



Monitoring and Quality Assurance Self-Assessment Checklist

VISIT DATE(S)
REVIEWER(S)

I. SITE INFORMATION						
SITE NAME	SITE SUPERVISOR			FSW, if applicable		
CLASSROOM	AGE RANGE	TEACHING STAFF OBSERVED				
II. HOURS OF OPERATION						
DAYS OF OPERATION	HOURS OF OPERATION	CLASSROOM HOURS				
	am through pm	am through pm				
M = Met	P = Partial	NM = Not Met	N/A = Not Applicable			
CONTENT AREA 1 – HEALTH, NUTRITION AND SAFE ENVIRONMENT EARLY HEAD START						
1.4 – HEALTH						
1.4.A Child's Health Status/Screenings					Notes:	
		M	P	NM	N/A	
1.	A completed emergency card is in each child's file.					
2.	There is evidence that staff talk with parents about how to familiarize their children in a developmentally appropriate way and in advance about all procedures they will receive while enrolled in the program.					
3.	There is a completed (signed and dated) consent form on file indicating parent understanding of the rationale and consent given for required screenings.					
4.	The program maintains written documentation when a parent or other legally responsible adult refuses to give authorization for health services.					
5.	Hearing observations are completed on all 1 st year children within 45 days of entry date.* (N/A permitted)					
6.	All subsequent hearing observations are on-going and current.* (N/A permitted)					
7.	Vision observations are completed on all 1 st year children within 45 days of entry date.* (N/A permitted)					
8.	All subsequent vision observations are on-going and current.* (N/A permitted)					
9.	All heights, weights and head circumferences are completed within 45 days of entry date and graphed within two weeks of measurement date.					
10.	All subsequent heights, weights and head circumferences are completed at each well baby check and are graphed within two weeks after the measurements were taken. (N/A permitted)					

11.	There is evidence that all parents are informed of screening results and receive a copy of the Body Mass Index (BMI) percentile graph within two weeks after measurements are taken.					
12.	All immunizations are up-to-date or complete according to the EPSDT guidelines and all documentation is accurate and kept. <i>(Up-to-date immunizations are not a condition for exclusion in home-based)</i>					
13.	All children have a TB risk assessment completed at enrollment. <i>(Within 45 days for home-based)</i>					
14.	All 2 nd year TB risk assessments are completed within 1 year from first risk assessment.					
15.	All children have a lead risk assessment completed at enrollment. <i>(Within 45 days for home-based)</i>					
16.	All 2 nd year lead risk assessments are completed within 1 year from the first risk assessment.					
17.	All required well baby checks are on file within 30 days of entry date (90 days for home-based).					
18.	All children have up-to-date well baby checks on file.* <i>(N/A permitted)</i>					
19.	All children have a blood lead level result recorded within 90 days of entry date and a 2nd blood lead level result recorded, if required (completed at 10-12 months and 24 months).* <i>(N/A permitted)</i>					
20.	All hemoglobin/hematocrit results are recorded within 90 days of entry date (completed at 9 months, 12 months and 24 months). * <i>(N/A permitted)</i>					
21.	All subsequent hemoglobin/hematocrit results are recorded within required time frame of periodicity table (9 months, 12 months and 24 months). * <i>(N/A permitted)</i>					
22.	All children are connected to a medical home.					
23.	All children are connected to a dental home.					
24.	All health histories are completed up to developmentally appropriate age at enrollment. <i>(Within 45 days for home-based)</i>					
25.	All 2 nd year health histories are reviewed and signed by staff and parents.					
26.	All parent volunteer TB results are completed and current. <i>(Required for all parents in home-based) *</i>					
1.4.B Health Care Tracking and Follow-Up		M	P	NM	N/A	Notes:
1.	Exclusion notices for missing initial well baby checks are sent 31 days after entry date or there is a documented verified appointment. <i>(Center-based only)</i>					
2.	Follow-up is documented on all children missing subsequent well baby checks.					
3.	Follow-up is documented on all children missing blood lead level results.					
4.	Follow-up is documented on all children missing a 90 day hemoglobin/hematocrit (hgb/hct) result. * <i>(N/A permitted)</i>					

5.	A referral for follow-up services is completed for all children whose TB risk assessment indicates follow-up is needed. <i>(N/A permitted)</i>					
6.	All data is up-to-date in ChildPlus within 60 days of entry date and reflects content of file.					
7.	Follow-up is documented thoroughly and on a regular basis for all children needing a medical home (i.e., flyers, parent meetings, etc.). <i>(N/A permitted)</i>					
8.	All health concerns identified on the prenatal history, health history or physical are addressed and thoroughly documented. * <i>(N/A permitted)</i>					
9.	Follow-up is documented thoroughly on a regular basis for all children needing dental treatment.					
10.	Follow-up is documented thoroughly on a regular basis for all children needing a dental home (i.e., flyers, parent meetings, etc.). <i>(N/A permitted)</i>					
11.	There is evidence that all parents have been provided information on oral health and hygiene.					
12.	Exclusion notices for missing initial well baby checks are sent 31 days after entry date or there is a documented verified appointment. <i>(Center-based only)</i>					
1.4.C Health Procedures		M	P	NM	N/A	Notes:
1.	All children receive a daily health check upon entering the center. <i>(Center-based only)</i>					
2.	If an injury occurs during hours of operation and medical attention is not required, an injury report is completed and the child's authorized representative is notified of the nature of the injury at pick up. <i>(Center-based only) (N/A permitted)</i>					
3.	If an injury occurs during hours of operation and medical attention is required, an Unusual Incident Report is made to Licensing. <i>(Center-based only) (N/A permitted)</i>					
4.	Staff ensure that a child with a short term injury (that cannot be readily accommodated) or a short term contagious illness is temporarily excluded from participating in program activities, home visits, and group socializations. (Exposure notice is posted- <i>Center-based only</i>)					
5.	Staff ensure that children are not subjected to long term exclusion solely because of their health care needs or medication requirements (unless reasonable accommodations cannot be made without fundamentally altering the nature of the program).					
6.	Individual records are maintained for all medications dispensed and the records are regularly reviewed with the child's parents. <i>(Center-based only)</i>					
7.	Medications are properly labeled and have not expired. <i>(Center-based only) (N/A permitted)</i>					
8.	All medication forms are complete. <i>(Center-based only) (N/A permitted)</i>					
9.	There is documentation in the classroom of individual authorization to administer medication. <i>(Center-based only) (N/A permitted)</i>					
10.	All children have a completed sunscreen permission form on file. <i>(N/A permitted for delegates)</i>					
11.	Medication is stored in a locked box or in a locked box in the refrigerator if necessary*. <i>(Center-based only) (N/A permitted)</i>					

12.	All staff are aware of the medication policy and procedures. <i>(Center-based only)</i>					
13.	Care plan(s) for children with special medical problems are current and accessible. <i>(Center-based only) (N/A permitted)</i>					
14.	The diapering procedure is posted in the diapering area. <i>(Center-based only)</i>					
15.	The diapering procedure is consistently followed. <i>(Center-based only)</i>					
16.	Each child being toilet trained has a written developmentally appropriate training plan/schedule and is being followed. <i>(Center-based only) (N/A permitted)</i>					
17.	There is evidence of daily communication between parents and staff regarding current feeding schedule, voiding pattern and developmental change in feeding (i.e. Daily Information Exchange). <i>(Center-based only)</i>					
1.4.D Hygiene (Hand Washing and Tooth Brushing)		M	P	NM	N/A	Notes:
1.	All adults wash their hands before and after food preparation, setting the table, eating and dispensing medications.					
2.	Proper hand washing procedures are posted in food preparation areas.					
3.	During the hand washing process, there is effective supervision and all children effectively wash their hands before setting the tables, before and after eating, and after handling pets, bodily fluids and toilet use/diapering.					
4.	All children receive instruction or assistance if needed with hand washing after toilet use/diapering.					
5.	Proper hand washing procedures are posted in the toileting area.					
6.	All adults wash their hands effectively after contact with blood or other bodily fluids, handling animals, treating a wound, toilet use/diapering and after removing gloves. (Blood borne pathogen procedure was followed if needed) <i>(N/A permitted)</i>					
7.	Tooth brushing occurs after a meal (within 30 minutes). <i>(Including at socializations, if applicable)</i>					
8.	During the tooth brushing process, there is effective supervision and assistance if needed with staff encouraging proper brushing techniques. <i>(Center-based only)</i>					
9.	All toothbrushes are in good condition (clean and bristles not frayed). <i>(Center-based only)</i>					
10.	All toothbrushes are labeled with the child's name and properly stored. <i>(Center-based only)</i>					
11.	Children are given a pea-sized amount of toothpaste dispensed separately. SOP uses an individual, disposable rinse cup. <i>(Center-based only)</i>					
1.5 - NUTRITION						
1.5.A Nutrition Tracking and Follow-Up		M	P	NM	N/A	Notes:
1.	All nutrition histories are completed for children at enrollment. <i>(Within 45 days for home-based)</i>					
2.	All 2 nd year nutrition histories are reviewed and signed by staff and parents.					

3.	Infant nutrition histories are on-going and up-to-date. <i>(N/A permitted)</i>					
4.	All nutrition concerns identified on the nutrition history or physical are addressed and thoroughly documented. <i>(N/A permitted)</i>					
5.	Proper consent forms are completed for nutrition referrals with parent signatures. <i>(N/A permitted)</i>					
6.	There is evidence of nutrition intervention/follow-up within 90 days of entry date. <i>(N/A permitted)</i>					
7.	Follow-up is documented on all children not receiving WIC services with hgb 10.0-11.5 g/dl, hct 30-34% (nutrition education provided). <i>(N/A permitted)</i>					
8.	Follow-up is documented on all children with hgb<10 g/dl, hct<30%, regardless of existing services. (Request for Follow-Up Services/Referral). <i>(N/A permitted)</i>					
9.	Follow-up is documented on all children not receiving WIC services with a BMI percentile between 85-94% (Request for Follow-Up Services to program health services within 60 days of enrollment). <i>(N/A permitted)</i>					
10.	Follow-up is documented on all children with BMI percentile <5% or ≥95%, regardless of existing services. (Request for Follow-Up Services/Referral). <i>(N/A permitted)</i>					
11.	A referral for follow-up services is completed for all children with a blood lead level of ≥10.0.					
12.	A referral for follow-up services is completed for all children whose lead risk assessment indicates follow-up is needed.					
1.5.B Menus and Meal Services		M	P	NM	N/A	Notes:
1.	All A.M. and full day children are provided breakfast. <i>(Center-based only) (N/A permitted if P.M. program)</i>					
2.	All meals start by the appropriately scheduled time: a minimum of 3 hours between breakfast and lunch (AM only) and a minimum of 2 hours between a meal and a snack, and on demand, as needed, for infants. <i>(Center-based only)</i>					
3.	Menu is posted and current. <i>(Center-based only)</i>					
4.	A Civil Rights poster (11X17 “And Justice for All” poster) is displayed in a prominent location. <i>(Center-based only)</i>					
5.	A CACFP Meal Pattern with required portions is posted at the center. <i>(Center-based only)</i>					
6.	Meal counts are recorded at the time of meal service each day and do not exceed daily attendance records/sign-in sheets. <i>(Center-based only)</i>					
7.	Staff serve meals according to menu unless written notification has been received of changes from food services. <i>(Center-based only)</i>					
8.	Menus are accessible to parents.					
9.	Home-based programs provide appropriate snacks and meals to each child during group socialization activities. <i>(Home Base option only)</i>					
10.	All meals are consumed on-site and no outside food is brought on-site. <i>(SOP only)</i>					
11.	All meals are offered family-style in a manner in which children serve themselves and					

	are seated in age-appropriate chairs/highchairs while eating.					
12.	Children participate in setting the table and are adequately supervised.					
13.	Adults sit at the same time as children, are eating the same foods, role modeling and supervising at every meal.					
14.	Children are offered and encouraged to join in at mealtimes and to try all foods, but are not forced.					
15.	Food is served in portions that are safe for a child to swallow.					
16.	There is sufficient time (approx. 30 minutes) for children to finish their meal and children are not rushed.					
17.	There is conversation during meals centered around the children's interests and includes foods and nutrition.					
18.	Children clear their place from the table after meals.					
19.	Each infant has their own feeding plan, and staff discuss current feeding theory with the parent/authorized representative (especially, the dangers of feeding honey to an infant in the first year of life). <i>(N/A permitted)</i>					
20.	Programs serving infants provide appropriate food (commercially prepared formulas and jarred baby food) regardless if the authorized representative elects to provide food. <i>(N/A permitted)</i>					
21.	Bottle-fed infants are fed at least once every four (4) hours and are held by an adult while fed. <i>(N/A permitted)</i>					
22.	Infant bottles, dishes and containers containing food brought by the infant's parent/authorized representative are labeled with the child's name and the current date. <i>(N/A permitted)</i>					
23.	Partially consumed formula/breast milk is discarded at the end of each feeding. <i>(N/A permitted)</i>					
24.	Infant food brought from home is discarded within 72 hours of the date on the container label.					
25.	Commercially prepared baby food in jars is transferred to a dish before being fed to infants, and any leftovers in the dish are discarded at end of the meal. <i>(N/A permitted)</i>					
26.	Bottles, bottle caps and nipples maintained at the infant care site are sanitized after each use. <i>(N/A permitted)</i>					
27.	Hot entrée food temperatures are taken and recorded daily on Quality Assurance sheets. <i>(SOP center-based only)</i>					
28.	Perishable food is fresh and refrigerated up to one hour prior to serving.					
29.	Proper procedure is followed when hot food temperatures fall below 140° and staff are aware of the reheating procedures. <i>(SOP center-based only)</i>					
30.	Proper procedures for sanitizing all food contact surfaces are followed and refrigerators, warmers, carts, and microwaves are clean.					

31.	All perishable leftover food is labeled, dated and thrown away after 48 hours (no hot entrées are kept). <i>(N/A permitted)</i>					
32.	Chemicals are not stored with food.					
1.5.C Special Diets		M	P	NM	N/A	Notes:
1.	If a special diet need is identified prior to enrollment, a special diet verification is obtained by a licensed physician, nurse or physician's assistant. <i>(N/A permitted)</i>					
2.	A completed request for follow-up is sent to the appropriate support staff if special diets are identified and menu modifications and food substitutions are developed. <i>(N/A permitted)</i>					
3.	Special diet forms are completed and copies are kept in the child's file.					
4.	Special diet foods are labeled with child's name.					
5.	Special diets with child's name and modifications/special diet are posted near meal prep area. <i>(In socialization binder for home-based)</i>					
1.6 – HEALTH SERVICES FOR PREGNANT WOMEN AND NEW MOTHERS * Only applies to programs serving pregnant women and newborns.						
1.6.A Prenatal Services		M	P	NM	N/A	Notes:
1.	The program provides enrolled pregnant women and other family members, as appropriate, with prenatal education on fetal development (including risks from smoking and alcohol), labor and delivery, and postpartum recovery (including maternal depression).					
2.	The program provides information on the benefits of breast feeding to all enrolled pregnant and new mothers within 45 days.					
3.	There is evidence that prenatal PIR is submitted upon enrolling pregnant women and again after delivery.					
4.	Prenatal Health Histories are completed and in the file for all enrolled pregnant mothers.					
5.	Prenatal Nutrition Histories are completed for all enrolled pregnant mothers.					
6.	A prenatal health visit was conducted by a registered nurse within the last trimester of the enrolled pregnant mother's pregnancy. * <i>(N/A permitted)</i>					
1.6.B New Mother Services		M	P	NM	N/A	Notes:
1.	A newborn health visit was conducted by a registered nurse within 2 weeks of the child's birth. * <i>(N/A permitted)</i>					
2.	Post-partum depression information is provided to new mothers.					
3.	Post-partum depression screening is completed within 6 months of delivery if necessary.					

1.7 – SAFE ENVIRONMENTS						
1.7.A Center Postings		M	P	NM	N/A	Notes:
1.	A “tobacco-free” sign/sticker is posted prominently.					
2.	“No outside food policy” and “no nut policy” postings are visible upon entering the center (SOP only).					
3.	Community Care License (203A) is posted prominently.					
4.	The Emergency Disaster Plan (LIC 610) is posted prominently with up-to-date staff assignments.					
5.	Earthquake Preparedness Checklist (LIC 9148) is completed/implemented and attached to the Emergency Disaster Plan (LIC 610).					
6.	If a type A deficiency was received in the last 12 months, the deficiency notice is prominently posted for 30 days from the date of receipt.					
7.	Doors are free of paper postings.					
8.	Emergency evacuation procedures are posted.					
1.7.B Office Inspection		M	P	NM	N/A	Notes:
1.	Electrical outlets are covered with approved safety covers when not in use.					
2.	Cleaning agents, flammable or poisonous supplies are labeled and stored in locked cabinets or out of reach of children.					
3.	Doors are free of paper postings.					
4.	Trash containers are away from a heat or flame source.					
5.	Center temperature is maintained between 68 degrees and 85 degrees (in cases of extreme heat, center temperature cannot exceed 20 degrees less than the outside temperature).					
6.	Staff are aware of the off-site evacuation location.					
7.	The center is smoke, lead, pesticide, water and dirt contaminant free.					
8.	There is an easily identified adult restroom.					
9.	Type A deficiency notice is in licensing file, if applicable.					
10.	There is proof on file that the Type A deficiency has been cleared, if applicable.					
11.	There is evidence on file that parents of children enrolled in the last 12 months have received notice of the deficiency, if applicable.					
12.	There is evidence that decorative materials such as curtains are treated with flame retardant.					

13.	Required staff is certified in first aid and CPR with documentation.					
14.	There is evidence of earthquake, off-site evacuations and fire drills performed per established schedule.					
15.	Material Safety Data Sheet (MSDS) book is easily accessible and all staff are aware of the MSDS.					
1.7.C Kitchen/Food Preparation Area Inspection		M	P	NM	N/A	Notes:
1.	Hot water registers no less than 105 degrees and no more than 120 degrees, if applicable.					
2.	Flammable and dangerous supplies are stored in locked cabinets or out of reach of children.					
3.	Garbage containers are covered and contents are disposed of properly.					
4.	Trash containers are away from a heat source.					
5.	The refrigerator and microwave are clean.					
6.	Food warmer and food cart are clean.					
7.	Food preparation areas is separate from the eating, restroom, diaper changing, and play areas.					
8.	Food preparation area including counters, tabletops and floors are clean/swept.					
9.	Refrigerators have a thermometer located in the back and registers 40 degrees or less; freezers have a thermometer in the back and registers 0 degrees.					
1.7.D Restroom Inspection/Observation		M	P	NM	N/A	Notes:
1.	Hot water registers no less than 105 degrees and no more than 120 degrees, if applicable.					
2.	Restrooms are easily accessible to children.					
3.	Restroom is separate from areas of cooking, eating or children's activities.					
4.	Items needed for hand washing and toileting are easily accessible to children.					
5.	Children's sinks are at child's level or accessible by stable safety step.					
6.	In general, the restrooms are clean, free of odor and well-maintained.					
1.7.E Classroom Inspection/Observation		M	P	NM	N/A	Notes:
1.	Accurate emergency numbers are posted near the telephone in each classroom.					
2.	Procedures for poisoning, CPR, choking and dental emergencies are posted in each classroom.					
3.	First aid manual is located in each classroom and is accessible to staff.					

4.	An onsite evacuation map is prominently displayed by the door in each classroom.				
5.	Exits are clearly marked with signage in each classroom.				
6.	Exits in each classroom are unobstructed and have a 3 foot clearance.				
7.	Fire extinguishers are mounted, accessible and clearly marked in every classroom.				
8.	Fire extinguishers are serviced annually from date of last inspection and evidenced by service tag.				
9.	There are working smoke detectors in each classroom.				
10.	There is a working fire alarm or sprinkler system in each classroom.				
11.	Electrical outlets are covered with approved safety covers when not in use.				
12.	Electrical cords and surge protectors are out of reach of children.				
13.	Electrical cords do not obstruct foot traffic or doorways.				
14.	Windows can be locked from the inside.				
15.	Window screens are in good repair and free of debris, if applicable. (N/A permitted)				
16.	Cleaning agents, flammable or poisonous supplies are labeled and stored in locked cabinets or out of the reach of children.				
17.	Decorative materials or postings are not blocking exits or emergency equipment.				
18.	Decorative materials or postings cover 25% or less of wall space.				
19.	Classroom decorations are a minimum of three (3) feet away from exits or adjoining walls.				
20.	Doors are free of paper postings.				
21.	Garbage containers for disposing food or diapers are covered and contents are disposed of properly.				
22.	Trash containers are away from a heat or flame source				
23.	Any items used by classroom pets are kept out of the reach of children.				
24.	In general, the classroom is clean, free of odor and well-maintained.				
25.	Diaper changing table has a padded surface no less than one-inch thick, covered with washable vinyl or plastic and has raised sides at least three inches high.				
26.	Diaper changing table is in good repair and safe condition.				
27.	The diaper changing table is located within arm's reach of a sink (while in use) and is at no time located in the kitchen/food-preparation area.				

28.	The diaper changing table and pad are disinfected after each use and disposable changing paper is discarded.				
29.	The diaper changing area (walls, floor, countertops, sinks, drawers, cabinets and hygiene items) is washed and disinfected after each diaper change if touched or splashed with residue during the diaper changing process.				
30.	Children needing diaper changes are diapered on a changing table/pad and never left unattended while on the changing table.				
31.	Soiled disposable diapers are placed in a labeled, airtight container.				
32.	Soiled diaper container is sanitized and emptied daily in an outside garbage container.				
33.	A crib (standard size six-year crib or porta-crib) or mat is available for each infant. Floor mats are used by infants who can climb out of a crib, if applicable.				
34.	Cribs meet the following requirements: mattresses are set at the lowest position, side rails are locked in the highest position, and crib slats are spaced no more than 2 3/8 inches, if applicable.				
35.	All cribs are equipped with firm, moisture-resistant mattresses and contain no soft bedding materials such as comforters, pillows, fluffy blankets or stuffed toys, if applicable.				
36.	Napping mats and/or cribs, if applicable, are spaced three (3) feet apart when in use to allow for easy access to each child.				
37.	Napping mats, if applicable, are stored so that each mat and bedding does not touch the other.				
38.	Napping mats are disinfected weekly, crib mattresses daily and both when soiled, if applicable.				
39.	Bedding is laundered weekly and changed daily when soiled, or when the crib/mat is occupied by another child, if applicable.				
40.	Soiled bedding is placed in a suitable container and inaccessible to infants, if applicable.				
41.	Rugs have a non-slip backing or strips to avoid slipping.				
42.	Doors used by children can be easily opened by staff and children.				
43.	Doors shut closed after entry or exit.				
44.	Doors have rubber gaskets to prevent finger pinching.				
45.	Heating/Cooling systems are out of reach of children.				
46.	Classrooms are free of portable heating/cooling devices including fans.				
47.	Drawers are closed to prevent tripping hazards				
48.	All exits have a three foot clearance.				
49.	Pull cords for blinds are out of reach of children and free of knots.				

50.	Step stools are safe and stable.					
51.	Children have access to drinking water.					
52.	First Aid kits are in every classroom, out of reach of children but accessible to staff.					
53.	First Aid supplies are in a closed secure container.					
54.	First aid kit is well stocked with fresh supplies.					
55.	Children’s belongings are stored separately from other children’s belongings.					
56.	Staff purses and backpacks are stored out of reach of children.					
57.	Staff who work with children wear closed toed shoes on a daily basis. <i>(SOP only)</i>					
58.	Toys are safe, do not contain sharp points, edges or splinters, and small parts cannot be pulled off and swallowed. Baby walkers and bouncers are not used.					
59.	There is a designated area for contaminated toys and toys are cleaned on a regular basis.					
60.	Indoor climbing equipment is over approved mats that extend six (6) feet from structure.					
61.	Indoor climbing equipment is a maximum height for the children’s ages (3 ft./3 years).					
1.7.F Playground Inspection/Observation		M	P	NM	N/A	Notes:
1.	Children have access to drinking water.					
2.	Outdoor area for EHS is physically separate from areas used by other children.					
3.	Outdoor areas are maintained and safe, free of trash, broken equipment, and standing water.					
4.	Outdoor areas are free of animal excrement and poisonous plants or berries.					
5.	Sandbox and sensory tables are clean and covered when not in use.					
6.	Wading pools are inaccessible to children without supervision and emptied after each use.					
7.	Outdoor area has some protection from the elements and is in good repair.					
8.	Exposed concrete and hard anchoring materials are covered.					
9.	Tree branches are trimmed and do not intrude on play area (7 foot clearance).					
10.	Bike and trike paths are separate from other equipment.					
11.	The playground slide has an enclosed top for children to rest and get into position.					

12.	Slides have a flat surface at the bottom to slow children down.					
13.	Bottom of slide is 11 inches or lower to the ground.					
14.	Play area is free of tripping hazards (i.e., roots, holes, etc.).					
15.	The playground layout minimizes possible injury to children.					
16.	The classroom and playground (of sites with a non-ambulatory license) are accessible to staff, parents and children with disabilities (i.e., ramps in good repair, furnishings not blocking pathways, etc.). <i>(N/A permitted)</i>					
17.	The playground equipment is over nine (9) inches of shock-absorbing material, if applicable.					
18.	Shock absorbing material extends at least six (6) feet clearance space from playground equipment.					
19.	Shock absorbing material extends at least six (6) feet from walkways, buildings and other structures.					
20.	The outdoor area is enclosed with a fence or natural barrier that allows for observation of children.					
21.	Outdoor fences/barriers have at least two (2) working exits.					
22.	Playgrounds have self-closing gates with self-latching mechanisms that cannot be opened by children.					
23.	Openings in outdoor playground equipment, fences or handrails are less than 3.5 inches or greater than nine (9) inches wide.					
1.3.G Disaster Preparedness		M	P	NM	N/A	Notes:
1.	Staff knows the primary off-site evacuation location and procedure.					
2.	A one-day supply of emergency food and water for staff and children is accessible and stored securely.					
3.	Emergency backpacks are well stocked, secured and accessible in each classroom.					
4.	Emergency cards are readily accessible for evacuation.					
5.	There is emergency lighting available in case of an emergency.					
6.	A Storm Station is accessible, plugged in and in working order. (SOP only)					
7.	Cabinets and bookcases are free of potential falling objects in the case of an earthquake or explosion.					

Performance Rating – Health Nutrition and Safe Environments (Early Head Start)

1.4 - HEALTH

1.4.A Child's Health Status/ Screenings				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
Total				

1.4.B Health Care Tracking and Follow-Up				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
Total				

1.4.C Health Procedures				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

14				
15				
16				
17				
Total				

1.4.D Hygiene (Hand Washing and Tooth Brushing)				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
Total				

1.5 - NUTRITION

1.5.A Nutrition Tracking and Follow-Up				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
Total				

1.5.B Menus and Meal Services				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
Total				

1.5.C Special Diets				
	M	P	NM	N/A
1				
2				
3				
4				
5				
Total				

**1.6 - HEALTH SERVICES
FOR PREGNANT
WOMEN AND NEW
MOTHERS**

1.6.A Prenatal Services				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
Total				

1.6.B New Mother Services				
	M	P	NM	N/A
1				
2				
3				
Total				

M = Met P = Partial NM = Not Met N/A = Not Applicable

1.7 - SAFE ENVIROMENTS

1.7.A Center Postings				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
8				
Total				

1.7.B Office Inspection				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
Total				

1.7.C Kitchen/Food Preparation Area Inspection				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
8				
9				
Total				

1.7.D Restroom Insection/ Observation				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
Total				

1.7.E Classroom Inspection/ Observation				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				

32				
33				
34				
35				
36				
37				
38				
39				
40				
41				
42				
43				
44				
45				
46				
47				
48				
49				
50				
51				
52				
53				
54				
55				
56				
57				
58				
59				
60				
61				
Total				

1.7.F Playground Inspection/ Observation				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
Total				

1.7.G Disaster Preparedness				
	M	P	NM	N/A
1				
2				
3				
4				
5				
6				
7				
Total				

M = Met P = Partial NM = Not Met N/A = Not Applicable