, 12	1	
*18	There are no persistent moist areas on walls, floors or ceilings.						5.3.1.6	1	1	3-006.31A
*19	Peeled or damaged paint or damaged plaster is not permitted on indoor or outdoor surfaces in the child care facility.						6.2.5.1 5.3.1.1	1, 11, 16	1, 8, 14	3-006.31A
*20	Air quality: There are no odors or fumes (for example, tobacco, mildew, urine/excrement, chemicals, air fresheners).						5.2.1.2	1	1	3-006.31A
*21	Air quality: A means of ventilation (windows or air handler) circulates fresh air where children spend more than one hour at a time.						5.2.1.1 5.2.1.2	1	1	3-006.31A

#	Item	C	P	N	NA NO	Notes:	CFOC3	ITERS	ECERS	NE 391 LMC 8.14
INDOOR ENVIRONMENT cont.										
*22	All windows in areas used by children under 5 years of age are constructed, adapted or adjusted to limit the exit opening accessible to children to less than 3.5 inches, or are otherwise protected with guards that prevent exit by a child, but do not block outdoor light. (Windows & guards are equipped to enable staff to release the guard and open the window fully when emergency escape or rescue is required.)						5.1.3.2	11	14	
*23	Glass windows and glass door panels within 36 inches of the floor are equipped with a vision strip or other visual identification placed on glass.						5.1.3.4	11	14	
*24	Children's clothing, bedding and other personal items are stored to prevent contact that spreads infectious disease.						5.5.0.1 5.5.0.2	8	11	3-006.32E
*25	If same sink is used by children or adults for hand washing after toileting/diapering and food related routines (including tooth brushing) or other purposes (e.g., wash toys), it is sanitized (sink and faucets) after diapering/toileting use.						3.3.0.1	7, 9	12	
*26	All materials used in a sensory table should be nontoxic and should not be of a size or material that could cause choking. Sensory table activities should not be used with children under eighteen months of age.						6.2.4.3			
*27	Indoor climbing equipment is over surfacing that extends at least 6 feet on all sides around the structure and meets fall height ASTM standards.						6.2.1.1 6.2.3.1 app. Z	11	7	
*28	Gross motor equipment is in good repair and suitable for age and ability of children.						6.2.1.1	16	8	
*29	Adult staff are present and provide attentive direct supervision. Children are counted and documentation is noted.						6.2.1.1	25	29	3-006.19
*30	Supervision is at arms-length when children are on climbing equipment and by line of sight everywhere else.						2.2.0.1	4, 11, 25	29	
*31	Staff use positive, age appropriate discipline methods effectively.					Discipline methods used:	9.2.1.6 2.2.0.6	28	31	3-006.20
*32	The equipment (chairs, tables, toys, toilets, sinks) provided for children is size-appropriate or adapted for them.						5.3.1.3 5.4.1.7 5.4.1.10	2, 9, 20	2	
*33	Play equipment and materials appropriate to the developmental needs, individual interests, cultural diversity and ages of the children are provided in sufficient amount and variety to avoid excessive competition and long waits for use.						2.1.2.3 2.1.3.2 2.1.3.3 2.1.4.1 6.2.1.1 6.2.1.3	14-24	15-28	
*34	If communal water play occurs, fresh water is changed before children who have not been playing in the water come to the activity or freely flowing water is used. Close supervision is provided to prevent children from drinking the water. Children's hands are washed after water play.						6.2.4.2	21	None	
*35	Except for fish which need no special approval, pets or visiting animals are certified by a veterinarian as suitable and receiving care necessary for contact with children. Reptiles and amphibians are not allowed as classroom pets.						3.4.2.1 3.4.2.2 3.4.2.3	None	None	3-006.32 C-D

#	Item	C	P	N	NA NO	Notes:	CFOC3	ITERS	ECERS	NE 391 LMC8.14
C. SPECIAL NEEDS										
1	A Special Care Plan, IEP or IFSP is available, used for planning and carrying out care, and kept on file for any child with special healthcare, developmental or behavioral needs.						1.4.2.2 9.4.2.2 9.4.2.4 8.4.0.3 8.4.0.4	32	37	
2	Community resource lists for the family of a child who may have special needs are available for parents and staff persons.						1.4.2.2 9.4.1.19	32	37	
3	Reasonable and accessible accommodations are made for facility entrance, classroom(s), bathrooms, furniture and equipment for children and adults with special needs.						1.4.2.1 1.4.2.2 5.3.2.2	1, 9 16, 32	1, 2, 37	
D. MEDICATIONS: Do any children receive medications while in care? Y / N										
1	Any staff who gives or applies medication has been trained in and applies the “Five Rights”: right child; right medicine; right amount; right time; right route.						3.6.3.2	10	14	3-006.27A
*2	All prescription and non-prescription medications must be kept in their original container in locked storage. Separate locked storage must be provided for medications requiring refrigeration. Over-the-counter, non-toxic ointments (e.g., lip balm, petroleum jelly, sun screen and diaper ointment) must be kept out of the reach of children.						3.6.3.2	10	14	3-006.27G
*3	Emergency medications (e.g., epi-pens, nebulizers, inhalers) can be accessed quickly by all staff who care for children who have prescribed these medications. Emergency medications are taken along on field trips or any time the child is being transported.					Emergency meds are stored:	9.2.3.9 6.5.1.1			
4	Expired medications are returned to the parent/guardian for proper disposal. If child in no long in care and the parent cannot be reached, medications will be disposed of properly. (www.leftovermeds.com)						3.6.3.2	10	None	3-006.27D 3-006.27G
5	Medications are accompanied by administration instructions. Only trained staff will administer medication. Written documentation will be kept. Any error in the giving or applying of medication must be reported to the parent.						3.6.3.2 3.6.3.3	None	None	3-006.27D
E. DIETS										
*1	The names of children with special dietary needs and a description of their needs (including specific food allergies) are posted in all areas where an affected child may be offered food.						4.2.0.10	7	10	3.006.12
2	Food/beverage substitutions made in case of allergies meet the nutrient combination of the food/beverages they replace.						4.2.0.8	7	10	
3	Facility strives to be “peanut-free” (no peanut products are served or used in art projects).						4.2.0.10			
F. NAPS/REST										
*1	Clean individually assigned cots, mats, play yards or cribs are used for each child who spends more than 4 hours per day at the facility. Federally approved cribs or play yards are used for children < 1 year of age						5.4.5.1	8	11	3-006.22B
2	Cots/mats/cribs are covered with material that is easy to clean and sanitize and are cleaned at least weekly or between users.						5.4.5.1	8	11	3-006.22B
3	All cots/mats/cribs/playpens must be separated with at least 3 feet of space whenever in use.						5.4.5.1	8	11	3-006.22B

#	Item	C	P	N	NA NO	Notes:	CFOC3	ITERS	ECERS	NE 391 LMC8.14
G. ORAL HEALTH										
1	Facility has dentist's name, address and phone number on file for each child						9.2.3.6	None	None	
*2	Toothbrushes are labeled with the child's name and stored to avoid contamination.						3.1.5.2 5.5.0.1	10	13	
3	All children (3 years and older) brush their teeth or have their teeth brushed at least once a day. Children under 3 years of age have gums and/or teeth wiped with a disposable cloth or gauze or brushed by a caregiver at least once a day.						3.1.5.1	10	13	
*4	If tooth brushing is not possible, children have a drink of water to rinse their mouths.						3.1.5.1	None	None	
*5	Children do not lie down with a bottle or sippy cup. Children are not permitted to walk around with a bottle or a sippy cup.						3.1.5.1 4.2.0.7	7	None	
H. CLEANING, SANITIZING AND DISINFECTING										
*1	Products used to Clean: _____ Sanitize: _____ Contact time: _____ Disinfect: _____									
*2	Cleaning chemicals are kept in locked storage separate from food/medicine. Disinfectants used on diapering surfaces are out of reach of children.						5.2.9.1 5.2.9.10	11	14	3-006.32E
*3	Sanitizer and Disinfectant spray bottles and solution buckets are labeled with product name and instructions.					Name only				
*4	A schedule for routine frequency of cleaning and sanitation in the facility will be posted and followed. This frequency will be increased whenever there are outbreaks of illness, there is known contamination, visible soil or when recommended by the health dept.						3.3 5.4.1.8 Appen. J Appen. K	7, 9, 10	11, 12, 13	
5	Staff are assigned cleaning responsibilities. Outside staff clean the center: Y / N									
I. HAND HYGIENE										
*1	Hand washing procedures are posted at all hand washing sinks, including food preparation and art sinks.						9.2.3.10	None	None	
*2	Children's hand wash sinks are at child's level or accessible with a step stool						5.4.1.10	9	12	3-007.04
*3	Staff properly wash hands with liquid or foam soap and running water 1. Upon arrival into classroom 2. Before preparing, serving, or eating food 3. After toileting or assisting a child with toileting, or diapering a child 4. Before and after giving medication 5. After cleaning up bodily fluids (e.g., blood, vomit, diarrhea, wiping noses) 6. After coming in from outside 7. Anytime they are visibly soiled					# of staff observed correctly hand washing__ Infant teacher washed own hands after diapering and before serving food # of children observed correctly hand washing _____	3.2.2.1 3.2.2.2 4.9.0.2	7, 9, 10	10, 12, 13	3-006.23B 3-006.27F
*4	Children wash hands with liquid or foam soap and running water: 1. Before eating									
*5	2. After diaper change or using the bathroom									
*6	3. After coming in from outside									
*7	4. After water or messy play									
*8	5. Anytime they are visibly soiled									

#	Item	C	P	N	NA NO	Notes:	CFOC3	ITERS	ECERS	NE 391 LMC8.14
J. FOOD PREPARATION/EATING/SANITATION (18m – 13 y)										
*1	Meals and snack menu plans meet the Child and Adult Care Food Program (CACFP) guidelines. A current weekly menu of all food and beverages served in the program is posted and/or sent home.						4.2.0.3 9.2.1.4	7	10	3-006.28
*2	The operator or person in charge of food preparation holds at least a Level III Food Handlers Permit.									L.M.C. 8.14.035
*3	All perishables, including food brought from home, are discarded if left out of the refrigerator for more than two hours.						4.9.0.4	7	None	

*4	Any milk or juice remaining in a cup that has been fed to a child and not been refrigerated is discarded if not consumed by the child within an hour.					4.3.1.3 4.3.1.5	7	None	
*5	A separate hand wash sink is available and used in the food preparation area.					4.8.0.5			
*6	Food preparation areas are separate from play, bathroom and diaper changing areas.					4.8.0.1 5.2.2.1 5.1.2.1 5.4.1.2	7	10, 12	
*7	Food preparation and eating areas, including counters and tables are cleaned before and after food preparation and meals. Counters/tabletops are sanitized after cleaning.					3.3.0.1 4.8.0.3 Appen. K	7, 10		
*8	Refrigerators and freezers have a thermometer and are maintained at a temperature equal to or less than 41° F refrigerators and 0° F for freezers.					4.8.0.6 4.9.0.3	7	12	
*9	Children <4 years old do not have food that causes choking, even if brought from home.					4.5.0.10	11	None	
*10	Sanitary drinking water is available indoors and outdoors for all children throughout the day.					4.2.0.6	7	None	
11	All foods brought from home to be shared are either whole fruits or commercially prepared packaged foods that are labeled with the ingredients and safe date for use.					4.6.0.1	None	None	

#	Item	C	P	N	NA NO	Notes:	CFOC3	ITERS	ECERS	NE 391 LMC8.14
K. INFANT/TODDLER AREAS										
*1	Toys and objects have diameters $\geq 1 \frac{1}{4}$ " and lengths $\geq 2 \frac{1}{4}$ ".						6.4.1.2	11	N/A	3-006.22A
*2	Staff use proper body mechanics when lifting and picking up children and heavy loads (bend at knees, no twisting, push don't pull, get assistance)						5.3.1.7	9	N/A	
*3	No infant walkers or other products/toys recalled by CPSC are present.						5.3.1.1 5.3.1.10	11	N/A	
*4	Open physical space provided indoors for active play. Equipment such as swings, infants seats or car seats are NOT used to confine children for more than 30 minutes.						6.1.0.2	16	N/A	
*5	There is a designated area (sink, container), out of children's reach, for mouthed or contaminated toys.						3.3.0.2	10	None	
INFANT/TODDLER DIAPERING AND TOILETING										
*6	Staff check diapers for wetness and feces at least hourly and visually inspect at least every 2 hours and whenever child exhibits behavior to suggest need.						3.2.1.3	9	N/A	3-006.23B
*7	A complete and accurate diaper-changing protocol is posted in diaper-changing areas and followed by staff..						3.2.1.4	None	N/A	
*8	A designated area only used for diapering is used. Gloves are used for diapering.						3.2.1.4	9	N/A	
*9	Soiled diapers are disposed of directly into a covered, plastic-lined, hands-free receptacle. Soiled clothing is placed in a plastic bag and stored in the child's cubby for parent pick-up.						5.2.7.4 3.2.1.4	9	N/A	
*10	No potty chairs are used unless a potty chair is required by a child with special needs. If used, potty chairs are emptied into the toilet after each use and then cleaned and disinfected in a sink not used for hand washing or food prep.						5.4.1.7	9	12	
*11	Diaper-changing surfaces are at adult height, are sturdy and in good repair. Surfaces are water-resistant, non-absorbent and smooth.						5.3.1.1 5.4.2.5 5.4.2.6	9	N/A	
*12	After each use, diaper-changing surfaces are cleaned, disinfected and allowed to air dry or wiped dry after the required contact time for the EPA registered disinfectant used.						3.2.1.4 3.3.0.1 5.4.2.6 Appen. K	9	N/A	3-006.23B
*13	Children <3 years of age, wash or have their hands washed by a staff person with liquid/foam soap and running water (for infants, a wet wipe or soapy paper towel) after diapering/toileting.						3.2.1.4	9	N/A	
*14	Separate hand wash sinks are marked and available for use near all diapering/toileting areas.						3.2.1.4 3.2.2.1 3.2.2.2	9	N/A	
*15	Staff wash their own hands with liquid or foam soap and running water after each diapering/toileting/diaper check of a child.						3.2.1.4 3.2.2.1 3.2.2.2	9	N/A	3-006.23B

#	ITEM	C	P	N	NA NO	Notes:	CFOC3	ITERS	ECERS	NE 391 LMC8.14
*INFANT/TODDLER FOOD PREPARATION/EATING										
16	Bottles with formula or human milk stored in them are labeled with the individual's child's name and date prepared.						4.3.1.5	7	N/A	3-006.29A
17	Formula is provided by the center. Breast feeding is encouraged and supported.					Bottles are: ___ Prepared at home ___ Prepared at center		None	N/A	
18	Human milk in the freezer is labeled with the individual child's name and dated within 3 months of the observation visit.						4.3.1.5	7	N/A	3-006.29A
19	Staff wash hands before bottle/food prep and serving.									
20	Staff who are familiar with the infant feed him/her whenever he/she seems hungry.						4.3.1.2	7, 37	N/A	
21	Any milk remaining in a bottle or cup (formula, human milk or other milk) or juice that that has been fed to a child is discarded if not consumed by the child within an hour.						4.3.1.3 4.3.1.5	7	None	
22	If bottles, caps or nipples are reused, they are washed in a dishwasher or washed, rinsed and sanitized.						4.3.1.5 4.3.1.10	7	N/A	
23	Human milk is thawed under running water or in the refrigerator and warmed in water no warmer than 120° F. (not heated in the microwave or in boiling water)						4.3.1.5	7	N/A	
24	Infant foods and formula are not heated in a microwave oven. If warmed, heated in water no warmer than 120° F. Infant food is served from bowls not food container.						4.3.1.9 4.3.1.12	7	N/A	
25	Infants too young to sit up are held by an adult while being fed. Toddlers and infants who are able to sit up eat sitting up.						4.3.1.8 4.5.0.3	7	N/A	3-006.23
*INFANT/TODDLER SLEEPING/NAPPING										
26	Cribs and play pens must be federally approved. Mattresses must fit tightly to the frame and waterproof. Mattresses must be covered with a fitted sheet.						5.4.5.2 3.1.4.1	8, 11	N/A	3-006.22B
27	No soft bedding (pillows, bumpers, blankets, comforters, or loose objects e.g., stuffed toys) are accessible to children under 12 months of age in their sleeping area(s). If additional layers are desired during naps, sleep sacks are used.						3.1.4.1	8	N/A	3-006.22B
28	All infants <12 months of age are put to sleep on their backs. Sleeping in swings/car seats/infants seats is not permitted. (Physician's note is required for alternate sleep position.)						3.1.4.4 3.1.4.1	8, 11	N/A	3-006.23
29	Infant is dressed in clothing that does not let the infant overheat during sleep.						3.1.4.1	None	N/A	
30	Infant/toddler heads are always uncovered and observable during sleep. Caregivers give direct visual supervision when infants are sleeping.					Sleep chart used: Y / N	3.1.4.1 2.2.0.1	8, 25	N/A	
31	Cribs, playpens, cots and mats are marked for individual use and sanitized at least weekly. (Sleep environments are cleaned and sanitized daily if not individually marked.)						3.3.0.4 3.3.0.5			3-006.22B
32	Cribs, playpens, cots and mats are spaced at least 3' a part when occupied.						5.4.5.1	8		3-006.22B
33	With parent's consent , a clean pacifier, without a string or ribbon attached, is given to the infant to suck when put down to sleep. The infant is not forced to take the pacifier nor is the pacifier reinserted once asleep.						3.4.6.1	None	N/A	

L. OUTDOOR

1	Number of adults _____ Number of children _____ Outdoor staff/child ratio: _____									
2	Children go outside every day when weather permits. (Child Care Weather Watch guidelines are used to determine outdoor play: https://www.neushi.org/student/programs/attachments/shi_weatherwatch.pdf Children are appropriately dressed for the weather.						3.1.3.2	10, 16	13	
3	Sunscreen, in addition to other sun safety measures, is applied to all exposed areas of skin May through September. Parent/guardian written permission to apply sunscreen is on file.						3.1.3.2 3.4.5.1	10	13	
4	Staff are stationed where the children are visible to them and staff are attentive to the children's play in designated areas.						2.2.0.1 6.2.1.1 6.1.0.5	11, 25	14, 29	
5	Equipment for active play fosters physical activity and areas are separated with age appropriate equipment.						6.2.1.3	16	8	
6	Outdoor areas are maintained and are clean and safe; no trash, broken equipment, sharp objects, animal excrement present.						5.3.1.1 5.7.0.2	11	14	3-007.03
7	All children wear helmets when riding bicycles, tricycles or other riding toys.						6.4.2.1 6.4.2.2	None	None	
8	Outdoor stationary playground equipment is stable and anchored. (Equipment does not wobble or tip when shaken.)						6.2.1.3 6.2.1.4 6.2.1.6	11	14	3-007.03
9	Outdoor climbing equipment is located away from traffic areas on the playground. The area under and around climbing equipment from which children might fall is over cushioning material (e.g., rubber matting, rubber or wood mulch, pea gravel).						5.3.1.1 6.2.1.1 6.2.3.3 6.2.3.1 App. Z	11	7	3-007.03
10	The outdoor play area is enclosed with a fence directly adjoined to the building or has a DHHS approved plan to address safety.						6.1.0.8			3-007.03
11	Wading pools are not used. Water play is limited to sprinklers, spray bottles or other free-flowing water methods.						6.3.5.3			3-006.25

M. TRANSPORTATION/FIELD TRIP POLICIES & PROCEDURES

1	No child is ever left alone in a vehicle.						6.5.1.1			3-006.26
2	All children transported must be properly secured in the appropriate restraint system as required by Neb. Rev.Stat. §§ 60-6.267 and 60-6.268. Age and size-appropriate child restraint systems should be used for children < 80 lbs and < 4'9" tall. All children under the age of thirteen should be transported in the back seat of a car. Car safety seats used have not been recalled by the CPSC and are not past the manufacturer's expiration date or have been involved in a crash.						6.5.1.1 6.5.2.2			3-006.26
3	Drivers are at least 21 years of age and maintain a valid certificate of completion of the "Safe Kids Buckle Up" program in addition to CPR and First Aid certification.						6.5.2.2			3-006.10C
4	The driver does not play the radio or use ear phones to listen to music while operating the vehicle. Cell phones or other portable device use is prohibited while the vehicle is in motion. A cell phone is in the vehicle and used only when the vehicle is stopped and only in emergency situations.						6.5.2.5			
5	Attendance and emergency contact information is kept in the vehicle for all children being transported. Emergency medications (e.g., epi pens, asthma inhalers) and a first aid kit are available during transport and excursions.						6.5.1.1			

#	Item	C	P	N	NA NO	Notes:	CFOC3	ITERS	ECERS	NE 391 LMC8.1 4
N. EMERGENCY SUPPLIES, POLICIES AND PROCEDURES										
*1	First Aid: The program has at least one fully equipped, readily available first aid kit for use onsite at the facility that is inaccessible to children.					Located:	5.6.0.1	11	14	3-006.30F
2	First Aid: The program has a separate fully equipped first aid kit for field trips that is inaccessible to children.						5.6.0.1			
3	First Aid: A list of "Situations Requiring Immediate Medical Attention" is posted and used by caregivers when making decisions.						Appen. P	None	None	
4	An up-to-date Emergency Information Form (EIF) is kept on file for any child with special healthcare needs.						9.4.2.2 App. BB	None	None	
*5	Emergency telephone numbers are posted for emergency services (for example, 911, poison control, fire department, police and children's protective services) and facility has written emergency policy/procedures.						5.3.1.12 9.4.1.6	11	14	3-006.30
*6	Emergency/evacuation procedures are known by caregivers and are posted in each classroom for fire, natural disasters (floods, tornadoes) and other locally relevant incidents, e.g., prison/nuclear related, custody/intruder issues, terrorist threats.						9.2.4.3 9.4.1.6	11	14	3-006.30D
7	Written procedure exists and is known by staff about how to evacuate children with special needs (e.g., infants, children with disabilities).						5.1.4.2	11, 32	14, 37	3-006.30D
8	A 48-hour supply of food and water is stored for each child and staff member to be used in the event of a natural disaster or event that requires shelter in place. Facility should consult with local health authority or local emergency preparedness agency for more information on disaster preparedness.						4.9.0.8	None	None	
9	Emergency supplies (e.g., first aid kits, diapers, water, emergency contacts) are readily available and taken along on emergency drills.					Contact info is kept: _____	5.6.0.1			
* 10	An evacuation map is posted in each classroom that shows the path of evacuation to a location immediately outside the building and to a shelter within the building if shelter-in-place is required.						9.4.1.6	None	None	3-006.30C
11	There is a designated evacuation area for shelter-in-place, shelter within walking distance and shelter outside the neighborhood each of which is mentioned on posted evacuation maps.						5.1.4.1 9.2.1.3	None	None	3-006.30D
12	Emergency evacuation procedures are practiced at least monthly, conducted at different times of day, during different activities and at least one practice of the alternative shelter-in place and shelter within walking distance options. Written record of all evacuation drills is kept.						9.2.4.5	None	None	3-006.20B
13	There is a smoke detector system, alarm or sprinklers in working order in each room or place where children spend time.						5.2.5.1	None	None	
14	Radon detection devices have been used and the result of detection known to determine radon levels in all lower level areas of facility.						5.1.1.7 5.2.9.4	None	None	
15	Carbon monoxide detectors are placed in all areas where combustion equipment is located (furnace, stove, water heater areas).						5.2.1.10	None	None	

#	Item	C	P	N	NA NO	Notes:	CFOC3	ITERS	ECERS	NE 391 LMC8.14
o. LEADERSHIP and MANAGEMENT										
1	Program has written health and safety policies as specified in Caring for Our Children that are reviewed at least annually with staff and parents.						1.4.2.1 9.2.1.1	33	38	3-006.14
2	Program obtains information that ensures up-to-date status of each child's immunizations and periodic preventive health assessments as well as documentation of any special health care needs and instructions for special care.						9.2.3.4	None	13	3-006.18
3	Staff health records demonstrate the facility has addressed health issues that could affect the ability of adults to perform their roles. Emergency contacts and records of allergies/medical conditions requiring special care are on file for all staff.						1.7.0.1 1.7.0.2 7.2.0.3 5.3.1.7 7.3.10.1 7.6.3.2 App. E	None	None	
4	Program uses a Health and Safety Checklist for routine surveillance and preventive action at least monthly (See Appendix 3 of Healthy Young Children (NAEYC) or Appendix Q of Model Child Care Health Policies (AAP).						MCCHP App. Q	None	None	
5	Program's health exclusion policy and practices match the current recommendations of the American Academy of Pediatrics in Managing Infectious Diseases in Child Care and Schools.						9.2.3.2	None	None	3-006.17
6	Incident/injury reports are used and routinely reviewed on at least a quarterly basis that document when an injury or incident occurs that requires emergency or medical attention, if a serious breach in supervision of a child occurs (e.g., child is lost or missing). Copies of such reports go to the family, the child's file, to an injury log/file, and if required, to DHHS.						9.4.1.9	None	None	
7	Program has and follows a Safe Sleep Policy consistent with the current recommendations of the American Academy of Pediatrics that addresses sleep positioning, pacifier use, sleep environment and supervision.						3.1.4.1	None	N/A	
8	Director and ____% staff have completed Safe with You training.									3-006.08A 3-006.09A
9	Director has completed child care management training developed by the Early Childhood Training Center.									3-006.08B
10	Director and staff have completed Nebraska Early Learning Guideline training: <ul style="list-style-type: none"> Approaches to Learning Creative Arts Health and Physical Development Language and Literacy Development Mathematics Science Social and Emotional Development 									3-006.08C 3-006.09B
11	Director and staff have completed Lincoln-Lancaster County Health Department's Health and Safety training within 30 days of hire and every two years thereafter.									LMC 8.14.035
12	New staff orientation includes: <ul style="list-style-type: none"> Job duties and responsibilities Health exclusion and illness prevention (diapering, hand washing) Child abuse, neglect and sexual abuse information and reporting Nebraska Child Care Center regulations Emergency evacuation and shelter-in-place plans Center's discipline policy 									3-006.10A
13	At least one staff member with each group of children is current in First Aid and CPR						1.4.3			3-006.10E

Notes from Classroom Observations:

Date:

Items to consider:

Playground Assessment Observations:

Date: