



Georgia Department of Early Care and Learning

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

Effective February 1, 2019





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Overview

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

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

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

CAPS Informal Provider Health and Safety Standards

A. Activities

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

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

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

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

B. Bathrooms

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

Number of Children	Toilets and Sinks *
1-12	1
13-25	2

26-50	3
51-75	4
76-100	5
101-125	6
126-150	7
151-175	8

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

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

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

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

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

Cleanliness. Bathrooms shall be cleaned daily with a disinfectant.

C. Children's Records

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

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

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

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

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

D. Criminal Records Check

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

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

(b) Every Informal Provider must have a current and valid satisfactory Comprehensive Records Check Determination on file prior to being present at the Home while any child is present for care or before residing in the Home. The Comprehensive Records Check Determination must have a Records Check Clearance Date that is no older than the

preceding 12 months of the license date; provided, however, if the Informal Provider has had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, a new satisfactory Comprehensive Records Check Determination is required.

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

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

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

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

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

E. Discipline

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

Personnel shall not:

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

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

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

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

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

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

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

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

(i) Punish toileting accidents;

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

(k) Force or withhold naps;

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

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

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

F. Equipment and Toys

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

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

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

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

G. First Aid and CPR

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

H. Hygiene

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

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

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

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

I. Medications

Parental Authorization. Except for first aid or as authorized under Georgia law, Personnel shall not dispense prescription or non-prescription medications to a child without specific written authorization from the child's physician or parent. Such authorization will include when applicable, date; full name of the child; name of the medication; prescription number, if any; dosage; the dates to be given; the time of day to be dispensed; and signature of parent.

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

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

J. Policies and Procedures

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

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

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

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

K. Personnel Records

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

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

L. Physical Plant

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

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

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

M. Playgrounds

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

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

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

N. Staffing and Supervision

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

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

O. Staff Training

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

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

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

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

Ongoing Training

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

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

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

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

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

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

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

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

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

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

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

Q. Transportation (If applicable)

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

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

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

R. Field Trips (If applicable)

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

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

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

S. Required Reporting

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

(a) Child Abuse, Neglect or Deprivation. Suspected incidents of child abuse, neglect or deprivation shall be reported to the local County Department of Family and Children Services in accordance with state law.

(b) Communicable Diseases. Any cases or suspected cases of notifiable communicable diseases shall be reported to the local County Health Department as required by the rules of the Department of Human Resources regarding Notification of Disease, Chapter 290-5-3.

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

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

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

T. Diapering (If applicable)

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

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

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

U. Safe Sleep Requirements (If applicable)

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

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

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

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

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

Monitoring Checklist for Informal Providers Receiving Subsidy



Arrival time:	Departure time:	Visit date:
Consultant name:		Phone #:
Informal Caregiver Name:		Informal Caregiver #: INF-
Street Address:		
City, State, Zip Code, County:		
Enrollment Date: / /	90 days from Enrollment: / /	
<input type="checkbox"/> N/A – Informal Caregiver was dismissed or no longer provides care for CAPS subsidy		

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

The following information is needed to complete the caregiver’s record with the CAPS program.
Please send to CAPS.InformalProvider@dec.al.ga.gov within 10 days.

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

Staff: Child Ratios

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

Monitoring Checklist for Informal Providers Receiving Subsidy



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

Monitoring Checklist for Informal Providers Receiving Subsidy



Indicators	Observations/ Comments/ Notes	Plan of Improvement
<p>Diapering <input type="checkbox"/> N/A (no diapering) <input type="checkbox"/> Not observed during visit</p> <p>• Clean, nonporous diapering surface? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme</p>		
<p>Discipline <input type="checkbox"/> None observed</p> <p>• Appropriate disciplinary actions observed? <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point</p> <p>If no, explain-----></p> <p><input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme</p>		
<p>Health & Hygiene <input type="checkbox"/> Not observed during visit</p> <p>• Is there running water at the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point</p> <p>• Provider wash hands after toileting/diapering & before eating? <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point</p> <p>• Children wash hands after toileting/diapering & before eating? <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point</p> <p>If no, explain-----></p>		
<p>Medication <input type="checkbox"/> N/A (No medication dispensed)</p> <p>• Stored medication inaccessible to children? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme</p> <p>• Written permission from parent/guardian to dispense? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme</p> <p>• Document in writing when medication is dispensed? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme</p> <p>If no, explain-----></p>		
<p>Core Standard Severity total(s): Low: _____ Medium: _____ High: _____ Extreme: _____</p> <p>Non-core Standard total(s): _____</p>		

Monitoring Checklist for Informal Providers Receiving Subsidy



Indicators	Observations/ Comments/ Notes	Plan of Improvement
<u>Physical Plant</u>		
<ul style="list-style-type: none"> • Is there a working smoke detector at the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Is there a working fire extinguisher at the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Are the heaters and fire places safely covered at the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • If there are weapons in the home, are weapons (guns, hunting knives, related accessories, etc) locked and out of reach of children? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Are flame producing items (matches, lighters, lighted candles, etc) out of reach of children? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Are all tobacco items (cigarettes, cigars, etc) out of reach of children? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Is the electricity on/working at the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No • Is there a working phone at the residence? <input type="checkbox"/> Yes <input type="checkbox"/> No • If animals are at the residence, are they secured safely away from children? <input type="checkbox"/> Yes <input type="checkbox"/> No • Are hazardous materials (cleaning supplies, etc.) stored securely away from children? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Are electrical outlets (at the child's level) covered? <input type="checkbox"/> Yes <input type="checkbox"/> No 		
<u>Playgrounds/Equipment</u> <input type="checkbox"/> N/A (no playground or equipment) <input type="checkbox"/> Not observed during visit		
<ul style="list-style-type: none"> • Outdoor play area free of serious hazards? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Fence/barrier around outdoor play area? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain-----> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme 		
Core Standard Severity total(s): Low: _____ Medium: _____ High: _____ Extreme: _____		
Non-core Standard total(s): _____		

Monitoring Checklist for Informal Providers Receiving Subsidy



Indicators	Observations/ Comments/ Notes	Plan of Improvement
<p>Policies and Procedures: Does the program have a written policy regarding the following</p> <ul style="list-style-type: none"> • The exclusion of children with contagious illness? <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point • Notification of parents in the event their child becomes ill while at the facility? <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point • The notification of all parents of enrolled children when a reportable contagious illness is present in the facility? <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point • The prevention of and response to food and allergic reactions? <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point • Emergency preparedness and response? <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point • The handling and appropriate disposal of bodily fluids and storage of hazardous materials (soiled clothing and bedding)? <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point • Recognition and reporting of child abuse and neglect? <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point • Has the provider reported serious injuries/incidents? <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No= 1 Point 		
<p>Safe Sleep <input type="checkbox"/> N/A (no infants) <input type="checkbox"/> Not observed during visit</p> <ul style="list-style-type: none"> • Is there a clean sleep/rest area for each child? <input type="checkbox"/> Yes <input type="checkbox"/> No • If cribs are required, do they meet CPSC/ASTM requirements? <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme) <input type="checkbox"/> Yes <input type="checkbox"/> No • Cribs clear of objects? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme) • Each crib has a firm, tight fitting mattress without gaps? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Each crib has an individual, tight fitting sheet? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Are infants placed on their back to sleep in an appropriate crib? <input type="checkbox"/> Yes <input type="checkbox"/> No <p>If no, explain-----> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme</p>		
<p>Swimming & Water-Related Activities <input type="checkbox"/> N/A (no pool/no swimming activities)</p> <ul style="list-style-type: none"> • Pool area adequately fenced and secured? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Are swimming areas accessible, are there child protected locks and/or other devices to keep children safe? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme 		
<p>Core Standard Severity total(s): Low: _____ Medium: _____ High: _____ Extreme: _____</p> <p>Non-core Standard total(s):</p>		

Monitoring Checklist for Informal Providers Receiving Subsidy



Indicators	Observations/ Comments/ Notes	Plan of Improvement
<p>Transportation <input type="checkbox"/> N/A (no transportation provided)</p> <ul style="list-style-type: none"> • Written permission to transport from parent/guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No • Emergency medical information for each child on vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No <ul style="list-style-type: none"> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Proper restraints used when transporting children? during visit <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not observed <ul style="list-style-type: none"> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Children left unattended on the vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No <ul style="list-style-type: none"> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme • Provider have current driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No <ul style="list-style-type: none"> <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Extreme 		
<p>Staff Training</p> <ul style="list-style-type: none"> • Provider first aid and CPR Trained? <input type="checkbox"/> Yes <input type="checkbox"/> No • Provider obtain First Aid and CPR training within 90 days of employment? <input type="checkbox"/> Yes <input type="checkbox"/> No = 1 Point • Provider obtain Health & Safety Orientation Certificate within 90 days of employment? • Does provider receive on-going training? <input type="checkbox"/> Yes <input type="checkbox"/> No = 1 Point <p>If yes, list type of training:</p> <ul style="list-style-type: none"> ○ ○ ○ 		
<p>Core Standard Severity total(s): Low: _____ Medium: _____ High: _____ Extreme: _____</p>		
<p>Non-core Standard total(s): _____</p>		

Monitoring Checklist for Informal Providers Receiving Subsidy



Staff Profile Record

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

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

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

Note: A satisfactory, comprehensive background check from DECAL is required effective October 1, 2018.

Monitoring Checklist for Informal Providers Receiving Subsidy



Compliance Enforcement Worksheet

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

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

Core Standard total: _____	Non-core Standard total: _____	Combined total: _____
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Director/Person-in-charge Signature _____

Printed name _____ Date _____

Specialist Signature _____ Date _____