



Health & Safety Core Standards Reference Chart For License Exempt Programs Receiving Subsidy

Effective July 2025

	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
				Non-compliance = 1 point	Non-compliance = 2 points	Non-compliance = 6 points	10 points - Potential CAPS Dismissal
Staff: Child Ratios	<p>The Staff:child ratios for a mixed-age group shall be based on the age of the youngest group of children that includes more than twenty percent (20%) of the total number of children in the mixed-age group.</p> <p>Evaluate Staff: Child ratios based on a head count, ask ages to determine 20% (if applicable)</p> <p style="text-align: center;"> Infants (less than 1 year old or children who are under 18 months & not walking) 1:6 One-year olds (who are walking) 1:8 Two-year-olds 1:10 Three-year-olds 1:15 Four-year-olds 1:18 Five-year-olds 1:20 Six-year-olds and up 1:25 </p>						
Required Staff: Child ratios and group size are maintained	If no children are present	If children are grouped only In mixed age groups	If additional children arrive and program Staff immediately reconcile ratios (Adequate Staff available in the building in order to immediately reconcile and comply with Staff: Child ratios)	NA	Ratio citation with or without an incident and/or injury with no medical attention or with medical attention as a precaution	Ratio citation with an incident and/or injury requiring professional medical attention OR could be seriously detrimental to the child(ren)	Incident resulting in death, extreme or permanent injury
Mixed-age groups: Staff: Child ratio based on youngest age group that makes up more than 20% of the group	If no children are present	If there are no mixed age groups	If additional children arrive and program Staff immediately reconcile ratios (adequate Staff available in the building in order to immediately reconcile and comply with Staff: Child ratios)	NA	Ratio citation with or without an incident and/or injury with no medical attention or with medical attention as a precaution	Ratio citation with an incident and/or injury requiring professional medical attention OR could be seriously detrimental to the child(ren)	Incident resulting in death, extreme or permanent injury

	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
Supervision	Children shall be supervised at all times. "Supervision" means that the Informal Provider is physically present in the area where children are being cared for and is providing watchful oversight to the children. The Informal Provider must be alert, and able to respond promptly to the needs and actions of the children being supervised.						
Observe for adequate supervision, Staff members are physically present in the area and able to supervise all children.	If no children are present	Never	If Staff observed not circulating; Short term limited visibility (i.e. room dark at naptime or child behind cubbies) *If TA documented on previous visit, move to Low Risk	Brief break in watchful oversight (i.e., Staff steps over threshold of classroom, places something in hallway, or child briefly walks out of a supervised area without adult supervision and comes back); Staff responsible for two separate physical areas for a brief period of time or during nap time	Supervision citation with or without an incident and/or injury with no medical attention or with medical attention as a precaution	Supervision citation with an incident and/or injury requiring professional medical attention OR could be seriously detrimental to the child(ren) (i.e., leaving a child on the playground for an extended period of time)	Incident resulting in death, extreme or permanent injury
Comprehensive Background Checks	Every staff member with direct care responsibilities must have a Satisfactory Comprehensive Background Check Determination before the individual may supervise any child independently. A staff member with a preliminary fingerprint clearance must be supervised by a staff member with a Satisfactory Comprehensive Background Check Determination. No staff member with an Unsatisfactory Records Check Determination may be present at a program when any child is present for care. Review all CRCs for Director, Employees, Provisional Employees, and others present in facility.						
(1) Requires valid evidence of a satisfactory Fingerprint Records Check Determination be maintained at the Program for each employee and potential Director, Employee and Provisional Employee.	Never	Never	If planning to hire a new director, employee or provisional employee	Never	Satisfactory Comprehensive Records Check Determination not completed	Satisfactory Comprehensive Records Check Determination not completed and/or knowledge of a crime committed	Incident resulting in death, extreme or permanent injury or gross negligence that indicates a deficiency in the program operation.

Comprehensive Background Checks	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
<p>(2) Requires every program to have a current and valid satisfactory Comprehensive Records Check Determination on file prior to being present at the Program while any child is present for care. The Comprehensive Records Check Determination must have a Records Check Clearance Date that is no older than the preceding 12 months of the hire date; provided, however, if the Employee has had a lapse of employment from the childcare industry that lasted for 180 days (six (6) months) or longer, a new satisfactory Comprehensive Records Check Determination is required. Comprehensive Records Check Determinations expire after five years from the fingerprint date, which appears in the first paragraph of the records check determination letter as the “based on information received” date. Any Program must obtain a new records check determination letter after any six (6) month break in service regardless of the expiration date. All records check determination letters are portable to other facilities during the first year and may be ported to as many locations as needed.</p>	Never	Never	If planning to hire a new director, employee or provisional employee	<p>Records Check Clearance Date on Comprehensive Records Check Determination older than preceding 12 months of hire date OR Records Check Clearance Date on Comprehensive Records Check Determination is not older than the preceding 12 months of license date, but there was a lapse of employment from the industry greater than 180 days (6 months) or longer</p>	Satisfactory Comprehensive Records Check Determination not completed	Satisfactory Comprehensive Records Check Determination not completed and/or knowledge of a crime committed	Incident resulting in death, extreme or permanent injury or gross negligence that indicates a deficiency in the program operation.
<p>Diapering Areas and Practices</p>	<p>A hand washing sink with running heated water shall be located adjacent to the diapering area. 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. 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.</p> <p>Inquire about procedures or observe actual diaper change.</p>						

Diapering Areas and Practices	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
A hand washing sink with running heated water shall be located adjacent to the diapering area	If no diapered children are currently enrolled	If the program is not licensed for diapered children	Diapered room not in use; Diaper changing station and/or sink made adjacent during visit; Diaper table is movable; Warm water not used *If TA documented on previous visit, move to Low Risk	Sink not adjacent to changing station; Warm water is not available	No operable sink in diapering room	NA	NA
The diapering surface shall be smooth, non-porous, and equipped with a guard rail or straps to prevent falls. Between each diaper change, the surface shall be cleaned with a disinfectant and dried with a single-use disposable towel.	If no diapered children are currently enrolled	If the program is not licensed for diapered children	Turn textured side over for a smooth surface; Disinfectant not used according to manufacturer's instructions *If TA documented on previous visit, move to Low Risk	Changing pad has tears/non-smooth surface; Surface not properly disinfected; Missing rail(s) and/or safety strap(s) with no incident or injury	Missing rail(s) and/or safety strap(s) with an incident and/or injury with no medical attention or with medical attention as a precaution; There is evidence of isolated illness and confirmed lack of proper disinfection	Missing rail(s) and/or safety strap(s) with an incident and/or injury requiring professional medical attention; There is evidence of widespread illness due to lack of proper disinfection (by CDC or HD)	Incident resulting in death, extreme or permanent injury
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.	Never	If the program is not licensed for diapered children	NA	Food and/or food preparation items in the diapering area (bottles/cups, etc. that children have used)	Food prepared in and/or served from the diapering area	There is evidence of spread of illness due to use of diapering area for food preparation, serving food and/or placement of food or food related items (confirmed by CDC or HD)	Incident resulting in death, extreme or permanent injury
Discipline	Observe the teachers' interactions with children, ask about and review policy if children are napping or not present.						
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.	Never	Never	Observing inappropriate discipline methods: making a child face the wall for time out, a 4 y/r old standing in timeout for 5 min. instead of 4, children under 2 in timeout instead of redirection, behavior charts posted that use marks, colors, etc. by children's names *If TA documented on previous visit, move to Low Risk	Misuse or inappropriate use of time out or redirection; Staff encourages or does not intervene when a Parent disciplines their child within sight and/or hearing of other children; Staff convey understanding of discipline rules and report previous use of inappropriate discipline, such as popping a child's hand	Disciplinary action detrimental to child's physical or mental health which may or may not have resulted in an incident and/or injury with no medical attention or with medical attention as a precaution	Disciplinary action detrimental to child's physical health OR was seriously detrimental to a child's mental health with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent

	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
Pediatric First Aid & Pediatric CPR							
Observe for staffing in classrooms. Review staff files for valid documentation of successful completion of pediatric first aid and CPR. At least one staff person present in each classroom with children must have current certification.	Never	Never	If program is considering using a previously licensed classroom that is not currently in use but will begin housing children in the future.	Only one staff person present in the classroom with pediatric first aid and pediatric CPR training, but the training is expired.	No staff person present in the classroom with any evidence of pediatric first aid and CPR training <u>without</u> an incident and/or injury	No staff person present in the classroom with any evidence of pediatric first aid and CPR training <u>with</u> an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury or gross negligence that indicates a deficiency in program operation
Medications	Review Medication authorization/dispensation records on file. 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. The program 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.						
Parental authorization showing: Child's name, medication name, Rx number (if applicable), date(s) and time(s) to be given, dosage, Parent/Guardian signature & date authorizing	If medication has not been administered since last visit or since medication was last evaluated; If forms are inaccessible	If program does not administer any medication	If planning to dispense medication in the future; Isolated instance of incomplete paperwork other than missing parent signature *If TA documented on previous visit, move to Low Risk	Incomplete paperwork: missing date(s), prescription name and/or number, dosage, time(s), etc., Medication is on-site with no medication authorization, but not dispensed	Dispensed medication without authorization with no adverse reaction; Missing Parent/Guardian signature with no adverse reaction; Incorrect type/amount dispensed with no adverse reaction; Medication not dispensed as authorized	Dispensed medication without authorization with an adverse reaction; Missing Parent/Guardian signature with an adverse reaction; Incorrect type/amount of medication dispensed with an adverse reaction; Medication dispensed to the wrong child	Incident resulting in death, extreme or permanent
Dispensing records showing: Date(s), time(s), amount administered, adverse reaction, staff initials	If medication has not been administered since last visit or since medication was last evaluated; If forms are inaccessible	If program does not administer any medication	If planning to dispense medication in the future; Isolated instance of incomplete paperwork other than missing parent signature *If TA documented on previous visit, move to Low Risk	Incomplete dispensing record: not documenting adverse reaction(s) or not documenting N/A or None for no adverse reactions, missing date(s) or time(s) dispensed, initials, amount dispensed etc.	Dispensed medication not documented at all with no incident or injury	Dispensed medication not documented at all with an incident or injury (i.e. over medicating a child)	Incident resulting in death, extreme or permanent

Medications	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
Storage: Kept in a locked or inaccessible storage cabinet or container; separate from cleaning chemicals, supplies or poisons; refrigerated meds kept in leak-proof container	If medication has not been administered since last visit or since medication was last evaluated; If forms are inaccessible	If program does not administer any medication	If planning to dispense in the future	Medication stored with cleaning chemicals/supplies or poisons with no incident or injury; Medication accessible but not handled or ingested by a child (located in cubbies, drawer, etc.)	Medication handled with no incident or injury	Child ingested and/or handled medication with an incident and/or injury: Medication stored with cleaning chemicals/supplies or poisons with an incident and/or injury	Incident resulting in death, extreme or permanent
Physical Plant: Hazards	Evaluate for accessible hazards throughout program						
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. 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. 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.	Never	Never	Hazards in a room that are currently not in use for the day (after school room), Isolated minor hazards: brooms, dustpans, toothpaste, office supplies (stapler, white out), toilet brushes and plungers, etc. *If TA documented on previous visit, move to Low Risk **Soap that says "Keep Out of Reach of Children" never moves higher unless an incident and/or injury occurs	Hazards accessible with or without being handled by a child (plastic grocery bags, aerosol cans, items that say "Keep Out of Reach Children" etc.)	Serious/dangerous hazards handled by a child OR easily ingestible hazards (open container) that are accessible with or without being handled by a child which may or may not have resulted in an incident or injury with no medical attention or with medical attention as a precaution (cup of bleach on a shelf, sharp knife lying on a table, 3-gallon bucket of water)	Hazards accessible and handled or ingested with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury

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Playgrounds	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.						
Observe playgrounds for cleanliness/hazards; playground equipment for hazards/anchoring; fencing for hazards/height (measure); measure depth of fall zones under 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 the 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 ensure continuing resiliency.						
	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.						
(1) Fence or Approved Barriers. It is recommended that 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 should be kept closed except when persons are entering or exiting the area. If the outdoor play space has no fence or barrier, the program official must submit a plan to ensure children are protected from vehicular traffic, water hazards, and any other potential hazards while participating in outdoor play.	If severe weather alerts have been issued in the area; Per policy, a follow-up visit may be required to assess the playground	If the program does not have a playground	Children not outside and the gate is open *never move to Low Risk ; Isolated minor fencing issue in a limited area: small gap (less than 3.5 inches wide and no entrapment or escape hazard; Isolated damage to fence and hazardous area made inaccessible to children *If TA documented on previous visit, cite accordingly	Fence not four feet high; Minor fencing hazards: loose wires, bolts measuring over 2 threads, rust, splintering wood, potential impalement hazard, exposed sharp prongs, nails or screws, fence not secured, etc.; Gate open with no incident, while children on the playground; Potential entrapment hazard (gap that measures between 3.5 - 9 inches)	Not completely enclosed and child(ren) did not leave premises; Actual entrapment occurs, with an incident and/or injury with no medical attention or with medical attention as a precaution	Child left premises due to fence not completely enclosed, gate open, fence not four feet high; Entrapment or fence hazards with an incident and/or injury requiring professional medical	Incident resulting in death, extreme or permanent injury or gross negligence that indicates a deficiency in program operation

Playgrounds	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
(2) 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.	If severe weather alerts have been issued in the area; Per policy, a follow-up visit may be required to assess the playground	If the program does not have a playground	Isolated minor hazards: small area of chipped paint or rust, a single missing pedal or hand grip, open "S" hooks, portable equipment damaged beyond use *If TA documented on previous visit	Minor hazards: rusted chains, large areas of chipped paint, missing handles, pedals, grips, broken equipment sectioned off to make it inaccessible to children; No variety of equipment present; Equipment is not age-appropriate with no injury; Supervision is obstructed with no injury	Accessible hazards which prohibit safe use of the equipment: sharp edges, worn/broken hardware, broken/ingestible pieces; Hazardous OR non-age-appropriate equipment with an incident and/or injury with no medical attention or with medical attention as a precaution; Supervision is obstructed with an incident and/or injury with no medical attention or with medical attention as a precaution	Broken/hazardous/Non-age-appropriate equipment with an incident and/or injury requiring professional medical attention; Supervision is obstructed with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury or gross negligence that indicates a deficiency in program operation
(3) Fall-zone and Surfacing. Requires climbing and swinging equipment to have a resilient surface beneath the equipment and the fall zone from such equipment must be adequately maintained by the program to assure continuing resiliency.	If severe weather alerts have been issued in the area; Per policy, a follow-up visit may be required to assess the playground	If the program does not have a playground	Compacted resilient surfacing; Portable equipment is observed on a hard surface and can be moved during the visit; Isolated grass growing in resilient surfaces. *If TA documented on previous visit, move to Low Risk	Inadequate amount of resilient surface: Climbing equipment under 5 feet tall (more than 0 inches but less than 3 inches); Climbing equipment that is 5 feet or greater in height or swinging equipment (more than 0 in but less than 6 in); Inadequate fall zones	No resilient surface with no incident or injury	No/inadequate resilient surface with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury or gross negligence that indicates a deficiency in program operation
(4) 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.	If severe weather alerts have been issued in the area; Per policy, a follow-up visit may be required to assess the playground	If the program does not have a playground	Isolated minor hazards: small amount of trash/debris, minimal roots, sticks or branches; Mops or brooms outside of high traffic area; If one inch or less of standing water is observed *If TA documented on previous visit move to Low Risk	Widespread minor hazards: tripping hazards, sticks, branches, trash/debris; Presence of nests of and/or biting ants/stinging insects; Mops, brooms, or rakes accessible or in high traffic area; Accessible heating and cooling equipment; Standing water without a drowning hazard (1-2 in); Tools/equipment in an enclosed but unlocked shed (not accessed by children); With no incident or injury	Dangerous playground hazards: lawn mowers, tools, discarded equipment or appliances; Children accessed nests of and/or biting ants/stinging insects; Standing water with a drowning hazard (2 in or more); With or without an incident and/or injury with no medical attention or with medical attention as a precaution	Playground hazards with an incident and/or injury requiring professional medical attention (exposed nail causing an impalement/puncture injury, bitten by ants/stinging insects, exposed root causing broken arm, etc.)	Incident resulting in death, extreme or permanent injury or gross negligence that indicates a deficiency in program operation

	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
Safe Sleeping and Resting Requirements	<p>Crib Requirements. 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.) 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.</p> <p>Before a change of occupant, each mattress shall be cleaned with a disinfectant.</p>						
<p>Observe or inquire about all infant sleep safety practices.</p> <p>Observe the cribs used for sleeping infants.</p>	<p>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. Staff 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.</p> <p>Safe Sleep Environment. Staff 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 to a crib with a sleeping infant, such as, but not limited to, crib gyms, toys, mirrors and mobiles.</p>						
Cribs that meet CPSC and ASTM safety standards are provided for each infant	Never	If the program is not licensed for infants	If planning to care for infants in the future; Noncompliant crib(s) not being used, located in an area not used for childcare and removed from facility during the visit with sufficient compliant cribs available for # of enrolled infants	Noncompliant crib(s) not being used, located in an area not used for childcare and unable to be removed from facility during the visit with sufficient compliant cribs available for the number of enrolled infants	Noncompliant crib(s) in childcare area regardless of whether the crib is being used, which may or may not have resulted in an incident or injury with no medical attention or with medical attention as a precaution; Insufficient number of compliant cribs for number of enrolled infants which may or may not have resulted in an incident or injury with no medical attention or with medical attention as a precaution	Noncompliant crib(s) used with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury
Mattress: Firm, tight-fitting without gaps, at least 2 inches thick and covered with waterproof, washable material; Disinfected before change of occupant	Never	If the program is not licensed for infants	If planning to care for infants in the future; Noncompliant mattress not being used and located in an area not used for childcare	Mattress not two inches thick; Not covered with waterproof, washable material; Not disinfected before a change of occupant	Mattress is not tight-fitting or firm which may or may not have resulted in an incident and/or injury with no medical attention or with medical attention as a precaution	Mattress is not tight fitting or firm with incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury

Safe Sleeping and Resting Requirements	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
Sheets: Individual and tight fitting and changed daily or more often as needed and prior to the change of an occupant	If program licensed for infants, but none are currently enrolled and no sheets in use	If the program is not licensed for infants	If planning to care for infants in the future; If program serves infants, but none are currently enrolled and sheet(s) not tight-fitting on crib mattress; Isolated instance of a sheet not tight-fitting in an unoccupied crib and the sheet can be changed during the visit. *If TA documented on previous visit move to Low Risk	Crib sheet is not changed daily or more often as needed; Crib sheet not changed prior to change of occupant	Crib sheet not tight-fitting and crib in use, which may or may not have resulted in an incident and/or injury with no medical attention or with medical attention as a precaution	Crib sheet not tight-fitting with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury
<p>Staff shall place an infant to sleep on the infant's back unless the Parent has 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. When an infant can easily turn over from back to front and back again, Staff shall continue to put the infant to sleep initially on the infant's back but allow the infant to roll over into his or her preferred position and not re-position the infant. Sleepers, sleep sacks and wearable blankets that fit according to the commercial manufacturer's guidelines and will not slide up around the infant's face may be used when necessary for the comfort of the sleeping infant, however swaddling shall not be used unless the Informal Provider has been provided a physician's written statement authorizing its use for a particular infant that includes instructions and a time frame for swaddling the infant. Staff 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 and shall not attach objects or allow objects to be attached to a crib with a sleeping infant such as but not limited to crib gyms, toys, mirrors and mobiles.</p>							
Back to Sleep - Infant placed on back to sleep unless the Parent has 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	If program licensed for infants, but none are currently enrolled	If program does not serve infants	If planning to care for infants in the future	Physician's written statement missing specific instructions and/or time frames	Infant(s) not placed on back to sleep with no physician's written statement and no incident or injury; Infant(s) allowed to sleep in equipment not approved for infant sleep without an incident or injury	Infant(s) not placed on back to sleep with an incident and/or injury; Infant(s) allowed to sleep in equipment not approved for infant sleep with an incident or injury	Incident resulting in death, extreme or permanent injury

Safe Sleeping and Resting Requirements	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
Objects in or attached to crib - No objects shall be placed or allowed in or attached to the crib with a sleeping infant	If program licensed for infants, but none are currently enrolled	If the program is not licensed for infants	If planning to care for infants in the future; Objects in or on an unoccupied crib	NA	Objects in or attached to a crib with a sleeping infant (such as but not limited to toys, pillows, quilts, comforters, bumper pads, sheepskins, stuffed toys, blankets, other soft items, crib gyms, toys, mirrors and mobiles) without an incident or injury	Objects in or on a crib with a sleeping infant (such as but not limited to: toys, pillows, quilts, comforters, bumper pads, sheepskins, stuffed toys, blankets, other soft items, crib gyms, toys, mirrors and mobiles) with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Swimming Pools & Water-Related Activities	Review the last swimming activity for parental permission and ratios; Ratios are based on the number of children who had proof that they could swim, if pool is located at the program, check that it is inaccessible; Review lifeguard certification						
All swimming & wading pools shall be inaccessible to children except during supervised activities	If there is no pool on the premises	If there is no pool on the premises	If planning to provide swimming activities in the future; Wading pool without water is accessible, if children not outside and the gate to the pool is unlocked	Pool area accessible but not accessed by children (gate latched but not locked)	Swimming pool accessible and accessed by child(ren) but no child(ren) entered the water; Wading pool used for water related activities accessible with no incident or injury	Swimming pool accessible and/or wading pool used for water related activities accessible with an incident and/or injury; Any other swimming related incident and/or injury	Incident resulting in death, extreme or permanent injury
Supervision in water more than two feet (requires lower Staff: Child ratios, lifeguard certification and verification of swimming distance) Proper ratios: Under 2 1/2 years: 1:2 2 1/2 to 4 years: 1:5 4 yrs & older who cannot swim a distance of 15 yds unassisted: 1:6 4 years & older who can swim a distance of 15 yds unassisted: 1:15	If haven't participated in swimming activities since last visit or since swimming was last evaluated	If no swimming activities are provided	If planning to provide swimming activities in the future	Incomplete/missing paperwork: no evidence of swim test or documentation of lifeguard certification missing (if program has pool on site)	No certified lifeguard and/or inadequate ratios/supervision with no incident or injury	No certified lifeguard and/or inadequate ratios/supervision with an incident and/or injury	Incident resulting in death, extreme or permanent injury

Swimming Pools & Water-Related Activities	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
<p>Supervision in water less than two feet (requires ratios/supervision in accordance with normal Staff: Child ratios)</p> <p>Proper ratios:</p> <p>Infants (less than 1 year old & Children who are under 18 mths & not walking) 1:6</p> <p>One yr olds (who are walking): 1:8</p> <p>Two year olds 1:10</p> <p>Three year olds 1:15</p> <p>Four year olds 1:18</p> <p>Five year olds 1:20</p> <p>Six year olds & up 1:25</p>	If haven't participated in swimming activities since last visit or since swimming was last evaluated	If no swimming activities are provided	If planning to provide swimming activities in the future	NA	Inadequate ratios/supervision with no incident or injury	Inadequate ratios/supervision with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Transportation	Check interior of vehicles; If vehicle is not onsite during visit, Specialist should discuss where vehicle is located and an appropriate time for it to be observed; Review a transportation or field trip passenger checklist, a sample of at least 4 emergency medical forms, and driver qualifications.						
Transportation ratios to be evaluated when home transportation evaluated (clarification - if large groups such as HS, Pre-K, children under 5 are transported, evaluate transportation ratios). Transportation ratios are to be evaluated when more than 36 children are transported at one time.							
All children shall be secured in a child passenger restraining system or seat safety belt in accordance with applicable state and federal laws	If the vehicle is not on site during the visit	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future	NA	No restraints or not restrained in accordance with state and federal laws (torn or frayed seat belts in use) with or without an incident and/or injury with no medical attention or with medical attention as a precaution	No restraints or not restrained in accordance with state and federal laws with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury

Transportation	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
Transportation ratios must be maintained: Driver + 1 Staff when: 3 or more child(ren) under age 3 7 or more children under age 5 18 or more children under age 5 Driver + 2 Staff when: 8 or more children under age 3 NA More than 20 children are under age 5	No additional staff person(s) required	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future	NA	Additional required staff are not present with no incident or injury	Additional required staff are not present with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Ratios: More than 36 children five years and over: One additional Staff (in addition to driver and monitor) per 20 additional children transported required	If never transport more than 36 children on one vehicle at a time	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future	NA	Transportation ratios not met with no incident or injury	Transportation ratios not met with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Transportation Plan: program & Passenger Information: Pick-up & delivery location & time, alternate delivery location, person authorized to receive the child, program name, driver, and phone number	If transportation records not available for review	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future; Isolated instances of incomplete paperwork other than load/unload *If TA documented on previous visit, move to Low Risk	Missing paperwork for more than 20% of transported children; Incomplete transportation paperwork: Missing program name, some children's pick-up or delivery information incomplete/missing, etc.	Missing/Incomplete paperwork with an incident and/or injury with no medical attention or with medical attention as a precaution	No passenger information/paperwork with an incident and/or injury requiring professional medical attention	Incident resulting in death, extreme or permanent injury
Emergency Medical Information: Maintained on vehicle for each child and includes child's full name, date of birth, allergies, special medical needs and conditions, current prescribed medications, name and phone number of the child's doctor, the local medical facility that the program uses and the telephone numbers where the Parent(s) can be reached	Transportation records not available for review	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future; Incomplete emergency medical information for 20% or less of transported children *If TA documented on previous visit, move to Low Risk	Incomplete emergency medical information for more than 20% of transported children; No emergency medical information for at least one transported child	Missing/Incomplete emergency medical information for all transported children with no incident or injury	No emergency medical information on the vehicle with an incident and/or injury	Incident resulting in death, extreme or permanent injury

Transportation	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
Child(ren) shall never be left unattended in a vehicle	If not observed during the visit; If haven't participated in transportation of any kind since last visit or since transportation of any kind was last evaluated	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future	NA	NA	Child(ren) left on a vehicle unattended	Incident resulting in death, extreme or permanent injury
Passenger Checklist: Complete checklist for each vehicle	Transportation records not available for review	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future; If using one checklist for multiple vehicles *If TA documented on previous visit, move to Low Risk	Unapproved transportation checklist being used resulting in missing components of documentation	No passenger checklist with or without an incident and/or injury with no medical attention or with medical attention as a precaution	No passenger checklist with an incident and/or injury that required professional medical attention	Incident resulting in death, extreme or permanent injury
Passenger Checklist: Checklist includes child's first and last name and children listed individually	Transportation records not available for review	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future	Missing/Incomplete checklist information: child(ren)'s complete name(s) OR each child not listed separately	NA	NA	NA
Passenger Checklist: Checklist marked with mark or symbol to account for loading/ unloading at each location	Transportation records not available for review	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future; Blanks on the checklist for children that were absent *If TA documented on previous visit, move to Low Risk	NA	Checklist without load/unload documented with or without an incident and/or injury with no medical attention or with medical attention as a precaution	Checklist without load/unload documented with an incident and/or injury that required professional medical attention	Incident resulting in death, extreme or permanent injury
Passenger Checklist: Arrival/departure time(s) for each location	Transportation records not available for review	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future	Missing/Incomplete checklist information: arrival/departure time(s)	NA	NA	NA

Transportation	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
Passenger Checklist: Turned over to Director or Director's designated Staff person following completion of trip	Transportation records not available for review	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future	Checklist not turned over to person in charge	NA	NA	NA
Checking the Vehicle - First Check: <ul style="list-style-type: none"> 1st check must be completed immediately upon unloading the last child Staff should physically walk through the vehicle Visually inspect all seat surfaces, seats, compartments, etc. Staff person checking, signs checklist Give the checklist to the 2nd designated Staff person 	Transportation records not available for review	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future	Missing documentation of a first check of the vehicle and/or no signature on form, but Consultant observed check completed	First check of vehicle not completed and/or no signature on form to verify vehicle was checked with no incident or injury	First required check of vehicle not completed/no signature on form to verify check with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Checking the Vehicle - Second Check: <ul style="list-style-type: none"> 2nd Staff person will check the vehicle as required Staff should physically walk through the vehicle Visually inspect all seat surfaces, seats, compartments, etc. Staff person checking, signs checklist Provides watchful oversight during vehicle inspection 	Transportation records not available for review	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future	Missing documentation of a second check of the vehicle and/or no signature on form, but Consultant observed check completed	Second check of vehicle not completed and/or no signature on form to verify vehicle was checked with no incident or injury; Second check of vehicle conducted and a child was found immediately during a seamless transition between the first and second check	Second required check of vehicle not completed/no signature on form to verify check with an incident and/or injury	Incident resulting in death, extreme or permanent injury

Transportation	NE	NA	TA	Low Risk	Medium Risk	High Risk	Low Risk
Checking the Vehicle - No 2nd person available: <ul style="list-style-type: none"> Driver will check the vehicle as required Report by phone to the Director or designated person in charge that check was completed Document time and verification of phone contact on checklist Sign checklist 	Transportation records not available for review	If the program does not provide routine transportation or transportation for field trips	If planning to provide transportation in the future	Vehicle check reported by phone, but call not documented	No check of vehicle was completed and/or no signature of check or phone call documentation with no incident or injury	No check of vehicle was completed and/or no signature of check or phone call documentation with an incident and/or injury	Incident resulting in death, extreme or permanent injury
Additional Non-Core CCDF Health & Safety Standards							
Immunizations			Some or none- TA				
Discipline				No written discipline policy			
Discipline				No appropriate discipline policy			
Discipline				Policy not communicated to staff			
Policies and Procedures <ul style="list-style-type: none"> 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? 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? Has the program reported serious injuries/incidents? 				If "No" is selected in any area, 1 point will be added to the Non-core standard overall			

Additional Non-Core CCDF Health & Safety Standards	NE	NA	TA	Low Risk	Medium Risk	High Risk	Extreme Risk
Prevention of infectious Diseases (Health & Hygiene Practices)				Sink(s), running water, soap and paper towels available			
Prevention of infectious Diseases (Health & Hygiene Practices)				Staff wash hands after toileting & before and after eating			
Prevention of infectious Diseases (Health & Hygiene Practices)				Children wash hands after toileting & before and after eating			
Pediatric First Aid & Pediatric CPR				All staff do not have First Aid & CPR within 45 days of employment			
Health & Safety Orientation Certificate				All Staff do not have Health & Safety Orientation Certificate within 90 days of employment			
Annual 10 hours of Health & Safety Training				All Staff have not obtained 10 hours of health & safety training annually			
Physical Plant				No Fire Marshal approval/annual fire inspection			