

## **FAMILY CHILD CARE HOME HEALTH AND SAFETY SCREENER**

**(April 4, 2017)**

<b>Delegate Name:</b>	
<b>Providers Name:</b>	
<b>Delegate/GO Staff Name:</b>	
<b>Grantee Staff Name:</b>	
<b>Date:</b>	
<b>Date:</b>	

1. Providers and/or Delegate staff will complete a health and safety screening for each home where children receive services prior to start up. Designated Grantee Staff will complete a health and safety screening for each home where children receive services within 30 days of start-up.
  - a. Mark each item in the screening form In Compliance (IC) or Out of Compliance (OC). Provide descriptions for items marked "Out of Compliance".
  - b. Determine issues, priorities, and those responsible for actions and improvements within each home and across the program.
2. Action will be taken to correct findings within 15 days of the Grantee review.
3. Grantee will summarize all Health and Safety Screenings (may attach COPA H & S Screener), obtain Governing Board approval and submit to the Office of Head Start within 60 days of program start-up.

*This screening does not include all applicable Head Start Program Performance Standards, nor does it cover every possible health and safety concern or replace each agency's responsibility to ensure ongoing compliance with local, state, and federal health and safety requirements.*

*A Family Child Care Home must be in the licensee's own home. A Family Child Care Home reflects a home-like environment where non-medical care and supervision is provided for periods of less than 24 hours. There are Small Family Child Care Homes and Large Family Child Care Homes. Small Family Child Care Homes provide care to no more than 6 children and Large Family Child Care Homes provide care to no more than 12 children.*

Requirements	Prior to Children Arriving- Provider/ Specialist		Within 30 Days of Start-up- Grantee		Comments	Date & Initial Comments
	IC	OC	IC	OC		
License/Clearances/Inspections (EnvHS 1.3/T22)						
A. The FCCH license is posted and accessible for viewing during operating hours. The facility sketch matches the areas which are accessible to children.						
B. If there are any Community Care Licensing Site Visit reports, they are posted and items have been corrected. If applicable, Type A violations have been reported to the agency per contract.						
C. If alterations have been made to the existing building or grounds, there is documentation of notification to licensing and a building inspection report.						
Air Quality and Overall Sanitation (EnvHS 1.1)						
A. Fresh air is available in rooms occupied by children.						
B. The environment is free of air pollutants, including mold, smoke, lead, pesticides, asbestos and herbicides, as well as soil and water pollutants.						
C. The home, including materials, equipment and household decor are free of any hazards that may cause harm to children, families or staff.						
D. All sewage and liquid waste is disposed of so not to expose children and adults.						
E. All garbage and trash is stored in garbage cans with lids that do not allow easy access by children.						
F. Toileting and diapering areas are separated from areas used for cooking, eating and children’s activities.						
G. Toilets and sinks are clean, in good repair, and easily accessible by children.						
H. There is no evidence of pests.						

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	IC	OC	IC	OC		
Emergency Alert Systems and Fire Safety (EnvHS 1.2)						
A. A fire extinguisher is available and easily accessible.						
B. The fire extinguisher has been serviced at least annually.						
C. There is a smoke detector system; it has been tested in the last 12 months and logged at time of test.						
D. Carbon monoxide detectors are properly installed and currently functioning.						
E. If the FCCH has a basement, and local health officials recommend radon detectors, they are installed.						
General Safety and Wellness (EnvHS 1.1)						
A. Unvented fuel-fired heaters are not present.						
B. Accessible electrical outlets/cords are covered and/or childproof.						
C. Windows and glass doors are constructed, secured and adjusted to prevent children’s injury and escape.						
D. Children are safe from the potential hazards posed by appliances.						
E. Firearms and other weapons are locked and stored in areas not occupied by children.						
F. The provider ensures that alcohol and drugs are inaccessible and not consumed when children are present.						
G. Current health certificates are available for pets documenting up-to-date immunizations and that pets are free from conditions that may pose a health threat.						
H. Pets are inaccessible to children at all times.						
I. Lighting is bright enough so children and adults can clearly see activities, materials, and pathways.						

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<b>J.</b> Heating and cooling system are designed to prevent injury to children and adults.						
<b>K.</b> Infectious disease policies and procedures are in place and include contacting parents and communicating with the local health department as necessary.						
<b>Evacuation Routes and Emergency Plans (EnvHS 1.2)</b>						
<b>A.</b> There is an operating phone in the home that is accessible to the provider.						
<b>B.</b> Exits are clearly visible.						
<b>C.</b> Emergency/Evacuation plans are posted.						
<b>D.</b> Emergency supplies, including parent and emergency contact information, first aid kits, etc. are readily available indoors/outdoors.						
<b>E.</b> All required policies and plans of action for health emergencies requiring rapid response (choking, asthma and seizure) are posted.						
<b>F.</b> Emergency lighting is available and working in case of power failure.						
<b>G.</b> Providers notify parents when children are sick or injured.						
<b>H.</b> A current parent or guardian emergency contact list is on file.						
<b>Safety and Cleanliness of Indoor and Outdoor Space (EnvHS 1.1)</b>						
<b>A.</b> The design of the indoor/outdoor play area and equipment promote the safety of children and are in good repair.						
<b>B.</b> Storage areas for poisons, firearms and other dangerous weapons are locked.						
<b>C.</b> Cleaning supplies, disinfectants, medications and other items which could pose a danger to children are inaccessible.						
<b>D.</b> All areas are clean and free of dirt and debris.						

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<b>E.</b> Provisions are made to ensure the safety, comfort and participation of children with disabilities.						
<b>F.</b> There is no tip over or tripping hazards in the children's areas.						
<b>G.</b> Toys, materials and furniture are age-appropriate.						
<b>H.</b> Environments are free of choking hazards.						
<b>I.</b> The program ensures that sleeping arrangements for infants are free of soft bedding materials. The crib mattress is set to the lowest position. Infants that can pull themselves up to a standing position sleep on a mat.						
<b>J.</b> The FCCH has sufficient indoor and outdoor usable space available to children.						
<b>K.</b> The provider ensures all children are supervised at all times.						
<b>L.</b> There is a fence to prevent children's access to all water hazards, such as swimming pools or other bodies of water, at all times.						
<b>M.</b> Indoor and outdoor premises are inspected <b>prior</b> to each use by children. Premises are kept free of undesirable and hazardous materials and conditions.						
<b>N.</b> Infant toys are cleaned and sanitized as needed between each use by individual children and at least weekly.						
<b>Handwashing (EnvHS 2.1)</b>						
<b>A.</b> Handwashing procedures are posted and followed at all times.						
<b>Spilled Bodily Fluids (EnvHS 2.1)</b>						
<b>A.</b> Bodily fluids are cleaned up using the proper procedure.						
<b>Diapering (EnvHS 2.1)</b>						
<b>A.</b> The diapering procedure is posted and followed at all times.						

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Medication Management (EnvHS 2.3)						
A. The provider can articulate the names of all enrolled children in the FCCH who are prescribed medications and have an up to date medication administration plan.						
B. All medications are in the original containers and include written orders from a physician that specifies dosage and length of time to administer the medication. Providers have been trained in medication administration and it is documented.						
C. Non-emergency medications are stored under lock and key.						
D. Medications are not expired and are stored per manufacturer’s guidelines.						
E. There is an incidental medical plan at the home.						
FCCH Group Ratio (EnvHS 3.2)						
A. The provider is in ratio at all times.						
Safe Outdoor Play Areas (EnvHS 3.3)						
A. Outdoor play areas are arranged so adults can see children and effectively supervise to prevent children from leaving and or getting into unsafe areas.						
Supervision (EnvHS 3.5)						
A. There is a current roster of enrolled children.						
B. Providers are within arm’s reach of children sitting in a high chair or on a changing table and holding any children who are bottle feeding.						
C. Providers/assistants are supervising and engaging with children in a way that ensures the children’s safety.						
D. An Active Supervision plan is posted and being implemented.						

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<b>Positive Guidance (EnvHS 3.6)</b>						
<b>A.</b> The providers/assistants use positive guidance when responding to undesired child behavior rather than corporal punishment, emotional or physical abuse, unnecessary restraint, humiliation, isolation, or denial of food, water, or bathroom privileges.						
<b>Nutrition/ Food Service/Dental (OHS/T22)</b>						
<b>A.</b> FCCH complies with CACFP food safety and sanitation guidelines.						
<b>B.</b> Individual nutritional needs and feeding requirements are met for all children that comply with USDA nutrition requirements. Child Meal Patterns and menus are posted.						
<b>C.</b> Foods that pose a high risk of choking for infants and toddlers as indicated in the Grantee's Health and Wellness Procedure (HS-33) are not served.						
<b>D.</b> Tooth brushing is done according to dental hygiene procedure and is promoted in conjunction with meals. Toothbrushes are stored in a sanitary manner that includes appropriate air flow, labeled by child name and brushes do not touch when stored.						
<b>Proper Handling of Breast Milk/Formula (EnvHS 2.2)</b>						
<b>A.</b> There is proper refrigerated storage and handling of breast milk and formula according to USDA guidelines.						
<b>B.</b> Prepared bottles/cups are labeled with the child's name, date and time of preparation.						

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Transportation (OHS/T22)						
A. There is evidence of Pedestrian Safety Education for both child and family within 30 days of each child’s first day of attendance.						
B. Transportation is not provided for children enrolled in a Head Start or EHS-CCP program.						

**Comments:**