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HEALTH AND SAFETY SCREENER GUIDANCE

(April 4, 2017)

- 1. Delegate/Grantee Op staff will complete a health and safety screening for each classroom where children receive services prior to start up. Designated Grantee Staff will complete a health and safety screening for each classroom 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 classroom 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.

Requirements	Guidance
License/Clearances/Inspections	(EnvHS 1.3/T22)
A. The facility license is posted and accessible for viewing.	Review license for approved capacity
 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 Grantee per contract. Air Quality and Overall Sanitat 	 Ask staff if they have had a licensing visit within the past 30 days If they have had a visit within the past 30 days, review posting If a Type A violation was issued, posting must be displayed for 12 months, and all parents currently enrolled must have a signed LIC. 9924 "Acknowledgement of Receipt of Licensing Report" on file
A. Fresh air is available in rooms	
A. Fresh air is available in rooms occupied by children.	 Fresh air would include one of the following: Windows Doors Air conditioning Air purifier
B. The environment is free of air pollutants, including mold, smoke, lead, pesticides, asbestos, and herbicides, as well as soil and water pollutants.	 Visual inspection that these items are not present: Peeling paint Mold Exposed insulation Pesticide odor If pesticides are used, staff is able to explain that children are not present when pesticides are applied Note any odors that might indicate presence of these pollutants
C. materials, toys, art and office supplies, and equipment are free of any hazards that may cause harm to children, families, or staff.	 Hazards could include: Protruding nails or screws Loose staples Blind cords Loose rugs Splintery wood Broken toys Poisonous or toxic plants (indoors or outdoors) Refer to "Caring for Our Children Standard 5.2.9.10" for list of plants Heavy mirrors or frames hanging on walls Items on shelves Adult purses within reach of children
D. All sewage and liquid waste is disposed of so not to expose children and adults.	 Sewage and liquid waste would include: Diapers Tissues Gloves Vomit Other bodily fluids Any Blood Borne Pathogen

Requirements	Guidance
E. All garbage and trash is stored in garbage cans with lids that do not allow easy access by children.	 This includes all inside and outside garbage cans in the children's environment Garbage cans and lids should be clean
F. Toileting and diapering areas are separated from areas used for food preparation, service, cooking, eating, and children's activities. Sanitization supplies are available for exclusive use in the area and out of reach of children.	• The designated area may be in the same room
G. Toilets and sinks are clean, in good repair, and easily accessible by children. Licensing waiver is in place for facilities that do not meet Title 22 toileting guidelines.	 Easily accessible: Step stools are available for children if needed Infants are held up to the sink for handwashing Supplies include toilet paper, hand soap and disposable paper towels Review waiver posted with center license One sinks/toilets required for each 15 children
H. There is a pest management program in place and chemicals for controlling pests are not in use while children are present.	 Staff are able to describe system for pest control Traps (sticky paper, ant bait) of any kind should not be in the children's environment
Emergency Alert Systems and F	ire Safety (EnvHS 1.2)
A. A fire extinguisher is available and easily accessible in every classroom.	 Extinguisher should not be placed where it can roll or fall on children If within child's reach, it is required to mount the extinguisher to the wall
B. The fire extinguisher has been serviced at least annually.	 Tag on fire extinguisher indicates annual service date within the last 12 months Staff has initialed the back of the tag, indicating monthly monitoring has occurred to ensure it is fully charged (in the green)
C. There is a smoke detector system; it has been tested in the last 12 months and logged at time of test.	 Test the smoke detector system at time of visit (with minimal interruption to children's routine) Review test log Staff can describe process for testing system
D. Carbon monoxide detectors are properly installed and currently functioning. They have been tested in the last 12 months and logged at time of test.	 Installation locations vary by manufacturer Detectors should not be installed directly above or beside fuel-burning appliances Detector should not be placed within fifteen feet of heating or cooking appliances or in or near very humid areas such as bathrooms Test the system: Check the indicator light Press the test button Check expiration date
General Safety and Wellness (En	
A. Unvented fuel-fired heaters are not present.	Examples of an unvented fuel-fired heater would include: Portable heaters

Requirements	Guidance
	Propane heatersGas powered heaters
B. Accessible electrical outlets/cords are covered and/or childproof.	 All indoor and outdoor outlets have safety plugs Surge protectors have outlet covers
C. Windows and glass doors are constructed, secured, and adjusted to prevent children's injury and escape.	 Secured and adjusted to prevent injury would include any of the following: a sticker or cling, small poster or picture, that creates a visual cue to child to avoid running into a glass door Windows that are sometimes open, should have screens, in good condition with no tears
D. Children are safe from the potential hazards posed by appliances.	 If kitchen is gated and children never enter the area, child safety knobs are not needed on the stove or locks on the refrigerator or oven If children do enter the kitchen, for any reason, child safety knobs on the stove and a refrigerator and oven lock are required Refer to Child Active Supervision Plan
E. Pets are inaccessible to children at all times.	 Refer to "Caring for our Children" Standard 3.4.2.3 Children should not be able to reach into cages or through fencing where animals are housed
F. Lighting is bright enough so children and adults can clearly see activities, materials, and pathways.	This includes naptime
G. Heating and cooling system are designed to prevent injury to children and adults. This includes burns from hot water.	 If heating or cooling system is located at child level, it should be blocked to prevent child access "Hand Test" hot water that is accessible to children (place hand under running water to ensure it will not burn child – not to exceed 120 degrees)
H. Infectious disease policies and procedures are in place and include contacting parents and communicating with the local health department as necessary.	Review exclusion policy
I. Indoor and outdoor space in EHS or HS centers used by mobile infants and toddlers is separated from general walkways and from area in use by preschoolers.	Observe for compliance
J. Infant and toddler cribs and cots are at least 3 feet apart.	Observe for compliance
K. Preschoolers napping equipment shall be arranges so that each child has access to a walkway.	Observe placement of cots/mats
L. The agency provides for maintenance, repair, safety and security of all Head Start facilities and equipment.	Written Policies/Procedures are in place to include work order protocol/prioritization for repairs

Requirements	Guidance
Evacuation Routes and Emergen	ncy Plans (EnvHS 1.2)
A. There is an operating phone that is accessible to staff.	 Cell phone is acceptable Phone should be taken outside in order to be considered accessible
B. Exits are clearly visible.	• Exit doors should be indicated with luminescent/lighted "Exit" signs
C. Emergency/Evacuation plans are posted.	 Emergency Evacuation map must be visible and clear, including colored or highlighted exit routes Emergency Evacuation map should be posted by each marked "Exit" door
D. Emergency evacuation drills are conducted and documented monthly.	Review evacuation drill log
E. Emergency supplies, including parent and emergency contact information, first aid kits, etc. are readily available indoors/outdoors.	 Staff is able to explain the Emergency Plan when asked First aid kits are checked and items replaced as needed every other month
F. All required policies and plans of action for health emergencies requiring rapid response (choking, asthma and seizure) are posted.	 Bulletin Board may refer to binder located below Required Bulletin Board Postings may differ with each agency
G. Emergency lighting is available and working in case of power failure.	A working flashlight is acceptableTurn on to check batteries
H. Staff notifies parents when children are sick or injured.	• Ask staff what they do when a child becomes ill during the day
I. A current parent or guardian emergency contact list is on file. Staff carries the list on field trips and during evacuations.	Review Emergency Cards
	r and Outdoor Space (EnvHS 1.1)
A. The design of the indoor/outdoor play area and equipment promote the safety of children and are in good repair.	 Equipment is appropriate height and accessibility for ages served No openings that could entrap a child's head or limbs (Note: between 3.5 and 9 inches) Absence of sharp edges, rust, choking, and or strangulation hazards, garbage, beverage containers and hazardous materials (glass, needles, animal feces, etc.) Equipment is stable and or secured to the ground (cubbies, shelves, etc.) Any climbing equipment, including Swing sets, Little Tykes climbing structures, slides, etc. need to have appropriate shock absorbing surfacing materials For guidance on appropriate "Shock absorbing surfacing materials", "Refer to "Caring for Our Children" Standard 6.2, 6.2.3 Note: Grass or play mats are not acceptable surfacing materials

Requirements	Guidance
B. Storage areas for poisons are locked.	 A "lock" is defined as: A key or combination operated mechanism used to fasten shut a door, lid, or the like (products advertised as child proof devices and safety latches are not considered locks unless they are key or combination operated) Poison is defined to include: only the most lethal substances, most often those designed specifically for killing, such as bug spray, rat poison, weed killer, etc. Refer to Title 22, Section 101238.4(d) and Family Child Care Home Section 102417(g)(4)
C. Cleaning supplies, disinfectants, medications and other items which could pose a danger to children are inaccessible.	 Something that is inaccessible is capable of being reached only with great difficulty or not at all because of its location or some kind of barrier or device that effectively prevents a child from getting to it A latch or magnetic device is an acceptable means of keeping items inaccessible. They must be correctly installed and sturdy enough to withstand pulls and tugs from children Anything labeled "Keep out of Reach of Children" should be kept inaccessible Examples of other items to be kept inaccessible to children: Sharp utensils and cutlery Plastic bags Small things children might swallow Shaving cream Mouthwash Toothpaste Perfumes Lotions Cosmetics Solvents Gardening equipment
D. All areas are clean and free of dirt and debris.	 Care Home Section 102417(g)(4) Areas would include, but are not limited to: Carpet Floors Furniture Toys and materials Counters Tables Chairs Shelves This would include all of the above, and any additional items in the outside environment
E. Provisions are made to ensure the safety, comfort, and participation of children with	 Ask staff if there are any children enrolled with an IEP/IFSP Refer to documentation on Child Success Team Results

Requirements	Guidance
disabilities.	 Form Lesson plans indicate individualized modifications as needed
F. There is no tip over or tripping hazards in the environment.	• Verify that furniture is stable on its own (Refer to "Caring for our Children" Standard 5.3.1.5)
G. Toys, materials, and furniture are age and developmentally appropriate.	 All items should be appropriate for ages enrolled Shelves should be low enough to allow children to access available items
H. Environments are free of choking hazards.	 If infants/toddlers are enrolled, there should be no small materials available that would pose a choking hazard (ex: beans, macaroni, sequins, broken crayon pieces, small rocks, Legos, etc.) Staples must be flush to the wall and not used under 3 feet when infants and toddlers are enrolled Staples should not be used over/near diaper changing area Best practice would be to use double sided tape or command strips
I. The program follows Procedure HS48, Safe Sleep for Infants, to reduce the risk of Sudden Infant Death Syndrome (SIDS), Sudden Unexpected Infant Death (SUID), and the spread of contagious diseases.	 Infant/Toddler mats/cribs are placed 3 feet apart to avoid spreading illness No soft bedding materials should be in an infant's sleep space (no blankets, bumper pads, soft mattresses, stuffed animals, pillows of any kind, comforters, etc.) No drop side cribs are in use All infants will be placed on their back to sleep Infants that can pull themselves to a standing position sleep on mats Children are not to be swaddled. If a child requires swaddling due to a medical condition, there must be a signed order from the doctor.
J. There is a fence to prevent children's access to all water hazards, such as swimming pools or other bodies of water and vehicular traffic.	 Other bodies of water would include: Fountains Canals Wading pools Swimming is not allowed. Refer to "Caring for our Children" Standard 1.1.1.5
K. Indoor and outdoor premises are inspected prior to each use by children. Premises are kept free of undesirable and hazardous materials and conditions.	 Review Daily indoor and outdoor checklists They are completed prior to children's arrival All hazards are removed prior to use by children
L. Infant toys are cleaned and sanitized as needed between each use by individual children and at least weekly.	 Mouthed toys are sanitized daily Non-mouthed toys are sanitized weekly or additionally if illness occurs There is a sanitizing schedule and process to document when toys are sanitized

Requirements	Guidance
Handwashing (EnvHS 2.1)	
A. Handwashing procedures are posted and followed at all times.	 Situations that would require handwashing include (but are not limited to): upon arrival before and after diaper changing re-entering classroom from outside play before and after water or messy play after using restroom before and after meals after coughing or sneezing or wiping nose after handling garbage before food preparation before and after administering medications
	This applies to adults and children
Spilled Bodily Fluids (EnvHS 2.)	
A. Bodily fluids are cleaned up using the proper procedure.	 Non-latex gloves are worn Spills/fluids cleaned up immediately All areas cleaned and sanitized Contaminated materials placed in a bag and secured Refer to Procedure HS-5
Diapering (EnvHS 2.1)	
A. The diapering procedure is posted and followed at all times. Medication Management (EnvH	 Refer to agencies diapering procedure, which must include the following: Before bringing the child to the diapering area, washed hands and brought supplies to the area Wear gloves/Put on clean gloves before putting clean diaper on child. Always kept a hand on the child Cleaned the child's diaper area Washed the child's hands and returned child to the supervised area Cleaned and disinfected the diaper changing surface Washed hands with soap and water for 20 seconds
A. Staff can articulate the names of	
all enrolled children who are prescribed medications and have an up to date medication administration plan.	 Ask staff if there are any enrolled children currently prescribed medication Review medication administration plans
B. All medications are in the original container and include written orders from a physician that specifies dosage and length of time to administer the medication. Staff has been trained in medication administration and it is documented.	 Check all medications A prescription and Consent for Medication form is required for all medications, including over the counter items such as diaper rash cream, sunscreen, lotions, Tylenol, etc.

Requirements	Guidance
C. Non-emergency medications are stored under lock and key.	• Child Epi-Pens and asthma inhalers are stored in an unlocked location, out of reach of children that is easily and quickly accessible to staff in case of allergic reaction (indoors and outdoors). Refer to Title 22 101226(e)(1-6)
D. Medications are not expired and are stored per manufacturer's guidelines.	Check expiration datesReview label for storage guidelines
E. There is an incidental medical plan.	• All sites should have an incidental medical plan. Refer to Title 22 101173
Group Ratio (EnvHS 3.2)	
A. The class is in ratio at all times.	 How many children are currently present in the group? How many staff is present? Preschool 1:10 (Blended program 1:8) Infant/Toddler 1:4 (group size of 8) (Blended program 1:3) Same ratios apply at naptime Refer to Child Active Supervision Plan
Safe Outdoor Play Areas (EnvH	S 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.	 Refer to Child Active Supervision Plan Pay close attention to blind spots, for example, playhouses, corners, sheds, structures that prevent an adult from seeing a child
Supervision (EnvHS 3.5)	
A. Children are visually supervised at all times.B. Staff is within arm's reach of	 Refer to Child Active Supervision Plan Observe for appropriate supervision Observe for compliance
children sitting in a high chair or on a changing table and holding any children who are bottle feeding.	
C. Staff is supervising and engaging with children in a way that ensures the children's safety.	 Adults can visually see all children Children are not engaging in dangerous activities, such as standing on tables, climbing fences, fighting, etc.
D. An Active Supervision plan that includes all required elements is posted by the center license and being implemented	 Review plan Plan must be current, signed by staff, and approved by Administrator
being implemented.	• Observe to ensure plan is being followed
E. Staff can articulate the agency's procedure that ensures children are released only to designated adults.	 Ask staff about their process when an unfamiliar adult arrives to pick up a child If child is released to an Early Intervention Staff, appropriate release form is in child's file (R-9)
F. Signatures on sign out sheets match names listed on child emergency card.	Spot check sign out sheet for appropriate signatures
G. All children in attendance are signed in.	Review daily sign in sheetParents/guardians are using full signatures

Requirements	Guidance
Positive Guidance (EnvHS 3.6)	
A. Staff 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.	 Positive guidance would include actions such as: Redirection Conscious Discipline strategies Problem Solving Review of Rules
Nutrition/ Food Service/Dental (OHS/T22)
 A. The center complies with CACFP food safety and sanitation guidelines. B. Individual nutritional needs and 	 Check refrigerator/freezer temps (at or below 40 for refrigerator/0 or below for freezer) Kitchen counters, floors, refrigerator appears clean Staff should refer to their Food Program guidelines Ask if there are any children with food allergies or meal
feeding requirements are met for all children that comply with USDA nutrition requirements. Child Meal Patterns, Justice for All and menus are posted.	 Ask if there are any children with food allergies of meal accommodations Review completed meal accommodation forms Menu should be posted Child's Meal Pattern should be posted "Justice for All" information posted
C. 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.	 Review menu to ensure these foods are not being served Observe a meal time (when possible)
D. Tooth brushing is done according to dental hygiene procedure HS18 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.	 Observe tooth brushing (if possible) Inspect toothbrushes and holders for labeling and air flow Review toothpaste for expiration dates Ensure toothbrushes are changed every 3 months or as needed
Proper Handling of Breast Milk	/Formula (EnvHS 2.2)
A. There is proper refrigerated storage and handling of breast milk and formula according to USDA guidelines.	Refer to Procedure HS-46
B. Prepared bottles/cups are labeled with the child's name, date and time of preparation.	Check prepared bottles and cups for labeling
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.	Review Activity Plans or other documentation (Parent Orientation information, Parent Meeting documents)

Comments: