

Susquehanna Conference UMC
Health Safety Self-Inspection

Item	No Concern	Concern (Observation)	Actions Taken
GENERAL SAFETY			
The center has working fire extinguishers and smoke detectors out of the reach of children (<i>Inspection or expiration date posted on the tag attached to the fire extinguisher</i>)			
Electrical outlets accessible to children are covered			
Electrical cords shall be of good condition and are placed beyond children's reach. (<i>Frayed cords or cords with loose connections shall not be used. Injuries may occur when children pull appliances down on themselves by pulling on the cord or when children chew on the cord.</i>)			
Cleaning products, poisons and other dangerous items are stored in the original labeled containers inaccessible to children. (<i>Chemicals shall be used in a manner that will not contaminate play surfaces, food, or food preparation areas. When not in use, chemicals shall be kept in a room or cabinet inaccessible to children, separated from stored medications and food.</i>)			
A well-supplied first aid kit is available to staff and out of reach of children. <i>*(See attached first aid kit supplies list.)</i>			
The emergency exits are clearly identified and escape route clearly marked.			
Doorways and exits are free of debris and equipment to allow unobstructed passages.			
Employees are trained/observed to promptly/properly clean up spills.			
Stair treads are slip-resistant, leading edges are marked for visibility.			
Slip-resistant shoes are required and in use by employees.			
Tables, counters, and sinks are frequently washed with a solution of 1 part bleach to 10 parts water.			
Smocks/aprons are available and in use to prevent germ transmittal, esp. with respect to infant care.			
Red biohazard bags are available to segregate infectious waste.			

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ALL CLASSROOMS			
Walls, ceilings, floor, furnishing are in good repair, free from visible soil and in good condition. <i>(Wall, ceiling, floors and furnishings shall be free of chipped paint, broken furnishings and toys are in good repair)</i>			
Bathrooms are clean, in good repair and easily reached by children. <i>(Clean toilets and handwashing facilities shall be within 40 feet of the closest part of all indoor and outdoor play areas, children shall be able to easily open toilet doors from the inside or caregivers shall be able to easily open toilet-room doors from the outside. If toilets are not within sight or hearing of a caregiver, an adult shall accompany children younger than 5 years of age to and from the toilet areas.)</i>			
Garbage is disposed in a safe sanitary manner. <i>(Garbage containers shall be lined with plastic bag liners and shall be kept covered with tight-fitting lids. Garbage containing food particles disposed by children must be removed from the classroom after each meal). Garbage and rubbish shall be removed from the facilities on a daily basis.)</i>			
Toys, materials and furniture are made of nontoxic materials, and in good condition. <i>(Art materials; paints, glues, color pencils etc. are required to meet standards indicated by ASTM D-4236 on the labels.)</i>			
Signs are noticeable instructing employees to wash hands after handling cleaning chemicals, diapers, and allergens and before and after donning/doffing single-use gloves (following standard precautions).			
Written illness policy for sick children and staff is present and followed.			
Electric fans are inaccessible to children.			

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Stoves, microwaves, pipes and other hot surfaces cannot be reached by children. <i>(Inquire about cooking activities. Ask about safety procedures, if stove, microwave, toaster oven are used for cooking activities.)</i>			
Sharp furniture edges are cushioned.			
Medications are kept in original container, properly labeled, stored away from food, contain child-proof caps, refrigerated if needed and are inaccessible to children. <i>(Center shall have a written policy for the use of any prescription and non-prescription medication. The policy must include clear accurate instruction and medical confirmation of the child's need for medication, parents signed consent, procedures for labeling and storage and training of staff to administer medication.)</i>			
Strings and cords long enough to encircle a child's neck are not accessible to children. <i>(Window covering cords; cords or ribbons tied to pacifiers can become tightly twisted or can catch on crib corner posts or other protrusions; clothing strings can catch on playground equipment; all are frequently associated with strangulation of children.)</i>			
Caregivers directly supervise infants, toddlers, and preschool children by sight and hearing at all times.			
Gates are deployed in hallways, stairs to prevent child elopement.			
Other safety devices are in use, including doorknob covers, toilet seat covers, cabinet locks.			
Telephone with emergency contacts available (emergency assistance, Poison Control, parents, etc.)			
Tables/chairs unstacked when children are present.			
Heavy toys/items stored on low shelf or on floor.			
Employees pick up toys from floor, ensuring a clear walkway.			
All rugs/mats/carpets are secured and flat.			
Materials are organized to reduce clutter.			

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OUTDOOR			
The playground equipment is in good repair and safe condition (no sharp edges, splinters, cracks protruding parts etc.) <i>(Playground equipment shall be inspected for safety at regular intervals and the observations documented)</i>			
Outdoor areas are kept free of garbage, excessive dust, weeds, brush, high grass, standing water, and animal waste. <i>(Dust, weeds, brush, high grass are potential allergens. Standing water breeds insects)</i>			
Surfaces underneath indoor and outdoor play equipment that children can climb are covered with impact-absorbing materials.			
A play structure shall have no opening with a dimension between 3.5 and 9 inches to guard against entrapment.			
All play equipment shall have a minimum of 6' clearance from other structure. The front and rear of swing have the fall zone of twice the height of the swing.			
The outdoor play areas are arranged so all areas are visible to the staff at all times. <i>(This arrangement promotes the prevention of injury and abuse)</i>			
INTERACTIONS			
Hiring practices for employees are followed, including minimum age requirements, background checks, child clearances.			
Child to staff ratios understood and followed.			
Staff seem to enjoy being with children.			
Staff respond sympathetically to help children who are upset, hurt, or angry.			
Staff show respect for children. <i>(Listen attentively, makes eye contact, treat children fairly)</i>			

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Staff encourage the development of mutual respect between children and adults. <i>(Staff wait until children finish asking questions before answering; encourage children in a polite way to listen when adults speak)</i>			
Staff model good social skills. <i>(are kind to others, listen, empathize, cooperate)</i>			
Staff help children develop appropriate social behavior with peers. <i>(Help children talk through conflicts; encourage socially isolated children to find friends; help children understand feelings of others)</i>			
INFANT/TODDLER CLASSROOM			
The diaper changing area is located away from eating and food preparation area. <i>(The diaper changing area and food preparation area shall be physically separated. The changing area shall not be used for temporary placement of food or utensils or for serving of food. Food and drinking utensils shall not be washed in these sinks.)</i>			
Dispose soiled diapers in a plastic-lined, hands-free, covered trash can. Soiled cloth diapers and soiled clothing that are to be sent home shall be individually bagged. <i>(Soiled diapers shall be stored inside the facility in containers separate from other waste. Washable, plastic-lined, tightly covered receptacles, with a firmly fitting cover that does not require touching with contaminated hands and objects, shall be provided within arm's reach of diaper changing table.)</i>			
Employees wear disposable vinyl (non-latex) gloves when changing diapers, helping children use the toilet, wiping noses, brushing teeth, and administering first aid.			
Gloves are changed and hands washed with warm water and soap in between caring for each child, helping children in the bathroom, after changing diapers, before preparing food, before eating, and before leaving for the day.			

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Infant sleeping areas do not have soft beddings, pillows, fluffy blankets or stuffed toys.			
Infant cribs have slats spaced no more than 2-3/8" apart. No more than 2 fingers can fit between the mattress and the crib side. <i>(Children have strangled because their shoulder or neck became caught in a gap between slats or between mattress and crib side that was too wide)</i>			
Cribs, cots, sleeping mats or pads shall be placed at least 3 feet apart. <i>(Separate sleeping and resting reduces the spread of disease from one child to another.)</i>			
The minimum height from the top of the mattress to the top of the crib rail is 20". Cribs have secure latching devices and shall not have corner post extensions over 1/16". <i>(Corner posts present a potential for clothing entanglement and strangulation.)</i>			
Infants are placed on their back when they sleep. Infant's head shall remain uncovered. <i>(Unless the child has a note from a physician specifying otherwise, infants shall be placed in the supine (back) position for sleeping to lower the risks of SIDS. When infants can easily turn over from the supine to the prone position, they shall be put down to sleep on their back, but allowed to adopt whatever position they prefer for sleep)</i>			
Breast milk is placed in properly labeled bottles (name, date, time) and is kept in the refrigerator when not used. <i>(Expressed breast milk shall be discarded if it has been unrefrigerated for an hour or more. Unused breast milk shall be discarded after 48 hours if refrigerated.)</i>			
When bottle feeding, caregivers shall either hold infants or feed them sitting up. The facility shall not permit infants/toddlers to have bottles in the crib or to carry bottles with them either during the day or at night.			

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Toys that cannot be washed and sanitized shall not be used. Toys that are mouthed shall be set aside where children cannot access them. <i>(Toys must be set aside until they are washed with water and detergent, rinsed, sanitized and air-dried or washed in a mechanical dishwasher. Caregiver shall closely supervise to prevent shared mouthing of toys.)</i>			
Toys or small objects available to children under 3 shall meet the federal small parts standards for toys. Examples are toys or objects with removable parts with a diameter less than 1-1/4" and 2-1/4" in length; balls smaller than 1 -3/4" in diameter, toys with sharp points and edges, plastic bags, Styrofoam objects, rubber balloons, marbles. <i>(Any part smaller than these has a potential choking hazard)</i>			

CAREGIVER ERGONOMICS			
Employees are encouraged/observed to use wall, furniture, or pillow for back support <i>(sitting on the floor too long without back support may lead to a strained neck/back).</i>			
Employees are trained/observed to lift children appropriately <i>(stand close to the child, keep back straight; place one foot slightly forward of the other foot; lower to one knee; grasp child with both arms, holding him/her close to the body; push with legs, slowly return to standing position).</i>			
Employees are trained/observed to hold children properly (held close to and centered on employee's body). <i>Repeatedly holding a child in one arm and on one hip can lead to hip and other joint pain.</i>			
Changing stations include adjoining stairs; employees guide toddlers onto the changing table via stairs; eliminates lifting/twisting <i>(repeatedly lifting children onto changing stations can lead to muscle strains and associated pain).</i>			

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Employees are trained/observed squatting down, bending with their knees and waist, keeping backs straight when picking up objects from the floor.			
Employees use adult-size chairs for occasional use and "floor chairs" to provide support at the right height for adults (<i>inadequate work heights include child-size tables and chairs</i>).			
Kitchen and other storage areas include heaviest items stored at waist height; snacks and supplies should be organized to simplify snack preparation procedures. Sturdy step stools shall be provided - and used - by employees when retrieving items above cupboard height.			
Dollies are placed under trash cans for easier movement and are located close to work areas. Garbage bags are changed often to avoid heavy loads.			

Appendix:

The first aid kits should contain: 1. Disposable nonporous gloves (latex free) 2. Scissors 3. Tweezers 4. A non glass thermometer 5. Bandage tape (latex free) 6. Sterile gauze pads 4"X4" 7. Flexible roller gauze 8. Triangular bandages 9. Safety pins 10. Eye wash 11. Pen/pencil and notepad 12. Cold pack 13. Current American Academy of Pediatrics' 3-in-1 First Aid Choking, CPR Chart, or equivalent first aid guide 14. Flashlight 15. Whistle 16. Battery-powered radio 17. Water 18. Liquid soap 19. Moist towelettes, garbage bags, and plastic ties 20. Adhesive strip bandages, plastic bags for cloths, gauze, and other materials used in handling bodily fluids 21. Any emergency phone numbers, phone numbers for parents and legal guardians and the poison control center number 22. Working cellular phone 23. Current emergency medication with special health care plan for children with special needs and their health record 24. Splint: small plastic or metal splints

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<p>Procedures for Standard Precautions 1) Surfaces that may come in contact with potentially infectious body fluids must be disposable or of a material that can be sanitized. Use of materials that can be sterilized is not required. 2) The staff shall use barriers and techniques that: a) Minimize potential contact of mucous membranes or openings in skin to blood or other potentially infectious body fluids and tissue discharges and b) Reduce the spread of infectious material within the child care facility. c) Such techniques include avoiding touching surfaces with potentially contaminated materials unless those surfaces are sanitized before further contact occurs with them by other objects or individuals 3) When spills of body fluids, urine, feces, blood, saliva, nasal discharge, eye discharge, injury or tissue discharges, and human milk occur, these spills shall be cleaned up immediately, and further managed as follows: a) For spills of vomit, urine, human milk, and feces, all floors, walls, bathrooms, tabletops, toys, kitchen counter tops, and diaper-changing tables in contact shall be cleaned and sanitized; b) For spills of blood or other potentially infectious body fluids, including injury and tissue discharges, the area shall be cleaned and sanitized. Care shall be taken to avoid splashing any contaminated materials onto any mucus membrane (eye, nose, mouth); c) Blood-contaminated material and diapers shall be disposed of in a plastic bag with secure tie. d) Floors, rugs and carpeting that have been contaminated by body fluids shall be cleaned by blotting to remove the fluid as quickly as possible, then sanitized by spot-cleaning with a detergent-disinfectant, and shampooing, or steam-cleaning the contaminated surface. 4) Use of non-porous gloves is optional unless blood or blood containing body fluids may be involved. Gloves are not required for feeding breast milk or cleaning up spills of breast milk. 5) Gowns and masks are not required. 6) Potentially infectious body fluids: a) High exposure - blood, vaginal secretions, semen, feces/diarrhea, pus b) Lower possibility –</p>			