

EXEMPTION HEALTH & SAFETY MONITORING CHECKLIST

Arrival Time: 2:45PM	Departure Time: 4:30PM	Visit Date: 09/07/2018
Consultant Name:	Sarah Benton	Phone #: (770) 357-5103
Program Name:	Bulloch County Board of Commissioners - Camp Adventure & JPB 3/4/5	Provider #: EX-44793
Exemption Category:	EX-1 Government ✓ CAPS Funded	Category #: EXMT-8479
Street Address:	400 Donnie Simmons Way - Wing D	Phone #: (912) 489-9058
City, Zip Code, County:	Statesboro, 30458, Bulloch	# of CAPS certificates (if applicable): 4
Administrator/Person-in-charge:	Ashley Stringer	Present during visit: YES
		Is this person typically on-site each day? YES

CAPS Missing Exemption Provider Documents

The following information is needed to complete the caregiver's record with the CAPS program.
Please send to CAPS.InformalProvider@decal.ga.gov within 10 days.

Proof of SSN <input type="checkbox"/>	Proof of Identification <input type="checkbox"/>	Enrollment package for CRC <input type="checkbox"/>	CRC for all over 17 yrs <input type="checkbox"/>	Direct Deposit <input type="checkbox"/>	CPR Certificate <input type="checkbox"/>
Annual Updates	W-9 <input type="checkbox"/>	Enrollment Affidavit <input type="checkbox"/>	Childcare Provider Agreement <input type="checkbox"/>	No Documents Needed <input type="checkbox"/>	

General Operating Information

Is program currently operating?	☉ Yes ○ No Comment:
Is program operating within approved guidelines? <i>(i.e. ages served, hours/days of operation, etc.)</i>	☉ Yes ○ No Comment:
Is program operating at approved location?	☉ Yes ○ No Comment:
Are signed parent acknowledgement forms on file for each child?	☉ Yes ○ No
Do parents receive a program handbook?	☉ Yes ○ No
Is approval letter <u>and</u> exemption notice from the Dept. posted in a prominent place near front entrance?	☉ Yes ○ No
Is the email we have on file current?	☉ Yes ○ No
Are you receiving communications from the Department?	☉ Yes ○ No
Is the program accredited?	○ Yes ☉ No
If yes, please list accrediting agency:	

Staff: Child Ratios

Room or Area	Age Group	# Staff	# Children	State Ratio Met? (Y/N)	Activities/ Notes
TOTAL					

Group Sizes met?	☑ Yes ☑ No
Total number of non-care staff present (clerical, janitorial, etc.):	

Indicators

<u>Supervision</u>	
--------------------	--

EXEMPTION HEALTH & SAFETY MONITORING CHECKLIST

• Staff members physically present with the children and properly supervising?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Staff alert and able to intervene to prevent injuries?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If no, explain...	Specialist observed at least 6 children leave the football field and walk through a parking lot between 3 buildings to go to the restroom and get water. The approximate distance was 150 yards and staff were not supervising children.
<u>Playgrounds/Equipment</u>	<input type="checkbox"/> N/A (no playground) <input type="checkbox"/> N/A (no equipment) <input type="checkbox"/> Not observed during visit
• Outdoor equipment free of serious hazards?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Outdoor play area free of serious hazards?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Fence/barrier around outdoor play area?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If no, explain...	Observed approximately 10 foot metal slide, 12 foot plastic slide and large metal climbers that all had less than 6 inches of resilient surfacing. In addition, the playground was not completely fenced. Rust and open S hooks were observed on the swing chains.
<u>Health & Hygiene</u>	<input type="checkbox"/> Not observed during visit
• Sink(s), running water, soap and paper towels available?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Staff wash hands after toileting & before eating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Children wash hands after toileting & before eating?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If no, explain...	No paper towels were observed accessible in either bathrooms.
<u>Bathrooms</u>	
• Number of Toilets:	10
• Number of Sinks:	4
• Bathrooms in or adjacent to activity areas?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If no, explain...	No bathrooms in the building with the media center room where children arrive and are picked up. Several children observed in this room during playtime.
<u>Transportation</u>	<input type="checkbox"/> N/A (no transportation provided)
• Written permission to transport from parent/guardian?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Emergency medical information for each child on vehicle?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Proper restraints used when transporting children?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not observed during visit
• Procedures in place to transport children safely?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Each vehicle(s) has an annual safety inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not observed during visit
• Each vehicle(s) is in good/safe condition, clean and free of hazardous items?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not observed during visit
• Documentation maintained of transportation which indicates that safety procedures are in place?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Additional staff provided to maintain adequate supervision during transportation?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Comments/Notes:	Transportation only occurs during fields trips and on days that it rains. The Bulloch County School Board provides the buses and drivers.
<u>Field Trips</u>	<input type="checkbox"/> N/A (no field trips provided)
• Written permission from parent/guardian?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• List of participants?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

EXEMPTION HEALTH & SAFETY MONITORING CHECKLIST

• Emergency medical information for each child on vehicle?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If no, explain...	The program does not take emergency medical information for each child on the field. They take a list of participants and an allergy list.
<u>Swimming and Water-Related Activities</u>	
	<input checked="" type="checkbox"/> N/A (no pool/no swimming activities)
• Pool area adequately fenced & secured?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Lifeguard certified and present? (if pool is on site)	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Enough staff to safely supervise swimmers and non-swimmers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, explain...	
<u>Medication</u>	
	<input type="checkbox"/> N/A (No medication dispensed)
• Stored medication inaccessible to children?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Written permission from parent/guardian to dispense?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Document in writing when medication is dispensed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If no, explain...	Medication was observed housed in an unlocked black box in an unlocked drawer behind the desk.
<u>Discipline</u>	
• Appropriate disciplinary actions observed?	<input checked="" type="checkbox"/> None observed <input type="checkbox"/> Yes <input type="checkbox"/> No
If no, explain...	
• Written discipline policy?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Appropriate discipline policy? (not physically or emotionally harmful)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Policy communicated to staff?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If no, explain...	
<u>Physical Plant</u>	
• Certificate of Occupancy?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Fire Marshal approval?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Zoning approval?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Business license?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Premises free of serious health & safety hazards?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If no, explain...	CO, Fire Marshal, Zoning and Business not get on site and not observed. Hazards accessible- cleaners, hand sanitizers observed accessible in classroom. Large television observed in D101 on the shelf not secured. Many plug covers missing.
<u>Children's Records</u>	
• Are children's records maintained on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Emergency contact information available for each child & readily accessible to staff?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Comments/Notes:	
<u>Policies and Procedures - Does the program have a written policy regarding the following?</u>	
• The exclusion of children with contagious illness?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Notification of parents in the event their child becomes ill while at the facility?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

EXEMPTION HEALTH & SAFETY MONITORING CHECKLIST

• The notification of all parents of enrolled children when a reportable contagious illness is present in the facility?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• The prevention of and response to food and allergic reactions?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Emergency preparedness and response?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• The handling and appropriate disposal of bodily fluids and storage of hazardous materials (soiled clothing and bedding)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• Recognition and reporting of child abuse and neglect?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Comments/Notes:	
<u>Diapering</u>	<input checked="" type="checkbox"/> N/A (no diapering) <input type="checkbox"/> Not observed during visit
• Clean, nonporous diapering surface with safety barrier?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Sink with warm, running water adjacent to diapering area?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Area not used for food preparation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, explain...	
<u>Safe Sleep</u>	<input checked="" type="checkbox"/> N/A (no infants) <input type="checkbox"/> Not observed during visit
• CPSC/ASTM Crib in good repair for each infant?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Cribs clear of objects?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Each crib has a firm, tight fitting mattress without gaps?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Each crib has an individual, tight fitting sheet?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Are infants placed on their back to sleep in an appropriate crib?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, explain...	
<u>Criminal Background Checks</u>	
• Satisfactory Criminal Records Checks (CRC) on file for 4 of 7 employees	
• CRC results on file for all staff on-site? (If no, list location of where they are kept.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Not kept on site. CRC kept at main office
• Check Sex Offender Registry? If no, explain...	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Not kept on site. CRC kept at main office.
<u>Staff Training</u>	
• At least one staff person present on site and on field trips with current first aid and CPR?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
• 0 of 7 employees has current first aid	
• 0 of 7 employees has current CPR.	
• 0 of 7 employees has completed health & safety orientation training	
• Does administrator/person-in-charge meet licensing requirements for credential? If yes, list type of credential:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Enrolled in college
• Staff trained in program policies and procedures? If no, explain...	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
• Does staff receive on-going training? If yes, list type of training:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

EXEMPTION HEALTH & SAFETY MONITORING CHECKLIST

NOTES/OBSERVATIONS:

Employees- Ashley Stringer Bailey Barcomb Sierra McWhirter Mikayla Schiller Lindsey Crowe Brett Wilcox Shelby Seigler No CRC letters, no training or CPR certificates housed on site. During the visit, all but three children were observed on the football field. the classrooms are listed below. The ratio section was not functioning and specialist could not update. Football field 4:45 Media center 1:3 D101 D102 D103 D104 D105 D106 D107 D108 D109

CCDF Enforcement Points as of this visit:

Core Points	Non Core Points	Total Points	Severity	Enforcement Action

Administrator/Person-in-charge Ashley Stringer **Date** 09/07/2018

Consultant Name Sarah Benton **Date** 09/07/2018