

# Safe Environments

**BKC-EC-4**

**Participants Workbook**

## **BASIC KNOWLEDGE CURRICULUM EARLY CHILDHOOD**



2019

# Preface

## Basic Knowledge Curriculum – Early Childhood

This curriculum has been designed to give child care and early learning professionals foundational knowledge to be successful when caring for children. The information presented in the curriculum is for all professionals working in family or center-based child care and early learning programs. This basic information about concepts and skills is ideal for an entry-level staff member, but may also be beneficial for more seasoned professionals as a “refresher course.” The entire Basic Knowledge Curriculum – Early Childhood curriculum is 36 clock hours and consists of 18 sessions trainings meeting *Core Competencies for Early Childhood and Youth Development Professionals (Kansas and Missouri)* (Levels 1 and 2) and Child Development Associate Credential content areas. Participants can complete these trainings in any order. All sessions are offered by Child Care Aware® of Missouri through a local child care resource and referral agency.

For additional information about this curriculum series contact:

Child Care Aware® of Missouri 1-800-200-9017

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# ***Basic Knowledge Curriculum – Early Childhood***

## **Session Success**

### **Foundational:**

Positive Interactions with Children (*BKC-EC 1*)

Child Safety & Routine Care (*BKC-EC 2*)

Child Abuse & Neglect-Mandated Reporter (*BKC-EC 3*)

### **Safe Environments (*BKC-EC 4*)**

Guiding Children’s Behavior (*BKC-EC 5*)

Playing with a Purpose (*BKC-EC 6*)

Routines, Rituals & Schedules (*BKC-EC 7*)

### **Supporting:**

Physical Development (*BKC-EC 8*)

Language & Communication Development (*BKC-EC 9*)

Social & Emotional Development (*BKC-EC 10*)

Creative Development in Children (*BKC-EC 11*)

Cognitive Development (*BKC-EC 12*)

Promoting Physical & Mental Health (*BKC-EC 13*)

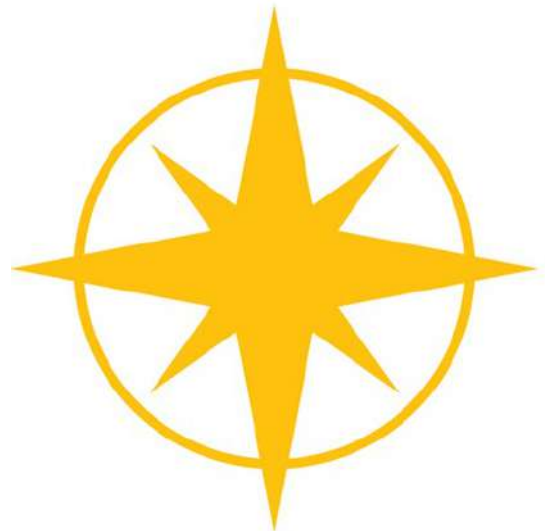
Healthy Eating (*BKC-EC 14*)

Group Interactions in Child Care (*BKC-EC 15*)

Family & Community Engagement (*BKC-EC 16*)

Promoting Cultural Awareness (*BKC-EC 17*)

Professionalism & Leadership (*BKC-EC 18*)



# Learning Objectives

**At the end of the training, participants will be able to:**

**\*These objectives relate directly to the exit assessment.**

1. Identify safety issues inside the child care program.
2. Identify safety issues outside the child care program.
3. List ways to reduce common injuries.
4. Explain how to document all injuries and notify families.
5. List items found in an appropriate First Aid Kit.

The training will meet the requirements of the *Core Competencies for Early Childhood and Youth Development Professionals* (Kansas and Missouri) and the Child Development Associate Credential (CDA) in the following content areas:

CDA	1. Planning a safe, healthy, learning environment	
	5. Managing an effective program	
Core Competencies for Early Childhood and Youth Development Professionals (Kansas and Missouri)	V. Health and Safety-Promoting Mental Health	
	2. Protecting Children and Youth	
	Level 1:	a. Recognizes and maintains safe indoor and outdoor areas.
		b. Follows safe practices.
	Level 2:	a. Assesses and adapts environments, including when away from the facility, to ensure the safety of children and youth.

# Agenda

## Safe Environments

Welcome.....10 minutes

- Shared Agreements
- Review Objectives

*Preventing Injuries from Environment* .....50 minutes

- Child Vulnerabilities
- Hazards in Environment
- Daily Health & Safety Checklist
- Preventing Injuries
- Supervision
- Reviewing & Planning

Break.....10 minutes

*Show Me Child Care Resources*

*Policies and Procedures for Accident and Injury* .....40 minutes

- Adult to Child Ratios
- Responding to Injury or Accident
- First Aid
- Medication

*Wrap Up* .....10 minutes

- Action Steps
- Review Objectives
- Exit Assessment
- Session Satisfaction Surveys
- MOPD Systems Key Functions
- T.E.A.C.H. MISSOURI Scholarship
- Online On Demand Training—MO Workshop Calendar
- *Show Me Child Care Resources*
- CDA Scholarship Project

# Action Items

Use this page to record things you plan to do, topics for further clarification and new ideas from this training.

**I WANT TO REMEMBER...**

**ACTION STEPS:**

1.

2.

# Developmentally Appropriate

## Birth to 3 years



- Naturally curious
- Learn through sensory experiences
- Put most everything in their mouths
- Learning to control their body
- Attracted to moving objects and those that make noise
- Learn about the world through physical interaction with things
- Touch, feel and explore
- Drink most anything
- Crawl into small spaces
- Do not have the ability to recognize danger
- High risk for choking, drowning, poisoning and fires.

## Children 3-5 years

- Learn about the world through physical interaction
- Touch, feel, and explore with little thought of danger
- Do not have knowledge or control of their body
- Have limited self awareness
- Get caught up in their own actions, pay little attention to things around them



# Typical Behaviors and Potential Risk of Injury



Age	Behaviors	Risk of Injury
<b>Birth to 3 months</b>	<ul style="list-style-type: none"> <li>• Begins grasping and rolling over unexpectedly</li> <li>• Needs support of head and neck</li> </ul>	<ul style="list-style-type: none"> <li>• Falls from couches, tables, changing tables and bed</li> <li>• Burns from hot liquids</li> <li>• Choking and suffocation</li> <li>• SIDS (Sudden Infant Death Syndrome)</li> </ul>
<b>4 to 6 months</b>	<ul style="list-style-type: none"> <li>• Sits with minimum support</li> <li>• Plays with open hands</li> <li>• Reaches for objects</li> <li>• Begins to put things in mouth</li> <li>• Is increasingly curious about surroundings</li> <li>• Wants to test, touch and shake objects</li> </ul>	<ul style="list-style-type: none"> <li>• Vehicle occupant injury</li> <li>• Falls</li> <li>• Burns from hot liquids</li> <li>• Choking and suffocation</li> <li>• SIDS (Sudden Infant Death Syndrome)</li> <li>• Shaken Baby Syndrome</li> </ul>
<b>7 to 12 months</b>	<ul style="list-style-type: none"> <li>• Sits alone</li> <li>• Very curious about everything</li> <li>• Crawls</li> <li>• Starts to walk</li> <li>• Explores surroundings</li> <li>• Pulls things</li> <li>• Imitates movements of adults and others</li> <li>• Begins eating solid food</li> </ul>	<ul style="list-style-type: none"> <li>• Vehicle occupant injury</li> <li>• Falls</li> <li>• Burns from hot liquids</li> <li>• Choking and suffocation</li> <li>• SIDS (Sudden Infant Death Syndrome)</li> <li>• Shaken Baby Syndrome</li> <li>• Drowning</li> </ul>
<b>1 and 2 years</b>	<ul style="list-style-type: none"> <li>• Likes to go fast</li> <li>• Is unsteady</li> <li>• Tries to reach</li> <li>• Runs</li> <li>• Walks up and down stairs</li> <li>• Likes to climb</li> <li>• Pushes and pulls objects</li> <li>• Can open doors, drawers, gates and windows</li> <li>• Throws balls and others objects</li> <li>• Begins talking, but cannot express need</li> </ul>	<ul style="list-style-type: none"> <li>• Motor Vehicle injuries</li> <li>• Falls</li> <li>• Burns</li> <li>• Poisoning</li> <li>• Choking</li> <li>• Drowning</li> <li>• Child abuse</li> </ul>
<b>3 and 4 years</b>	<ul style="list-style-type: none"> <li>• Begins making choices</li> <li>• Has lots of energy</li> <li>• Seeks approval and attention</li> </ul>	<ul style="list-style-type: none"> <li>• Traffic injuries</li> <li>• Burns</li> <li>• Play area</li> <li>• Poisons</li> <li>• Tools and equipment</li> </ul>
<b>5 years and up</b>	<ul style="list-style-type: none"> <li>• Is stronger</li> <li>• Likes to explore the neighborhood</li> <li>• Will ask for information</li> <li>• Will seek out playmates</li> <li>• Becomes involved in sports</li> <li>• Plans and carries out ideas</li> </ul>	<ul style="list-style-type: none"> <li>• Traffic injuries</li> <li>• Burns</li> <li>• Play area</li> <li>• Guns</li> </ul>

The California Child Care Health Program. (2007). Health and Safety in the Child Care Setting: Prevention of Injuries. *A Curriculum for the Training for Child Care Providers*. Berkeley, CA, USA.



# Unsafe Materials



Features of unsafe materials or objects	Notes
<ul style="list-style-type: none"> <li><input type="checkbox"/> Openings that could entrap a child's head or limbs. <u>Examples</u>: Equipment that is positioned where a child could crawl through and get stuck. Shelving with a hole in the backing where a child could get hand or fingers trapped.</li> <li><input type="checkbox"/> Elevated surfaces that are inadequately guarded. <u>Example</u>: A loft that needs railing around it or on the steps.</li> <li><input type="checkbox"/> Lack of safety surfacing and fall zones under and around climbable equipment.</li> <li><input type="checkbox"/> Mismatched size and design of equipment for the intended users. <u>Example</u>: Preschool size chairs in the toddler room.</li> <li><input type="checkbox"/> Insufficient spacing between equipment.</li> <li><input type="checkbox"/> Tripping hazards. <u>Example</u>: Loose rugs, uneven surfaces, cords in the room.</li> <li><input type="checkbox"/> Items that can pinch, cut or crush children. <u>Example</u>: Gaps between furniture and wall, spaces between bookcases, unsecured furniture, rolling toys and cribs.</li> <li><input type="checkbox"/> Toys when used inappropriately. <u>Example</u>: Anything thrown—wooden blocks, play pots, dolls.</li> <li><input type="checkbox"/> Objects with sharp points or corners. Untreated wooden toys that can cause splinters.</li> <li><input type="checkbox"/> Any item with parts that stick out or are damaged. <u>Example</u>: loose nails, bolts or rusty parts.</li> <li><input type="checkbox"/> Small parts on toys that may come apart or fall off with regular use. Anything that can be broken off and swallowed is a choking hazard.</li> <li><input type="checkbox"/> Loose strings, ribbon, cords, or straps that may cause strangulation hazards.</li> <li><input type="checkbox"/> Paint that is flaking and can be swallowed.</li> <li><input type="checkbox"/> Unsecured, imbalanced furniture that can fall over. <u>Example</u>: Top heavy</li> </ul>	

Administration for Children and Families, U.S. Department of Health and Human Services. (2015). *Caring for Our Children Basics Health and Safety Foundations for Early Care and Education.*

# Health & Safety Daily Checklist

## Health and Safety DAILY Checklist

Classroom: \_\_\_\_\_ Date: \_\_\_\_\_

Completed by: \_\_\_\_\_

Check beginning of the day	Mon	Tues	Wed	Thurs	Fri
<i>Checked before children arrive:</i>					
All entrances/exits clear of clutter, snow, ice, etc.					
Staff purses and personal items are locked out of reach of children.					
Bleach solution is labeled and inaccessible to children.					
All hygiene supplies are available (soap, paper towels, toilet paper, lined garbage can, warm water).					
Area is generally clean and clutter-free (garbage emptied, floors swept, toys and work space, bathroom clean).					
All chemicals are locked/out of reach of children.					
All electrical outlets are covered.					
Furniture and equipment is in good repair (check for broken toys, accessories, wrinkled/disrepair rugs/carpet).					
Heavy toys/items are stored on lowest shelf.					
Window cords are adjusted to prevent strangulation.					
Children's personal/nap items are kept separated (use of cubbies, bags, or storage containers).					
Tables and chairs are not stacked while children are present.					
Playground and equipment is checked for garbage, standing water and other hazards before use.					
Walk perimeter of fence for hazards (plants, trash, animals, insects)					
Diapering supplies are gathered and within reach before beginning (including a lined and covered foot operated garbage can).					
Cots/cribs are placed 2 ft apart or have barrier and assigned to a specific child or cleaned and sanitized after each use.					
Approved safety gates are used on stairways, if necessary.					
Screens, in good repair/secure and used in open windows and doors.					
First aid kit is available in each room/appropriately stocked.					
<i>Checked as children arrive:</i>					
Hands are washed by staff and children upon arrival to classroom.					
Each child has brief health check by classroom teacher (includes parent/caregiver communication).					

State of Indiana. (2018, 1 24). *Health and Safety Daily Checklist*. Retrieved from Indiana Family and Social Services Administration: <https://www.in.gov/fssa/files/HealthSafetyDailyChecklist.pdf>

# Health & Safety Daily Checklist (cont)

## Health and Safety DAILY Checklist (continued)

Classroom: \_\_\_\_\_ Date: \_\_\_\_\_

Completed by: \_\_\_\_\_

Check beginning of the day	Mon	Tues	Wed	Thurs	Fri
<b>Infant Room (additions)</b>					
All bottles have full name/date and refrigerated immediately.					
Infants always placed on their back to sleep in cribs/pack-n-plays.					
Cribs are free of soft bedding, bumper pads, pillows and stuffed toys.					
Cribs have tight fitting mattress and a secure fitted sheet.					
High chairs are in good repair and cleaned and sanitized before/after use.					
Safety restraints are used on infant seats, swings, strollers and high chairs.					

State of Indiana. (2018, 1 24). *Health and Safety Daily Checklist*. Retrieved from Indiana Family and Social Services Administration: <https://www.in.gov/fssa/files/HealthSafetyDailyChecklist.pdf>

### NOTES

# What's wrong with this picture?

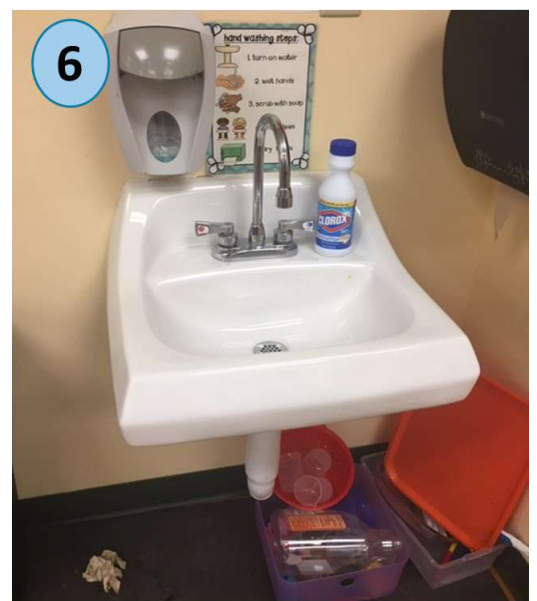
Identify the hazards and potential hazards.



Hazards:

Hazards:

Hazards:



Hazards:

Hazards:

Hazards:

**Actions to safety-proof the environment so that slips, trips and falls can be reduced or prevented -**



- Keep toys out of walkways
- Display “Wet Floor” signs after mopping
- Clean spills up immediately
- Keep rubber mats around the hand washing sink
- Keep rubber mats around sensory or water tables
- Use slip resistant rugs
- Use safety glass in windows
- Place stickers on low windows or doors to alert children

Two things you want to remember about daily checks.

**Draw or Write:**

# Adult to Child Ratios

Use age of youngest child in classroom and follow that ratio

## Child Care Centers and Group Homes

Age	Center Ratio (adult: children)
<b>Birth—2 years (mixed group)</b>	- 1:4 - maximum of 8 children in a group
<b>2 years &amp; up (mixed group)</b>	- 1:10 - with a maximum of four—2-year olds. - maximum of four—2-year olds in a mixed group, the staff/child ratio shall less than 1:8.
<b>2 years only</b>	- 1:8 - maximum of 16 children in a group
<b>3 to 4 years only</b>	- 1:10
<b>5 years &amp; up</b>	- 1:16

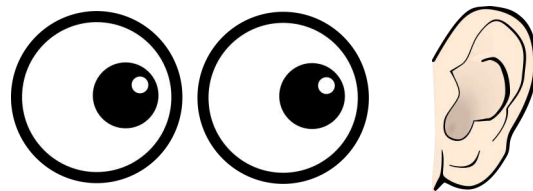
## Family Child Care Programs

Family Care Ratio— 1 adult
1:6—maximum of 3 children under the age of 2 years or 1:10—maximum of 2 children under the age of 2 years or 1:4— all children under the age of 2 years
Family Care Ratio— 2 adults
2:10—maximum of 4 children under the age of 2 years or 2:8—all children under the age of 2 years

Missouri Department of Health and Senior Services. (2018, 1 16). *Laws, Regulations & Guidelines*. Retrieved from Missouri DHSS: <https://s1.sos.mo.gov/cmsimages/adrules/csr/current/19csr/19c30-62.pdf>



# Maintaining Supervision and Ratios



Area	<i>How would maintaining proper supervision and ratios prevent injuries?</i>
<b>Block play</b>	Children at times underestimate the damage wooden blocks can cause.
<b>Bathrooms</b>	Children in the bathroom can find inappropriate things to do.
<b>Sensory/Table (Sand/Water Table)</b>	Discovery and exploration come alive at sensory tables.
<b>Nap time (Including Infants)</b>	What can happen at nap time....they are all sleeping?

# Accidents, Injuries and Emergency Medical Care



- Licensing rules require the child care educator notify the family or guardian *immediately* in any case of accident or injury.
  - Call the family or guardian for any type of bumped head. Symptoms of head injuries may not show until hours later.
  - For serious injuries seek medical attention by calling 911.
  - If the child requires emergency medical care, follow the family or guardians written instructions.
  - Complete an Accident or Injury Report.
- Information on the date and circumstance of any accident or injury must be noted in the child's record.
  - When planning for activities away from the facility, the child care educator must establish a procedure for handling emergencies.

Two things to remember about Accidents & Injuries:

**Draw or Write:**





MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
SECTION FOR CHILD CARE REGULATION  
**REPORT OF ACCIDENT, INJURY AND/OR EMERGENCY MEDICAL CARE**

**SAVE**  
**PRINT**  
**RESET**

FACILITY Unicorns and Rainbows Child Development Center		DATE 4/11/19	TIME 10:30 a.m
CHILD'S NAME Herb Bassett			
STAFF MEMBER RESPONSIBLE FOR CHILD AT TIME OF INCIDENT Krystal Ball		PERSON IN CHARGE OF FACILITY AT TIME OF INCIDENT Lilli Hammer	
OTHER STAFF MEMBERS WHO OBSERVED INCIDENT Chris P. Bacon			

**DESCRIPTION OF INCIDENT (WHO, WHAT, WHERE, WHEN, HOW, MARKS, BRUISES, ETC.)**

We were on the playground. Herb ran in front of the slide as another child was coming down the slide. The other child knocked over Herb and when they fell on the ground, their heads hit together. Herb had a small bruise at the hairline on his right forehead. He also had a red mark on his right upper thigh where the other child ran into him as he was coming down the slide.

**DESCRIPTION OF ACTION TAKEN**

Placed an ice pack on Herb's forehead where the bruise is located and his thigh where the other child came in contact. Herb complained the ice pack was too cold and would only let me hold the ice pack on his forehead for short periods of time. I am watching Herb for signs of concussion. As of 11:00 am, he is alert and playing with his friends. He will probably have a bruise on his upper right thigh.

**NOTICE TO PARENT**

METHOD Emailed Mrs. Bassett	TIME 11:00 a.m.	STAFF MEMBER Krystal Ball
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**WRITTEN REPORT DISCUSSED/GIVEN TO PARENT (CIRCLE ONE) YES NO**

<i>Krystal Ball</i> STAFF SIGNATURE	4-11-19 DATE
<i>[Signature]</i> SUPERVISOR SIGNATURE	4-11-19 DATE
<i>[Signature]</i> PARENT SIGNATURE ACKNOWLEDGING RECEIPT OF WRITTEN REPORT	4-11-19 DATE

# Best Practices for First Aid Kits

- Child Care Centers: First aid and emergency supplies should be in each classroom with a larger kit kept in the office.
- Family Child Care: First aid and emergency supplies should be in each room that is licensed with a larger kit kept in a central location of the home.
- First aid kit or supplies should be kept in a closed container, cabinet, or drawer that is labeled and stored in a location known to all staff.
- It must be accessible to staff at all times, but locked or otherwise inaccessible to children.
- If children leave the facility for a walk or to be transported, a designated staff member needs to bring a transportable first aid kit.
- Each vehicle used to transport children should have a transportable first aid kit.
- First aid kits or supplies should be restocked after use
- Inventory of first aid supplies should be conducted at least monthly
- Log should be kept that lists:
  - Date that each inventory was conducted
  - Verification that expiration dates of supplies were checked
  - Location of supplies (i.e., in the facility supply, transportable first aid kit(s), etc.)
  - Legal name/signature of the staff member who completed the inventory



# First Aid and Emergency Supplies



- Several pairs of disposable nonporous, latex-free or non-powdered latex gloves (latex-free recommended);
- Scissors;
- Tweezers;
- Non-glass, non-mercury thermometer to measure a child's temperature;
- Bandage tape;
- Sterile gauze pads;
- Flexible roller gauze;
- Triangular bandages;
- Safety pins;
- Eye patch or dressing;
- Pen/pencil and note pad;
- Cold pack;
- Water (two liters of sterile water for cleaning wounds or eyes);
- Tissues;
- Wipes
- Liquid soap to wash injury and hand sanitizer, used with supervision, if hands are not visibly soiled or if no water is present;
- Individually wrapped sanitary pads to contain bleeding of injuries;
- Adhesive strip bandages, plastic bags for cloths, gauze, and other materials used in handling blood;
- Flashlight;
- Whistle;
- Battery-powered radio (1).
- Current American Academy of Pediatrics (AAP) standard first aid chart or equivalent first aid guide such as the AAP Pediatric First Aid For Caregivers and Teachers (PedFACTS) Manual;
- Coins for use in a pay phone and cell phone;

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**When children walk or are transported to another location, the transportable first aid kit should include ALL items listed above AND the following emergency information/items:**

- List of children in attendance (organized by caregiver/teacher they are assigned to) and their emergency contact information (i.e., parents/guardian/emergency contact home, work, and cell phone numbers);
- Special care plans for children who have them;
- Emergency medications or supplies as specified in the special care plans for those children;
- List of emergency contacts (i.e., location information and phone numbers for the Poison Center, nearby hospitals or other emergency care clinics, and other community resource agencies);
- Maps;
- Written transportation policy and contingency plans.

**Poison Control Center Number: 1-800-222-1222**

## Licensing Rules for Family Day Care Homes

### 19 CSR 30-61.185 (3) Health Care-Medication

- (A) The provider is not required to administer medication but may choose to do so.
- (B) All medication shall be given to a child only with the dated, written permission of the parent(s) stating the length of time medication may be given.
- Use completed Medicine Authorization form (**PW page 21**)
- (C) Prescription medication shall be in the original container and labeled with the child's name, instructions for administration, including the times and amounts for dosages and the physician's name. This may include sample medication provided by a physician.
- Some medications require special training to safely administer. Have documentation on file that the training has been completed prior to administering the medication.
- (D) All nonprescription medication shall be in the original container and labeled by the parent(s) with the child's name, and instructions for administration, including the times and amounts for dosages.
- (E) All medication shall be stored out of reach of children or in a locked container.
- All medication should be kept in a locked container, including medication that requires refrigeration.
  - Best practice is to store each child's individual medication in a separate zip lock bag to prevent contamination or leakage on other bottles.
- (F) Medication shall be returned to storage immediately after use.
- (G) Medication needing refrigeration shall be kept in the refrigerator in a container separate from food.
- Container needs to be locked
- (H) Medication shall be returned to the parent(s) or disposed of immediately when no longer needed.
- (I) The date and time(s) of administration, the name of the individual giving the medication and the quantity of any medication given shall be recorded promptly after administration. This information shall be filed in the child's record after the medication is no longer necessary.
- Medicine Authorization form (**PW page 21**)

Missouri Department of Health and Senior Services. (2018, 1 16). *Laws, Regulations & Guidelines*. Retrieved from Missouri DHSS: <https://s1.sos.mo.gov/cmsimages/adrules/csr/current/19csr/19c30-61.pdf>

## Licensing Rules for Group Child Care Homes and Child Care Centers

### 19 CSR 30-62.192 (3) Health Care-Medication

- (A) The provider is not required to administer medication but may choose to do so.
- (B) All medication shall be given to a child only with the dated, written permission of the parent(s) stating the length of time medication may be given.
- Use completed Medicine Authorization form (**PW page 21**)
- (C) Prescription medication shall be in the original container and labeled with the child's name, instructions for administration, including the times and amounts for dosages and the physician's name. This may include sample medication provided by a physician.
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# Giving Medication

## The Six Rights:

1. The right **CHILD**
2. The right **MEDICINE**
3. The right **DOSE**
4. The right **ROUTE (by mouth, skin, eye, ear)**
5. The right **TIME**
6. **WRITE IT DOWN!**

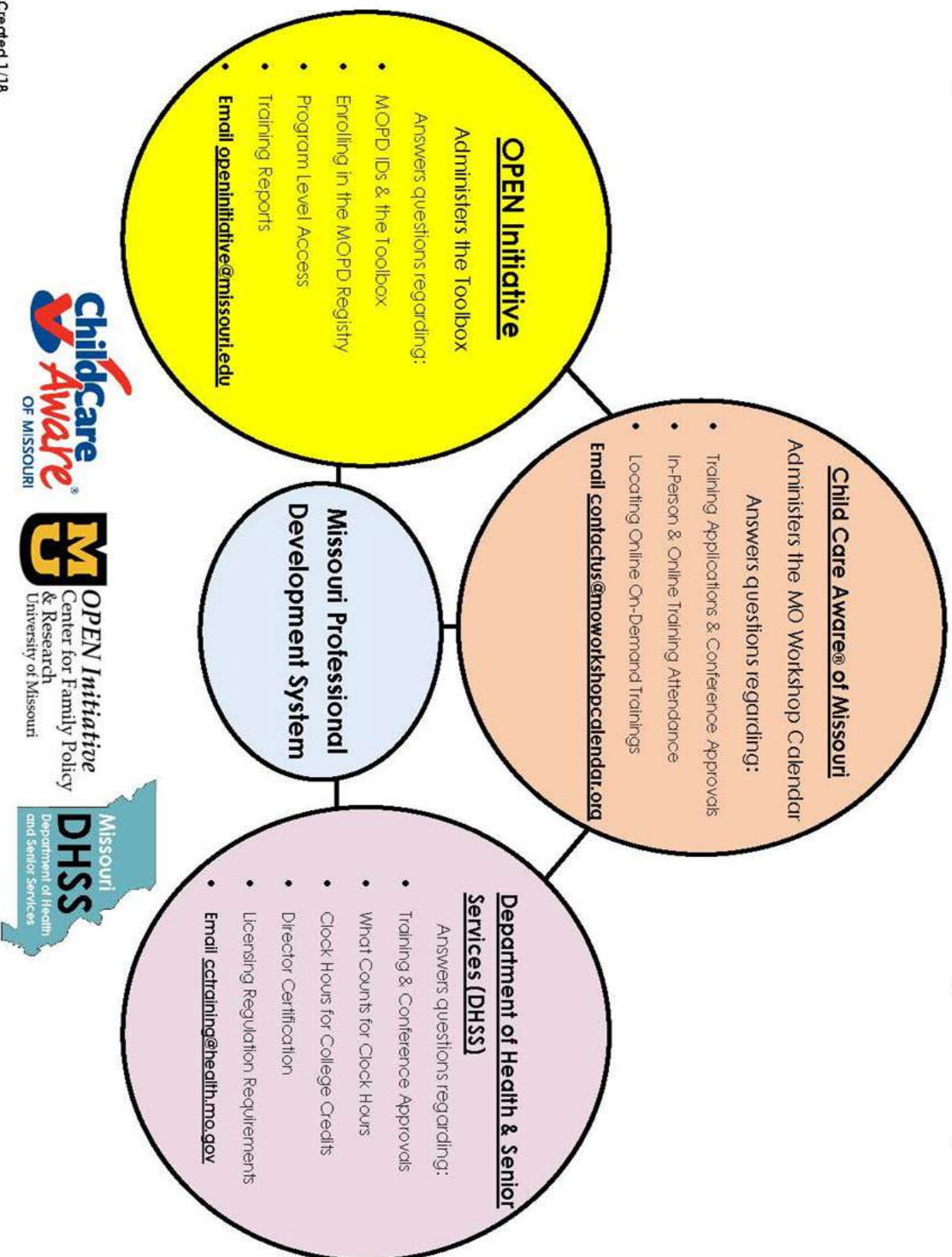


- Always follow best practice and have a witness when administering medication.
  - The witness double checks the name on the bottle to the child and the dosage amount to what is being administered
  - Another precaution to prevent accidents when administering medication
- Check for expired medication and discard it or return it to the child's family.
- Medication storage containers should be reviewed weekly and old medication given back to families or discarded.
- Keep medication authorization forms by the locked medication area.
- Set an alarm to remind educator to administer medication.
- May have policy where you will only administer medicine at designated times, unless it is an emergency.
  - Example: We will only administer medication at 9:00am, noon or 3:00pm
- Keep personal medications locked up and away from children.



# Resources

## Key Functions of the Missouri Professional Development System



Created 1/18



# Resources

## T.E.A.C.H. MISSOURI Scholarship

Want to continue your education?



- Support college credits towards early childhood AA/AAS or BA/BS
- Statewide scholarship available to directors, teachers and assistants in *licensed* child care programs
- Partnership between the scholarship recipient, sponsoring employer and T.E.A.C.H. MISSOURI with each paying a portion of tuition and books
- Applications accepted year round
- Visit our website [www.teach-missouri.org](http://www.teach-missouri.org) to learn more and access an application



1-866-892-3228

[mo.childcareaware.org](http://mo.childcareaware.org)

- Our referral service uses a database containing Missouri child care programs.
- Families are able to access the database and search for programs near them or contact a resource specialist to assist them in their search.
- All information in the database is self-reported by programs.
- We encourage families to ask questions about the child care programs in order to find a program that best suits the needs of their children.
- Update your Program Information Form (PIF) at least annually or when changes occur.



*Questions?*

Dori Martin, Resource Specialist  
 Child Care Aware® of Missouri  
[dori@mo.childcareaware.org](mailto:dori@mo.childcareaware.org)  
 or 314-535-1458 x611

**Show Me Child Care Resources**  
 Saving Time. Sharing Costs. Increasing Quality.

Sponsored by: **ChildCare Aware OF MISSOURI**

Welcome, Lauri!  
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Search

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# APPENDIX



# Health and Safety Checklist for Early Care and Education Programs:

## Based on *Caring for Our Children* National Health and Safety Performance Standards, Third Edition

For a full page printable PDF

[https://cchp.ucsf.edu/sites/g/files/tksrra181/f/HS\\_Checklist.pdf](https://cchp.ucsf.edu/sites/g/files/tksrra181/f/HS_Checklist.pdf)



Developed by the *California Childcare Health Program*  
Funded by the *UCSF School of Nursing*  
2014; Updated January, 2018

## Health and Safety Checklist for Early Care and Education Programs: Based on *Caring for Our Children National Health and Safety Performance Standards, Third Edition*

Developed by the California Childcare Health Program (CCHP)  
University of California San Francisco (UCSF) School of Nursing  
2014

The UCSF CCHP Health and Safety Checklist Development Team is grateful to the many individuals who shared their expertise and spent considerable time developing this Checklist.

### DEVELOPMENT TEAM:

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### PILOT STUDY

We would like to thank the many ECE programs in Arizona, North Carolina and California for their participation in  
the pilot testing of the Checklist.

### PILOT STUDY CHILD CARE HEALTH CONSULTANTS:

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We would also like to thank the child care health consultants, child care health advocates and other health and  
safety experts who participated in the online survey to identify CFOC3 standards to include in the Checklist.

GRAPHIC DESIGN: Mara Gendell, California Childcare Health Program

FUNDING: This study was funded by the School of Nursing at the University of California, San Francisco.



## Health and Safety Checklist for Early Care and Education Programs:

Based on *Caring for Our Children National Health and Safety Performance Standards, Third Edition*

Child Care Center: \_\_\_\_\_

Classroom: \_\_\_\_\_

Classroom type (infant/toddler, preschool): \_\_\_\_\_

Date: (month/day/year) \_\_\_/\_\_\_/\_\_\_\_\_

Observer Name: \_\_\_\_\_

Time Begin: \_\_\_:\_\_\_:\_\_\_ AM/PM

Time End: \_\_\_:\_\_\_:\_\_\_ AM/PM

### Ratings:

Code	Meaning	Definition
1	Never	None of the components of the item are met.
2	Sometimes	Less than or 50% (≤50%) of the components in the item are met.
3	Usually	More than 50% (>50%) but less than 100% of the components in the item are met.
4	Always	Every component in the item is met (100%).
NA	Not Applicable	The item is not applicable (NA) to the classroom/program. Explain why it is rated NA in the 'notes' section.
N Op	No Opportunity to Observe	There was no opportunity (N Op) to observe this item. Explain why it is rated N Op in the 'notes' section.

### Notes:

- An asterisk (\*) means you may need to talk to the director or a staff member to ask where to find an item or product.
- At the end of each subscale there is a space to list and rate other related standards and/or regulations that may apply.
- When a field/box is shaded grey, the rating choice is not an option.

*This checklist does not cover all health and safety concerns or replace each child care program's responsibility to meet local, state, and federal health and safety requirements.*

## FACILITIES: Emergencies, Medications, Equipment and Furnishings

### Emergencies

	Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
1. A sign-in/sign-out system tracks who (other than children) enters and exits the facility. It includes name, contact number, purpose of visit (for example, parent/guardian, vendor, guest, consultant) and time in and out. (Std. 5.2.4.7)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>NOTES</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Phone numbers to report child abuse and neglect (Child Protective Services) are clearly posted where any adult can easily see them. (Std. 3.4.4.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>NOTES</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Phone number for the Poison Center is posted where it can be seen in an emergency (for example, next to the phone). (Stds. 5.2.9.1, 5.2.9.2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>NOTES</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Fire extinguishers are inspected annually. Check date on fire extinguisher tag. (Std. 5.11.3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>NOTES</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Each building or structure has at least two unobstructed exits leading to an open space at the ground floor. (Std. 5.1.4.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>NOTES</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. A smoke detector system or alarm in working order is in each room or place where children spend time. (Std. 5.2.5.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>NOTES</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. *Carbon monoxide detectors are outside of sleeping areas. (Std. 5.2.9.5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>NOTES</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. *First aid supplies are well-stocked in each location where children spend time. (Std. 5.6.0.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>NOTES</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. *First aid supplies are kept in a closed container, cabinet or drawer that is labeled. They are stored out of children's reach and within easy reach of staff. (Std. 5.6.0.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>NOTES</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. *A well-stocked first aid kit is ready for staff to take along when they leave the facility with children (for example, when going on a walk, a field trip or to another location). (Std. 5.6.0.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>NOTES</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
List and rate other federal, state, local and/or accreditation standards/regulations that may apply:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>NOTES</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Medications		Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
11. *Medications are stored in an organized fashion and are not expired. They are stored at the proper temperature, (for example, in the refrigerator or at room temperature according to instructions) out of children's reach and separated from food. (Std. 3.6.3.2)		1	2	3	4	NA	NA
NOTES							
12. *Over-the-counter medications are in the original containers. They are labeled with the child's name. Clear written instructions from the child's health care provider are with the medication. (Stds. 3.6.3.1, 3.6.3.2)		1	2	3	4	NA	NA
NOTES							
13. *Prescription medications are in their original, child resistant container, labeled with child's name, date filled, prescribing health care provider's name, pharmacy name and phone number, dosage, instructions and warnings. (Stds. 3.6.3.1, 3.6.3.2)		1	2	3	4	NA	NA
NOTES							
List and rate other federal, state, local and/or accreditation standards/regulations that may apply.							
NOTES							
1		1	2	3	4	NA	NA
2		1	2	3	4	NA	NA
3		1	2	3	4	NA	NA
4		1	2	3	4	NA	NA
Equipment and Furnishings — Indoors and Outdoors							
14. There is fresh air provided by windows or a ventilation system. There are no odors or fumes (for example, mold, urine, excrement, air fresheners, chemicals, pesticides.) (Stds. 5.2.11, 3.3.0.1, 5.2.8.1)		1	2	3	4		
NOTES							
15. Windows accessible to children open less than 4 inches or have window guards so that children cannot climb out. (Std. 5.1.3.2)		1	2	3	4	NA	NA
NOTES							
16. There are no unvented gas or oil heaters or portable kerosene space heaters. (Std. 5.2.11.0)		1	2	3	4		
NOTES							
17. Gas cooking appliances are not used for heating purposes. Charcoal grills are not used indoors. (Std. 5.2.11.0)		1	2	3	4	NA	NA
NOTES							
18. Portable electric space heaters are not used with an extension cord and are not left on when unattended. They are placed on the floor at least three feet from curtains, papers, furniture and/or any flammable object and are out of children's reach. (Std. 5.2.11.1)		1	2	3	4	NA	NA
NOTES							
19. All electrical outlets within children's reach are tamper resistant or have safety covers attached by a screw or other means that cannot be removed by a child. (Std. 5.2.4.2)		1	2	3	4	NA	NA
NOTES							
20. All cords from electrical devices or appliances are out of children's reach. (Stds. 4.5.0.9, 5.2.4.4)		1	2	3	4		
NOTES							

Equipment and Furnishings — Indoors and Outdoors — Continued		Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
21. There are no firearms, pellet or BB guns, darts, bows and arrows, cap pistols, stun guns, paint ball guns or objects manufactured for play as toys visible. (Std. 5.5.0.8)		1	2	3	4		
NOTES							
22. Plastic bags, matches, candles and lighters are stored out of children's reach. (Stds. 5.5.0.7, 5.5.0.6)		1	2	3	4		
NOTES							
23. There are no latex balloons (inflated, underinflated, or not inflated) or inflated objects that are treated as balloons (for example, inflated latex gloves) on site. (Stds. 6.4.1.5, 6.4.1.2)		1	2	3	4		
NOTES							
24. Bathtubs, buckets, diaper pails and other open containers of water are emptied immediately after use. (Std. 6.3.5.2)		1	2	3	4	NA	NA
NOTES							
25. Children do not play in areas where there is a body of water unless a caregiver/teacher is within an arm's length providing "touch supervision". Bodies of water include tubs, pails, sinks, toilets, swimming pools, ponds, irrigation ditches and built-in wading pools. (Std. 2.2.0.4)		1	2	3	4	NA	NA
NOTES							
26. Hot liquids and food (more than 120°F) are kept out of children's reach. Adults do not consume hot liquids in child care areas. (Std. 4.5.0.9)		1	2	3	4		
NOTES							
27. Equipment and play areas (including water play areas) do not have sharp points or corners, splinters, glass, protrusions that may catch a child's clothing (for example, nails, pipes, wood ends, long bolts), flaking paint, loose or rusty parts, small parts that may become detached or present a choking, aspiration, or ingestion hazard, strangulation hazards (for example, straps or strings), or components that can snag skin, pinch, or shear or crush body tissues. (Stds. 5.3.1.1, 6.2.1.9, 6.3.1.1)		1	2	3	4		
NOTES							
28. All openings in play or other equipment are smaller than 3.5 inches or larger than 9 inches. There are no rings on long chains. (Stds. 6.2.1.9, 5.3.1.1)		1	2	3	4		
NOTES							
29. All openings in play or other equipment are smaller than 3/8 of an inch or larger than 1 inch. (Std. 6.2.1.9)		1	2	3	4		
NOTES							
30. Climbing equipment is placed over and surrounded by a shock-absorbing surface. Loose fill materials (for example, sand, wood chips) are raked to maintain proper depth/distribution. Unitary shock-absorbing surfaces meet current ASTM International standards and/or CPSC Standards. <a href="http://www.astm.org/Standards/F2223.htm">http://www.astm.org/Standards/F2223.htm</a> <a href="http://www.cpsc.gov/PageFiles/172149/325.pdf">http://www.cpsc.gov/PageFiles/172149/325.pdf</a> (Std. 6.2.3.1, Appendix Z)		1	2	3	4	NA	NA
NOTES							
31. Fall zones extend at least six feet beyond the perimeter of stationary climbing equipment. (Std. 6.2.3.1)		1	2	3	4	NA	NA
NOTES							
32. Equipment and furnishings are sturdy and in good repair. There are no tip-over or tripping hazards. (Std. 5.3.1.1)		1	2	3	4		
NOTES							



Equipment and Furnishings — Indoors and Outdoors — Continued

	Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
33. There is no hazardous equipment (for example, broken equipment, lawn mowers, tools, tractors, trampolines) accessible to children. (Std. 5.7.0.4, 6.2.4.4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
34. Open sides of stairs, ramps, porches, balconies and other walking surfaces, with more than 30 inches to fall, have guardrails or protective barriers. The guardrails are at least 36 inches high. (Std. 5.1.6.6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
35. Children one year of age and older wear helmets when riding toys with wheels (for example, tricycles, bikes) or using any wheeled equipment (for example, rollerblades, skateboards). Helmets fit properly and meet CPSC standards. Children take off helmets after riding or using wheeled toys or equipment. (Std. 6.4.2.2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
Equipment and Furnishings — Outdoors Only						
36. Children play outdoors each day. Children stay inside only if weather poses a health risk (for example, wind chill factor at or below minus 15°F, heat index at or above 90°F). (Std. 3.1.3.2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
37. Outdoor play areas are enclosed with a fence or natural barriers that allow caregivers/teachers to see children. Openings in fences and gates are no larger than 3.5 inches. (Std. 6.1.0.8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
38. Enclosures outside have at least two exits, one being remote from the building. (Std. 6.1.0.8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
39. Each gate has a latch that cannot be opened by children. Outdoor exit gates are equipped with self-closing, positive latching closure mechanisms that cannot be opened by children. (Std. 6.1.0.8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
40. Shade is provided outside (for example, trees, umbrellas). Children wear hats or caps with a brim to protect their faces from the sun if they are not in a shaded area. (Std. 3.4.5.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
41. Broad spectrum sun screen with SPF of 15 or higher is available for use. (Std. 3.4.5.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
List and rate other federal, state, local and/or accreditation standards/regulations that may apply:						
NOTES						

SUPERVISION: Interaction, Physical Activity, and Nutrition (Eating and Drinking)

Interaction and Physical Activity	Never	Sometimes	Usually	Always	Not Applicable	No Opportunity																		
<table border="1"> <thead> <tr> <th>Age</th> <th>Maximum Child:Staff Ratio</th> <th>Maximum Group Size</th> </tr> </thead> <tbody> <tr> <td>≤12 months</td> <td>3:1</td> <td>6</td> </tr> <tr> <td>13-35 months</td> <td>4:1</td> <td>8</td> </tr> <tr> <td>3-year-olds</td> <td>7:1</td> <td>14</td> </tr> <tr> <td>4-year-olds</td> <td>8:1</td> <td>16</td> </tr> <tr> <td>5-year-olds</td> <td>8:1</td> <td>16</td> </tr> </tbody> </table> <p>42. Ratios: Indoors: Time (hour/min): ___/___                      Ages of children observed: (check all that apply)  <input type="checkbox"/> ≤12 months <input type="checkbox"/> 13-35 mo <input type="checkbox"/> 3 years <input type="checkbox"/> 4 years <input type="checkbox"/> 5 years                      # of children ___ # of staff ___ child/staff ratio: ___ (Std. 1.1.1.2) For Family Child Care Programs, see CF0C3 Stds. 1.1.1.1, 1.1.1.2</p> <p>NOTES</p> <p>43. Ratios: Outdoors: Time (hour/min): ___/___                      Ages of children observed: (check all that apply)  <input type="checkbox"/> ≤12 months <input type="checkbox"/> 13-35 mo <input type="checkbox"/> 3 years <input type="checkbox"/> 4 years <input type="checkbox"/> 5 years                      # of children ___ # of staff ___ child/staff ratio: ___ (Std. 1.1.1.2) For Family Child Care Programs, see CF0C3 Stds. 1.1.1.1, 1.1.1.2</p> <p>NOTES</p>	Age	Maximum Child:Staff Ratio	Maximum Group Size	≤12 months	3:1	6	13-35 months	4:1	8	3-year-olds	7:1	14	4-year-olds	8:1	16	5-year-olds	8:1	16	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Age	Maximum Child:Staff Ratio	Maximum Group Size																						
≤12 months	3:1	6																						
13-35 months	4:1	8																						
3-year-olds	7:1	14																						
4-year-olds	8:1	16																						
5-year-olds	8:1	16																						
44. Caregivers/Teachers directly supervise children by sight and hearing at all times. This includes indoors, outdoors and when children are sleeping, going to sleep or waking up. (Std. 2.2.0.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>																		
NOTES																								
45. Caregivers/Teachers encourage positive behavior and guide children to develop self-control. Caregivers/Teachers model desired behavior. "Time out" is only used for persistent, unacceptable behavior. (Std. 2.2.0.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>																		
NOTES																								
46. Caregivers/Teachers support children to learn appropriate social skills and emotional responses. There are daily routines and schedules. (Std. 2.2.0.6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>																		
NOTES																								
47. There is no physical or emotional abuse or maltreatment of a child. There is no physical punishment or threat of physical punishment of a child. (Std. 2.2.0.9)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>																		
NOTES																								
48. Caregivers/Teachers do not use threats or humiliation (public or private). There is no profane or sarcastic language. There are no derogatory remarks made about a child or a child's family. (Std. 2.2.0.9)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>																		
NOTES																								
49. Children are not physically restrained unless their safety or that of others is at risk. (Std. 2.2.0.10)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>																		
NOTES																								
50. Physical activity/outdoor time are not taken away as punishment. (Std. 2.2.0.9)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>																		
NOTES																								
51. Children engage in moderate to vigorous physical activities such as running, climbing, dancing, skipping and jumping. All children (including infants) have opportunities to develop and practice gross motor and movement skills. (Std. 3.1.3.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>																		
NOTES																								



Interaction and Physical Activity — Continued		Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
52. There are structured or adult-led physical activities and games that promote movement for children. (Std. 3.1.3.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
List and rate other federal, state, local and/or accreditation standards/regulations that may apply:							
NOTES							
Nutrition: Eating and Drinking							
53. Individual children's food allergies are posted where they can be seen in the classroom and wherever food is served. (Std. 4.2.0.10)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
54. Children two years of age and older are served skim or 1% milk. (Std. 4.9.0.3)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
55. Drinking water is available, indoors and outdoors, throughout the day for children over six months of age. (Std. 4.2.0.6)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
56. A variety of nourishing foods is served at meals and snacks. Nourishing foods include fruits, vegetables, whole and enriched grains, protein and dairy. (Std. 4.2.0.3)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
57. Foods that are choking hazards are not served to children under four years of age. This includes hot dogs and other meat sticks (whole or sliced into rounds), raw carrot rounds, whole grapes, hard candy, nuts, seeds, raw peas, hard pretzels, chips, peanuts, popcorn, rice cakes, marshmallows, spoonfuls of peanut butter or chunks of meat larger than can be swallowed whole. (Std. 4.5.0.10)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
58. Children are always seated while eating. (Std. 4.5.0.10)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
59. Food is not used or withheld as a bribe, reward or punishment. (Std. 2.0.9)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
List and rate other federal, state, local and/or accreditation standards/regulations that may apply:							
NOTES							

SANITATION: Personal Hygiene, Food Safety/Food Handling, Environmental Health		Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
Personal Hygiene — Handwashing							
60. Situations or times that children and staff should perform hand hygiene are posted in all food preparation, hand hygiene, diapering and toileting areas. (Std. 3.2.2.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
61. Handwashing Procedures — Staff		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
62. Handwashing Procedures — Children		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
63. Caregivers/Teachers help children wash their hands when children can stand but cannot wash their hands by themselves. Children's hands hang freely under the running water either at a child level sink or at a sink with a safety step. (Std. 3.2.2.3)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							
64. Adults and children only use alcohol-based hand sanitizers as an alternative to handwashing with soap and water if hands are not visibly soiled. Hand sanitizers are only used for children over 24 months with adult supervision. (Stds. 3.2.2.2, 3.2.2.3)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES							

Personal Hygiene — Toothbrushing		Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
65. When toothbrushes are present, they are not worn or frayed. Fluoride toothpaste is present. (Std. 3.1.5.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
66. *Except in the case of children who are known to brush their teeth twice a day at home, caregivers/teachers brush children's teeth or monitor tooth brushing activities at least once during the hours that the child is in child care. (Std. 3.1.5.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food Safety/Food Handling							
67. The food preparation area of the kitchen is separate from eating, play, laundry, toilet, bathroom and diapering areas. No animals are allowed in the food preparation area. (Std. 4.8.0.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
68. The food preparation area is separated from child care areas by a door, gate, counter or room divider. (Std. 4.8.0.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
69. There is no home-canned food or food in cans without labels. Food from dented, rusted, bulging or leaking cans is not used. (Std. 4.9.0.3)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
70. Meat, fish, poultry, milk and egg products are refrigerated or frozen before use. Refrigerators have a thermometer and are kept at 41°F or lower. (Std. 4.9.0.3)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
71. Meat product labels state they are from government-inspected sources and/or dairy product labels state that they are pasteurized. (Std. 4.9.0.3)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
72. All fruits and vegetables are washed thoroughly with water prior to use. (Std. 4.9.0.3)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
73. Store bought fruit juice labels state the juice is pasteurized. Fruit and vegetable juices squeezed on-site are squeezed just prior to serving. (Std. 4.9.0.3)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
74. Food surfaces (for example, dishes, utensils, dining tables, high chair trays, cutting boards) and/or objects intended for the mouth (for example, pacifiers and teething toys) are sanitized. A dishwasher is used or an EPA registered sanitizer is used according to label instructions for sanitizing. (Std. 3.3.0.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Environmental Health		Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
75. Kitchen equipment is clean and in working order. Food surfaces are in good repair and free of cracks and crevices. Food surfaces are made of non-porous, smooth material and are kept clean and sanitized. (Std. 4.8.0.3)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
76. There are no cracks or holes in walls, ceilings, floors or screens. (Std. 5.2.8.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
77. There is no clutter, trash, water damage or standing water. Leaking pipes and pest breeding areas are not on site. (Std. 5.2.8.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
78. Objects and surfaces are kept clean of dirt, debris and sticky films. (Std. 3.3.0.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
79. Hard, non-porous surfaces soiled with potentially infectious body fluid (for example, toilets, diaper changing tables, blood spills) are disinfected. An EPA registered disinfectant is used according to label instructions. (Std. 3.3.0.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
80. There are disposable gloves available for handling blood and blood containing body fluids. (Std. 3.2.3.4)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
81. *Infectious waste (for example soiled diapers, blood) and toxic waste (for example, used batteries, fluorescent light bulbs) are stored separately from other waste. (Stds. 5.2.7.6, 5.2.9.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
82. Sanitizing and disinfecting are not done when children are nearby. (Std. 3.3.0.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
83. *Pesticides are not applied when children are present. (Std. 5.2.8.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
84. *Toxic substances are stored in the original, labeled containers. Safety Data Sheets (SDS) are on site for each toxic substance/chemical. (Std. 5.2.9.1)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
85. *Toxic substances are inaccessible to children and in a locked room or cabinet. Bleach solutions are labeled with contents and date mixed. (Stds. 5.2.9.1, 5.2.8.1, 3.2.3.4, Appendix J.)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
List and rate other federal, state, local and/or accreditation standards/regulations that may apply:		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



**POOLS, SPAS and HOT TUBS**

Does this program have a pool, spa or hot tub or other water hazard?  
 Yes:  If yes, complete the items below. No:  If no, go to the Infants and Toddlers Section.  
 This facility has the following water hazards: (check all that apply)  
 Swimming Pool  Hot Tub  Stationary Wading Pool  Pond  Other \_\_\_\_\_

Developmental Levels	Child-Staff Ratios	Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
Infants	1:1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Toddlers	1:3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Preschoolers	4:1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School-age Children	6:1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

86. Ratios: Ages of children observed: (check all that apply)  
 ≤12 months  13-36 mo  3 years  4 years  5 years  5+ years  
 Location: \_\_\_\_\_ Time of Day (hour/min): \_\_\_\_\_ / \_\_\_\_\_ (Std. 1.1.1.1.5)  
 # of children \_\_\_\_\_ # of staff \_\_\_\_\_ child/staff ratio: \_\_\_\_\_ (Std. 6.1.0.6, 6.3.1.1)

87. All outdoor water hazards are enclosed with a fence at least 4-6 feet high that comes within 3¼ inches from the ground. Exits and entrances around bodies of water have self-closing, positive latching gates or doors. The locking devices are a minimum of 55 inches from the ground or floor. (Stds. 6.1.0.6, 6.3.1.1)

88. When not in use, in-ground and above-ground swimming pools, spas, hot tubs or wading pools are covered with a safety cover. The cover meets the ASTM International standards. (Std. 6.3.1.4)

List and rate other federal, state, local and/or accreditation standards/regulations that may apply:

Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**INFANTS and TODDLERS: Personal Relationships, Diapering, Injury Prevention**

Are there children under 36 months of age in this program?  
 Yes:  If yes, complete the items below. No:  If no, you have completed the Checklist.

Infants and Toddlers — Personal Relationships

89. Caregivers/Teachers smile, talk, touch, hold, sing and/or play with children during daily routines, such as diapering, feeding and eating. (Std. 2.1.2.1)

90. Caregivers/Teachers comfort children who are upset. Caregivers/Teachers are aware of and respond to children's feelings. (Std. 2.1.2.1)

Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Infants and Toddlers — Diapering**

Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

91. Caregivers/Teachers follow diaper changing procedures below:  
 - Caregiver/Teacher has one hand on the child at all times.  
 - Non-absorbent paper liner, large enough to cover the changing surface from the child's shoulders to beyond the child's feet, is used.  
 - Clothing is removed or otherwise kept from contact with the contents of the diaper during the change.  
 - Child is cleaned of stool and urine, front to back, with a fresh wipe for each swipe.  
 - Soiled diapers are placed in a plastic-lined, covered, hands-free can.  
 - If reusable cloth diapers are used, soiled diaper is put in a plastic bag or into a plastic-lined, hands-free covered can.  
 - A fresh wipe is used to clean the hands of the caregiver and another fresh wipe to clean the hands of the child before putting on a new diaper and dressing the child.  
 - The child's hands are washed according to the procedure in item #62 before returning the child to a supervised area.  
 - Diaper changing surface is cleaned and disinfected with an EPA registered disinfectant after each diaper change.  
 - Disinfectant is put away, out of children's reach.  
 - Caregivers/Teachers' hands are washed after diapering procedure is complete according to the procedure in item #61. (Stds. 3.2.1.4, 3.2.3.4)

92. Current diaper changing procedures as listed in item #91 are posted in the diaper changing area(s). (Std. 3.2.1.4)

Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Infants and/or Toddlers — Injury Prevention**

93. Strings, cords, ribbons, ties and straps long enough to encircle a child's neck are out of children's reach. (Std. 3.4.6.1)

Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

94. The following are not within children's reach: small objects, toys, and toy parts that have a diameter less than ¾ inch and a length between 1 inch and 2¼ inches; balls and toys with spherical, egg shaped, or elliptical parts that are smaller than 1¼ inches in diameter; toys with sharp points and edges; plastic bags; Styrofoam® objects; coins; rubber or latex balloons; safety pins; marbles; magnets; foam blocks, books, or objects; latex gloves; bulletin board tacks or glitter. (Std. 6.4.1.2)

95. Securely installed guards (for example, gates) are at the top and bottom of each open stairway where infants and toddlers are in care. (Std. 5.1.5.4)

96. Children over 12 months of age who can feed themselves are actively supervised by a caregiver/teacher. The caregiver/teacher is within arm's reach of the child's high chair or feeding table or is seated at the same table. (Std. 4.5.0.6)

97. Foods that are choking hazards are not served to toddlers. Food for toddlers is served in pieces ½ inch or smaller. (Std. 4.5.0.10)

Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Infants Only — Nutrition						
	Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
	1	2	3	4		
107. Bottles or containers with mother's milk are labeled with the infant's full name, date and time the milk was expressed. Mother's milk is stored in the refrigerator or freezer. (Std. 4.31.3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
108. Bottles of formula prepared from powder or concentrate or ready-to-feed formula are labeled with the child's full name and the time and date of preparation. (Std. 4.31.5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
109. If caregivers/teachers warm bottles and infant foods, bottles are warmed under running warm tap water or by placing in a container of water no warmer than 120°F. Bottles and infant foods are not thawed or warmed in microwave ovens. The temperature of warmed milk does not exceed 98.6 F. (Stds. 4.31.3, 4.31.9)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
110. Infants are not fed solid foods sooner than four months of age (preferably six months of age). Introductory foods are single ingredient. (Std. 4.31.11)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
111. Infants who are learning to feed themselves are actively supervised by a caregiver/teacher. Infants are seated within arm's reach of caregiver/teacher at all times while being fed or eating. (Std. 4.5.0.6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
112. Foods that are choking hazards are not served to infants. Food for infants is served in pieces ¼ inch or smaller. (Std. 4.5.0.10)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
List and rate other federal, state, local and/or accreditation standards/regulations that may apply:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						

Infants and/or Toddlers — Injury Prevention — Continued						
	Never	Sometimes	Usually	Always	Not Applicable	No Opportunity
	1	2	3	4		
List and rate other federal, state, local and/or accreditation standards/regulations that may apply:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
<b>INFANTS ONLY: Activity, Sleep, Safety, Nutrition</b> Are there infants under 12 months of age in this program? Yes: <input type="radio"/> If yes, complete items below No: <input type="radio"/> If no, you have completed the Checklist.						
Infants Only — Activity, Sleep, Safety						
98. Sunscreen is not applied to infants younger than six months. Infants younger than six months are not in direct sunlight. (Std. 3.4.5.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
99. Infants have supervised tummy time while awake at least once each day. (Std. 3.1.3.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
100. Infants are not seated more than 15 minutes at a time except during meals. (Std. 3.1.3.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
101. All infants are placed to sleep on their backs, in a crib, on a firm mattress, with a tightly fitting sheet. Only one infant is placed in each crib. (Std. 3.1.4.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
102. Soft or loose bedding and other objects are kept away from sleeping infants and are not in safe sleep environments (for example, not in cribs). This includes bumpers, pillows, positioners, blankets, quilts, bibs, diapers, flat sheets, sheepskins, toys and stuffed animals. One-piece blanket sleepers may be used for warmth. (Std. 3.1.4.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
103. The room temperature where infants sleep is comfortable for a lightly clothed adult. (Std. 3.1.4.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
104. Infants who fall asleep in a place that is not a crib are moved and placed to sleep on their backs in a crib. Examples of places where infants may not be left to sleep are car seats, high chairs, swings, infant seats, beanbag chairs and futons. (Std. 3.1.4.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
105. *Cribs meet the current guidelines approved by CPSC and ASTM international standards. Crib slats are spaced no more than 2 3/8 inches apart. The crib has a firm mattress that is fitted so that no more than two fingers can fit between the mattress and the crib side in the lowest position. Cribs with drop sides are not used. Cribs are placed away from window blinds or draperies. (Std. 5.4.5.2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						
106. Infants mobile enough to potentially climb out of a crib sleep on cots or mats. (Std. 5.4.5.2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
NOTES						