

Safety and Supervision Questions

Indicator	Yes	No	Ways to increase quality
<p>The program follows best practices regarding ratio and group size.</p> <p>Best practice recommendations:</p> <ul style="list-style-type: none"> • 0-12 months: 3-4 children per caregiver, max group size of 8 children • 13-23 months: 4 children per caregiver, max group size of 8 children • 2-year-olds: 4-6 children per caregiver, max group size of 12 children • 3-year-olds: 7-9 children per caregiver, max group size of 18 children • 4- and 5-year-olds: 8-10 children per caregiver, max group size of 20 children • 6- to 8-year-olds: 10 children per caregiver, max group size of 20 children • 9- to 12-year-olds: 12 children per caregiver, max group size of 24 children 			
<p>The program follows the state licensing standards for ratio and group size. Check with your state licensing agency for this information.</p>			

Supervision of Children	Yes	No	Ways to increase quality
<p>Children are actively supervised at all times, both indoors and outdoors, even when they are sleeping.</p>			
<p>All staff have completed comprehensive background checks.</p>			
<p>All staff have been trained on how to prevent, recognize, and report signs of child abuse.</p>			

Safe Sleep Practices for Infants and Toddlers	Yes	No	Ways to increase quality
Infants are put to sleep on their backs.			
The infant sleep spaces consist of a firm sleep surface, such as a mattress in a crib, covered by a fitted sheet with no other bedding.			
The infant sleep spaces are kept free of soft objects, toys, crib bumpers, and loose bedding.			
All child care staff, volunteers, and substitutes are trained on safe sleep practices to reduce the risk of Sudden Infant Death Syndrome (SIDS).			
All infants have their own designated sleep space that is the same every day.			
During rest time, staff can see and hear infants and toddlers at all times.			
Staff regularly checks on infants and toddlers when they are sleeping.			
Safe sleep infant practices are posted in the infant sleeping area as a reminder to all staff, volunteers, and substitutes.			
When infants are physically able to roll over, there is a sign posted by their bed indicating that the child can roll.			

Safety	Yes	No	Ways to increase quality
The indoor and outdoor environment is clear of safety hazards, such as cleaning supplies and tripping hazards.			
The child care center has been inspected for radon, lead, and asbestos.			
Toys are clean, safe, and within reach of children.			
If the program provides transportation, it is safe and reliable. All drivers are licensed and insured and children are properly restrained in the appropriate car safety seat that is appropriate for their weight and age.			
There are clear check-in and check-out procedures.			

Safety for Infants and Toddlers	Yes	No	Ways to increase quality
Caregivers are trained in infant CPR and their certification is current.			
Infants and toddlers are within sight and sound at all times.			
Outlets are covered/protected.			

Emergency Plans and Drills	Yes	No	Ways to increase quality
The program has a plan in place in case of an emergency or disaster, like a fire, tornado, flood, blizzard, earthquake or active shooter.			
The program practices safety drills once every month.			
The program has an emergency plan in case a child is injured, sick, or lost.			
The program has information about who to contact in an emergency.			

First Aid and Medication	Yes	No	Ways to increase quality
All staff have been trained on CPR and First Aid and certifications are current.			
The program has first aid kits that are regularly re-stocked.			
All medications are kept out of the reach of children.			
All staff have been trained and medications are labeled to make sure the right child receives the right amount of medication.			