

Northeast South Dakota Head Start Program Environmental Health and Safety Checklist

This checklist is used to assist staff in providing a safe and healthy environment for Head Start children.

Instructions:

Please review each item. Check and date the boxed yes or no. Yes responses are in the safe category.

Responding NO to any statement indicates that action should be taken immediately to correct the safety hazard.

Document on the last page the corrective action needed.

This checklist should be reviewed bi-annually to ensure validity. (September/October and January/February)

| Unit: Address: | SEPT / OCT | | JAN / FEB | |
|--|-------------------|-----------|------------------|-----------|
| | YES | NO | YES | NO |
| 911 posted at every phone in case of emergency. | | | | |
| Location of Emergency Systems Listed: | | | | |
| Central Alarm Control Box / Main Telephone Panel / Emergency Power Source / Water Shut Off / Natural Gas Line / Main Electric Panel | | | | |
| Emergency Procedures | | | | |
| 1. All exits clearly identified & emergency lighting available | | | | |
| 2. Schematic drawing of exit plans posted in each room (north at the top & locations of fire extinguishers) | | | | |
| 3. Current inspection of fire extinguishers Date: | | | | |
| 4. Extinguishers in proper locations & staff trained in use | | | | |
| 5. Fire extinguishers are checked monthly | | | | |
| 6. Smoke detectors & other alarms are checked monthly | | | | |
| 7. Consideration is given to the evacuation of children/adults with special needs (ask staff). | | | | |
| 8. Emergency procedure is established, posted, & practiced. <ul style="list-style-type: none"> • Fire Drills are practiced monthly • Tornado Drills (Sept/Oct & April/May) • Lock Down Drills | | | | |
| 9. Emergency Preparedness Log is posted & completed. | | | | |
| 10. Procedures for action in case of medical emergency | | | | |
| 11. First-aid information available to include choking | | | | |
| 12. Basic CPR instructions available | | | | |
| 13. Dental emergency chart | | | | |
| 14. Accurate emergency cards (ChildPlus Report#1520 – Contact Information) #containing current medical & dental provider & persons to contact accessible but not for public view | | | | |

| Environment | SEPT / OCT | | JAN / FEB | |
|---|-------------------|-----------|------------------|-----------|
| | YES | NO | YES | NO |
| 1. Appropriate space per child - 35 sq. feet per child in classroom and 75 sq. feet per child outdoors | | | | |
| 2. Pipes & radiators are inaccessible to children or covered to prevent contact | | | | |
| 3. Electrical cords are out of children's reach and kept out of doorways & traffic paths & not under carpets or rugs | | | | |
| 4. Unused electrical outlets are covered by outlet caps | | | | |
| 5. Medicine, in its original container, is kept in a locked place where children are unable to see or reach. (Unlocked if an emergency medication) | | | | |
| 6. Windows screens stay in place when pushed. Are windows & glass doors are constructed, adapted, or adjusted to prevent injury to children. | | | | |
| 7. Trash is in appropriate covered containers & is emptied & cleaned daily (exception - trash containers at the art table containing only paper) | | | | |
| 8. There are no poisonous plants | | | | |
| 9. Walls and ceilings are free from peeling paint & cracked or falling plaster. | | | | |
| 10. Floors are kept clean and in good repair | | | | |
| 11. No animals may be kept as pets | | | | |
| 12. Rooms are well lit | | | | |
| 13. Cleaning schedule is posted | | | | |
| 14. Indoor and outdoor spaces are kept clean | | | | |
| 15. Are children prevented from getting into unsafe and unsupervised areas? (ex. Exposed to vehicular traffic) | | | | |
| 16. Adequate staff is available to supervise children with the appropriate staff to child ratio (1:10) | | | | |
| 17. Hallways and stairs are free of clutter | | | | |
| 18. Hallways and stairs are well lit | | | | |
| 19. Hand railings are at child height and stable | | | | |
| 20. Stairway gates are in place when appropriate | | | | |
| 21. Doorways to unsupervised or unsafe areas are always locked unless this prevents emergency evacuation. These exits are equipped with a buzzer or bell. | | | | |
| 22. Flammable materials and equipment are not stored near furnace or hot water heaters | | | | |
| 23. All items not intended for children stored out of site/reach of children (staff/ volunteer personal belongings, etc). | | | | |

| | | | | |
|--|--|--|--|--|
| 24. Pesticides are applied only by a certified pest control operator & when children are not present. When did the children return to the center after spraying? | | | | |
| 25. Stable step stools are available when needed | | | | |
| 26. Electrical appliances are not in bathrooms | | | | |
| 27. Are areas for diapering & toileting separate from areas for cooking, eating, & children's activities? | | | | |
| 28. Does the program maintain a smoke-free environment on center & home base grounds? | | | | |
| 29. Has the center / home base been tested for lead? | | | | |
| 30. Does the staff follow hand washing procedures? | | | | |

| Equipment and Toys | SEPT / OCT | | JAN / FEB | |
|--|-------------------|-----------|------------------|-----------|
| | YES | NO | YES | NO |
| 1. Toys and play equipment are checked often for sharp edges and small parts | | | | |
| 2. Lead free paints are used on painted toys | | | | |
| 3. Balloons are to be used only under adult supervision | | | | |
| 4. Riding toys are stable and well balanced | | | | |
| 5. Outdoor play equipment & surface is checked daily to meet health & safety requirements. | | | | |
| 6. Toys are put away when not in use | | | | |
| 7. Art materials are labeled as non-toxic | | | | |
| 8. Art materials are stored in their original containers | | | | |
| 9. Teaching aids (projectors, etc) are put away when not in use | | | | |
| 10. Projectile toys (pop guns, darts) are not used | | | | |
| 11. Evidence that toys & classroom materials are cleaned according to the schedule | | | | |

| Emergency Preparation | SEPT / OCT | | JAN / FEB | |
|--|-------------------|-----------|------------------|-----------|
| | YES | NO | YES | NO |
| 1. All staff understands their roles & responsibilities in case of emergency / accident including appropriate paperwork. (accident report and follow-up) | | | | |
| 2. There are staff present who are knowledgeable in first-aid and CPR (Teachers, Teacher Assistants, Bus Drivers, Home Visitors and Home Visitor Assistants) | | | | |
| 3. First aid kits & fanny packs are checked regularly including buses & kept within easy reach. | | | | |
| 4. First aid kits include only items on the first aid supply list / supply list included | | | | |

| | | | | |
|---|--|--|--|--|
| 5. Body fluid clean-up kits including nonporous gloves are available and easily accessible | | | | |
| 6. First aid kits and fanny packs contain current first aid instructions, including the bus | | | | |
| 7. Staff instruct and practice with the children, “stop, drop, and roll” procedure | | | | |
| 8. First aid fanny packs and emergency cards are easily accessible and used when outdoors or on field trips | | | | |
| 9. Each site has Exclusions from the Child Care Setting | | | | |

| Bus Safety | SEPT / OCT | | JAN / FEB | |
|---|-------------------|-----------|------------------|-----------|
| | YES | NO | YES | NO |
| 1. Daily inspections completed | | | | |
| 2. Fire extinguisher checked & labeled | | | | |
| 3. Seat belt cutter available & labeled | | | | |
| 4. First aid kit on bus is checked & labeled | | | | |
| 5. Updated emergency cards for each child on the bus | | | | |
| 6. Body fluid clean-up kits including nonporous gloves | | | | |
| 7. Bus evacuation procedures established and practiced with children 3 times per year | | | | |

| Site Inspections / Required Postings | SEPT / OCT | | JAN / FEB | |
|---|-------------------|-----------|------------------|-----------|
| | YES | NO | YES | NO |
| 1. Fire Inspection complete | | | | |
| 2. Department of Labor Employee Rights Poster | | | | |
| 3. Non-Discrimination Poster | | | | |

Date _____

Date _____

Teacher/Home Visitor

Teacher/Home Visitor

Reviewer

Reviewer

Documentation for Corrective Action