



**Health and Safety Checklist for Non-Public Schools**

**INTRODUCTION**

Non-public schools that provide school readiness services and are exempt from licensure under Section 402.3025, Florida Statutes, must complete a health and safety checklist each year, submit it to their local early learning coalition and post it in plain sight for visitors and parents. The items on this checklist are not specific requirements of license-exempt providers. Items checked identify the unique aspects of each school readiness program. This provider has completed a health and safety checklist covering the following.

<p style="text-align: center;"><b>Staff-To-Child Ratios/Supervision</b></p> <p>The numbers and ages of children the child care provider cares for.</p>	<p style="text-align: center;"><b>Transportation</b></p> <p>Vehicle insurance, driver’s license, vehicle log and processes, if transportation is provided.</p>
<p style="text-align: center;"><b>Field Trip Permission</b></p> <p>How provider notifies parents in advance and obtains parent permission if field trips are offered.</p>	<p style="text-align: center;"><b>Child Discipline</b></p> <p>What disciplinary practices are used and how that information is provided to parents or guardians.</p>
<p style="text-align: center;"><b>Physical Environment</b></p> <p>How the facility is kept clean, in good repair and free of hazards.</p>	<p style="text-align: center;"><b>Outdoor Play Areas</b></p> <p>How playground equipment is installed, maintained properly and kept in good repair.</p>
<p style="text-align: center;"><b>Bedding and Napping</b></p> <p>The type of bedding provided for each child – crib or cot as appropriate – including safety and sanitation measures.</p>	<p style="text-align: center;"><b>Proper Handwashing</b></p> <p>When and how handwashing occurs (such as after toileting) for employees, volunteers and children.</p>
<p style="text-align: center;"><b>Toileting and Bathing Facilities</b></p> <p>Types of basins, toilets and bathing facility if appropriate and how they are kept in good working condition.</p>	<p style="text-align: center;"><b>Diaper Area and Diapering Procedures</b></p> <p>How diaper-changing area(s) are separated from food preparation and feeding area(s) and how frequently they are sanitized.</p>
<p style="text-align: center;"><b>Fire Drills and Emergency Preparedness</b></p> <p>How and when drills are conducted when children are in care.</p>	<p style="text-align: center;"><b>Background Screening and Certification</b></p> <p>Types of background screening required for caregivers.</p>
<p style="text-align: center;"><b>Personnel Training</b></p> <p>Training and credentials required for staff.</p>	<p style="text-align: center;"><b>Communicable Disease Control</b></p> <p>Processes and practices used for sick children</p>
<p style="text-align: center;"><b>Medication</b></p> <p>How provider handles documentation of medication and known allergies of children.</p>	<p style="text-align: center;"><b>Food and Nutrition</b></p> <p>How safe drinking water is made available to children, meals and snacks are provided if appropriate, and nutritional information.</p>
<p style="text-align: center;"><b>Record Keeping</b></p> <p>Record-keeping processes such as emergency contact information and procedures for documenting accidents.</p>	<p style="text-align: center;"><b>Plan of Activities</b></p> <p>Planning and frequency of appropriate activities and use of electronic media (TV, video, computers).</p>

<b>PROVIDER INFORMATION</b>	
Provider Name: _____	
Address: _____	
Accredited By: _____	
Checklist Completed By: _____	Date: _____

*The items on this checklist are not specific requirements of license-exempt providers. Items checked identify the unique aspects of each school readiness program.*

**PLEASE CHECK ALL THAT APPLY**

**Supervision and Access**

- 1. Minimum staff-to-children ratio standards are maintained at all times for school readiness programs.
- 2. Direct supervision (within hearing and sight) is maintained at all times including during naps, changing diapers, toileting, bathing, changing clothes and when isolated due to a communicable disease.
- 3. Child care personnel are assigned a specific group of children to supervise and be present with at all times.
- 4. The operator of the facility is 21 years of age or older.
- 5. All child care personnel are 16 years of age or older, unless under direct supervision and are not counted for the purpose of calculating staff-to-children ratios.
- 6. Foster grandparents are not counted in staff-to-children ratios.
- 7. Volunteers who do not meet the credential requirement and/or work less than 20 hours per week are not counted in staff-to-children ratios.
- 8. The facility provides the custodial parent or legal guardian access, in person and by telephone, to the child care facility during the facility's normal hours of operation or during the time the child is in care.

**Transportation and Field Trip Permission**

- 1. Children are not transported at this facility in any vehicle.
- 2. This facility does not participate in field trips.
- 3. Written parental permission is obtained prior to field trip or transportation activity.
- 4. Vehicle(s) has appropriate single-limits liability insurance as required by S. 316.615(4), F.S., and complies with vehicle safety standards.
- 5. Seat belts and/or proper child safety restraints are used and vehicle capacity is appropriate when transporting children.
- 6. The driver of vehicle transporting children has a valid Florida driver's license and a current first aid and infant/child CPR certification.
- 7. The personnel record contains a copy of all driver(s) physician certification granting medical approval to operate a vehicle.
- 8. Procedures, which include a log and thorough inspection, are in place to account for all children being transported in the vehicle. The log is retained for a minimum of four months.
- 9. Communication devices and contact information for all children are kept in the vehicle at all times.
- 10. Emergency care plans, supplies and/or required medication are available for children being transported.

**Child Discipline/Discipline Policy**

- 1. Written disciplinary practices of the program are provided to parents/legal guardians at time of enrollment.
- 2. Discipline methods are not severe, humiliating or frightening to children or associated with food, rest and/or toileting.
- 3. Corporal or physical punishment is not used.
- 4. Children are not denied opportunities for physical activity as a form of punishment.

### **Physical Environment**

- 1. The facility is in good repair, clean, free from vermin infestation, and health and safety hazards.
- 2. Toys, equipment and furnishings are clean, safe, sanitary and in good repair.
- 3. All potentially harmful items including cleaning supplies, flammable products, poisonous, toxic and hazardous materials are labeled and stored out of children's reach.
- 4. Narcotics, alcohol or other impairing drugs are not permitted on the premises.
- 5. Firearms or weapons are not permitted within any building or vehicle, or on any person on the premises, excluding law enforcement officers.
- 6. Smoking is not allowed on premises.
- 7. An inside temperature of 65 to 82°F is maintained at all times.
- 8. At least one working telephone is available to all child care personnel during hours of operation.
- 9. The facility maintains a minimum of 35 square feet of usable indoor floor space for each child.

### **Outdoor Play Areas and Equipment**

- 1. The outdoor play area is shaded, clean and free of litter, nails, glass and other hazards.
- 2. The outdoor play area is enclosed by a fence that is four feet high or higher.
- 3. Outdoor play equipment and surfaces are in good repair and activities are safe.
- 4. A certified lifeguard or equivalent is always present if the program utilizes a swimming pool that exceeds three feet in depth or uses a beach or lake areas for water activities.
- 5. There is an appropriate amount of usable, safe and sanitary outdoor play area. Calculations for outdoor play area are at the rate of 45 square feet per child. (Urban child care facilities may substitute indoor for outdoor play space.)

### **Bedding and Nap/Sleep**

- 1. Safe and sanitary bedding that includes individual beds, cots, cribs, playpens, mattresses or floor mats are provided for each child and positioned at least 18 inches apart.
- 2. Floor mats are at least one-inch thick and covered with an impermeable surface.
- 3. Children up to 1 year of age are in their own crib, port-a-crib or playpen.
- 4. Child care personnel ensure that young infants who are not capable of rolling over on their own are positioned on their back on a firm surface when napping and sleeping.
- 5. Double or multi-deck cribs, cots or beds are not used.
- 6. If cribs are used, bar spacing does not exceed 2 3/8 inches and all cribs meet Title 16, Parts 1219 and 1220 Code of Federal Regulations (anti-loosening devices on crib hardware, durable mattress supports, no traditional drop-side cribs and others).

### **Proper Handwashing**

- 1. Employees, volunteers and children wash their hands with soap and running water, drying thoroughly, immediately following personal hygiene procedures for themselves, or when assisting others (including diapering), after outdoor play, and before preparing food or administering medication.

### **Toileting and Bathing Facilities**

- 1. Toilets and sinks are accessible, in good working condition, clean and sanitized.
- 2. Platforms and stools have surfaces that can be easily cleaned and sanitized.
- 3. Running water, toilet paper, soap, trashcans, and disposable towels or working hand drying machines are available and within reach of children.
- 4. Potty chairs are cleaned and sanitized after each use.
- 5. At least one bathing facility is available. (*This does not apply to programs serving only school-age children.*)

### **Diaper Area and Diapering Procedures**

- 1. Diaper-changing area has impermeable surface and is cleaned with sanitizing solution or disinfected after each use.

- 2. There is an ample supply of clean diapers, clothing and linens at all times, which are changed or removed promptly when soiled or wet.
- 3. Diaper-changing area(s) are physically separated from food preparation, food service and feeding area(s).
- 4. Diapers, disposable or cloth, are placed in separate, covered, lined containers not accessible to children.
- 5. Soiled diapers are placed in containers that are emptied and sanitized when containers are full and at least once daily.
- 6. A sink with running water is available in the room where infants or children with special needs in diapers are in care or in an adjoining room that opens into it.

### **Fire Drills and Emergency Preparedness**

- 1. Exit areas are clear in accordance with fire-safety regulations.
- 2. At all times, a fully equipped first aid kit, as defined in Rule 65C-22.004(2)(c), Florida Administrative Code, is kept on the premises and in vehicles used for transporting children.
- 3. Local fire authorities conduct an annual fire inspection of the facility.
- 4. Fire drills are conducted at various dates and times when children are in care, including one during naptime and one with an alternate evacuation route.
- 5. Fire drills are conducted at least once a month.
- 6. A current attendance record accompanies staff out of the building during a drill or actual evacuation, and is used to account for all children.
- 7. A written emergency preparedness plan is available and includes procedures the facility takes during a fire, lockdown and inclement weather.
- 8. Emergency preparedness drills are conducted at various dates and times when children are in care.
- 9. The address and directions to the facility and emergency phone numbers, including ambulance, fire, police, poison control center and the Florida Abuse Hotline, are posted near all phones.
- 10. An emergency evacuation plan is posted in each room diagramming safe routes for exit from each area.

### **Background Screening and Certifications**

- 1. Level II background screening is conducted through the Department of Children and Families (DCF) for all child care personnel. (*Volunteer and Employee Criminal History System screenings are not sufficient.*)
- 2. At least one staff member who has infant and child cardiopulmonary resuscitation (CPR) certification is present at all times. Number of staff members with this training: \_\_\_\_\_.
- 3. At least one staff member who has a valid first aid certification is present at all times. Number of staff members with this training: \_\_\_\_\_.
- 4. The facility has current documentation of staff CPR and first aid certifications.
- 5. Employment references of child care personnel are checked at time of hire.

### **Personnel Training**

*Note: The items below do not apply to occasional or part-time support staff or those who do not work with children.*

- 1. All child care personnel have documentation of completing the DCF 40-clock-hour introductory course in child care, unless exempt under S. 402.305(2)(d)(1), F.S.
- 2. Child care personnel begin their training within 90 days of employment and complete it within one year.
- 3. All child care personnel complete five clock hours or .5 documented continuing education units of training in early literacy and language development of children from birth to 5 years of age, as approved by DCF (not applicable to school-age programs).
- 4. All child care personnel complete 10 clock hours of in-service training annually. (*The 40-hour introductory training Parts I and II may be used to meet this for the first fiscal year of employment.*)
- 5. The facility has a credentialed director (*credential approved and issued by DCF*) who is onsite a majority of hours that the facility is in operation.
- 6. The child care operator has completed a minimum of eight hours of basic training in serving children with disabilities within five years after employment (either as part of the Introductory Training Part II Special Needs Appropriate Practices or as part of annual in-service training).

### **Communicable Disease Control**

- 1. Children, personnel or any other person suspected of having a communicable disease is removed from the facility or placed in an isolation area until removed.
- 2. The isolation area is adequately ventilated, heated and equipped with a bed, mat or cot and materials that can be cleaned and sanitized or disinfected easily; linens are changed after each use.
- 3. A child who has an easily transmittable condition is not permitted in the facility until treatment has been completed and verified.
- 4. Child care personnel notify local county health department immediately of any suspected outbreak of communicable disease and follow the health department's direction.
- 5. The facility provides parents with detailed information regarding causes, symptoms and transmission of the influenza virus each year during the months of August and September.

### **Medication**

- 1. This facility does not administer medication and it is not kept on the premises.
- 2. The facility has written authorization from the parent or legal guardian to administer medication.
- 3. Prescription and non-prescription medication are not expired, in original containers, appropriately labeled, dispensed according to directions on labels, documented and stored in area not accessible to children.
- 4. The child's file documents known allergies and personnel are made aware of all children with allergies.

### **Food and Nutrition**

*Note: The facility is not required to provide food, but can arrange with the parent or guardian to provide for a child's meal/snacks.*

- 1. Safe drinking water is available to children at all times, including during outdoor play.
- 2. Meals and snacks provided by the facility meet daily nutritional needs of children according to the USDA MyPlate. *Copies of the USDA My Plate can be found at the website <http://www.choosemyplate.gov>.*
- 3. Special food restrictions, including food allergies, are shared with child care personnel and posted in a conspicuous location.
- 4. Children are either fed individually or supervised at meals/snacks and are offered age-appropriate food.
- 5. All breast milk and infant formula remaining in bottles after feeding are discarded within one hour.
- 6. The temperature of heated foods and bottles is tested before giving to children to prevent injury.
- 7. Facility provides sufficient seating so that children are seated at tables for meals.

### **Record Keeping**

- 1. Emergency contact information, immunization records and required health examination records are obtained and kept current for all children.
- 2. Daily attendance of children is recorded and maintained, documenting when each child enters and departs each day.
- 3. All accidents and incidents that occur at the facility are documented and shared with the parent or legal guardian on the day they take place.

### **Plan of Activities**

- 1. The facility prepares and implements a written daily plan of various age-appropriate activities that include active and quiet play and limit electronic media time (television, videos, movies or computer games).
- 2. The written plan of activities includes an age-appropriate program (implemented periodically) that assists children in preventing and avoiding physical and mental abuse.

**Additional Provider Comments**

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**Definition of Non-Public Schools**

A non-public school is a private school defined as an individual, association, copartnership, or corporation, or department, division, or section of such organizations, that designates itself as an educational center. A non-public school may be licensed or license-exempt pursuant to S. 402.3025, F.S. Charter schools do not fall into this category.

**About the Health and Safety Checklist**

Neither the Office of Early Learning nor the local early learning coalition has reviewed or verified the information in this health and safety checklist. If you have questions about the health and safety of your child care provider, check with your provider or contact the Early Learning Coalition of \_\_\_\_\_ at <phone number> or <email address> or the local licensing agency at <phone number>.