

| Staff Records | | | | | | | | | | |
|-----------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----------------|-----------------|--------------------------|--------------------------|
| Staff Name | App | Background Check | TB Test | Program Orientation | Disaster Plan | HIV/AIDS/BBP Training | CPR Card | First Aid | STARS Training | |
| | | | | | | | | | Basic | 10 hrs |
| WAC Citation | 7050 (1) (a) | 7050 0060 (3) | 7050 (6)(e) | 7050 (6)(d)(i) | 5030 (6)(a) | 7050 (6)(d)(iii) | 7050 (6)(d)(iv) | 7050 (6)(d)(iv) | 7050 1060 | 7050 1070 |
| Compliance Code | | | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Date Expired | Date Expired | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Date Expired | Date Expired | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Date Expired | Date Expired | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Date Expired | Date Expired | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Date Expired | Date Expired | <input type="checkbox"/> | <input type="checkbox"/> |

| Children's Records | | | | | | | | | | | |
|---------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|
| Child's Information | Enrollment Application | Health History | Individual Health Plan | Medical Consent | Medication Authorization | Medication Dispensed | Physical Exam Date | Health Care Providers | Immunizations | Parent Communication | |
| WAC Citation | 7010 (1)(a) | 7010 (1)(d) | 7010 (1)(e) | 7010 (1)(f) | 7010 (1)(h) | 7010 (1)(j) | 7010 (3)(a) | 7010 (3) (f) (g) | 7010 (4)(a) | 2080 | |
| Compliance Code | | | | | | | | | | | |
| Child #1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Child #2 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Child #3 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Child #4 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Child #5 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| Postings | | |
|--|------------------|--|
| Codes: C = Compliance D = Discussed N = Non Compliance NA = Not Applicable E = Exception Granted | | |
| Section | Requirement | Code |
| 7080 | Required Posting | Child care center license |
| | | Duty hours with staff names, and operating hours |
| | | Typical activities schedule and meal times |
| | | Meal and snack menus |
| | | Fire safety record and evacuation plans including diagram of exit routes |
| | | Emergency telephone numbers |
| | | Nondiscrimination poster |
| | | Required postings for staff: |
| | | ▪ Hand-washing practices |
| | | ▪ Diaper-changing procedures |
| ▪ Disaster preparedness plan | | |

| Postings (continued) | | |
|--|--|---|
| Codes: C = Compliance D = Discussed N = Non Compliance NA = Not Applicable E = Exception Granted | | |
| Section | Requirement | Code |
| 7080 | Required Posting (continued) | Written lesson plans (2010) |
| | | Center and health care policies and procedures (3010) |
| | | Notice to parents that copies of recent licensing checklists, monitoring checklists and compliance agreements for any deficiencies are available for review |
| Record Keeping | | |
| 2080 | Parent Communication (written) | Enrollment/admission |
| 3170 | Food Service Standards | At least one person with a Washington state food handler's permit to monitor food handling and service |
| | | Staff cooking full meals must have a food handler's permit |
| 5030 | Disaster Plan | Written disaster plan developed and implemented |
| | | Plan is annually reviewed and signed by director and staff |
| | | Plan is reviewed and signed by parents when children are enrolled |
| | | Monthly fire drill evacuation conducted and documented |
| | | Quarterly disaster drills conducted and documented |
| 7010 | Children's Files | Confidential files on premises for each child in care that include: |
| | | ▪ Registration information |
| | | ▪ Health history/individual child care plan |
| | | ▪ Medications given |
| | | ▪ Authorizations |
| | | ▪ Copies of illness or injury reports |
| ▪ Certificate of immunization status (CIS) | | |
| 7030 | Attendance Records | Daily attendance record with signature on file |
| 7050 | Personnel Records and Policies | Employment application |
| | | Background check for all staff |
| | | Complete owner, staff and volunteer personnel records on premises |
| | | Written documentation of training and staff meetings to include: |
| | | ▪ Staff orientation |
| | | ▪ Ongoing training; including annual infant safe sleep if applicable |
| | | ▪ Blood borne pathogen training (including HIV/AIDS) |
| | | ▪ CPR/first aid |
| | | ▪ Food handler card (if applicable) |
| | | ▪ STARS training |
| | | ▪ Staff meeting |
| ▪ Child abuse, neglect and exploitation | | |
| ▪ Tuberculosis (TB) testing | | |
| Background Clearance Requirements | | |
| 110-06 | Background clearance requirements | Background clearance requirements |

| Reporting | | | |
|--|---|---|------|
| 6040 | Child Abuse and Neglect | Immediate reporting of suspected child abuse, neglect, or exploitation and children are protected from child abuse and neglect as required in RCW 26.44.030 | |
| Day Care Insurance RCW 43.216.700 | | | |
| RCW | Day Care Insurance | Proof of Insurance | |
| Medication and First Aid/CPR | | | |
| Codes: C = Compliance D = Discussed N = Non Compliance NA = Not Applicable E = Exception Granted | | | |
| Section | Requirement | | Code |
| 1100 | First Aid/CPR | First Aid/CPR requirements met | |
| 3070 | Medication | Original container/labeling requirements met | |
| | | Medication stored inaccessible to children | |
| | | Internal and external medication stored separately | |
| | | Medication stored according to specific manufacturers or pharmacists directions | |
| | | All controlled substances in locked container | |
| 5010 | First Aid Supplies | First aid supplies adequate, available in center and in vehicles and conform with center policies | |
| | | First aid supplies are appropriately stored and inaccessible to children | |
| General Safety and Sanitation | | | |
| 3020 | Hand-Washing Procedures for Staff | Warm water and soap present | |
| | | Hands washed at required times | |
| 3040 | Hand-Washing Procedures for Children | Warm water and soap present | |
| | | Hands washed at required times | |
| 110-300-0291 | Infant and toddler safe sleep practices | Infant and toddler safe sleep practices are followed | |
| 4120 | Diaper Changing Procedure | Diaper changing table with barrier and area is impervious to moisture and cleanable | |
| | | Diaper changing area cleaned and sanitized between children | |
| | | Soiled diapers disposed of in hands-free covered containers | |
| | | Diaper-changing area adjacent to a hand-washing sink | |
| 5020 | Safe Environment | Free from injury hazards included but not limited to: burns, drowning, choking, cuts, entrapments, falls, gun shots, hearing loss, objects falling, pinches, poisons, punctures, crushed, shocked, trapped or tripped | |
| | | Child-height handrails | |
| | | Guardrails for stairs, elevated play areas | |
| | | Electrical outlets protected with tamper-resistant receptacles or non-removable covers | |
| | | Shielded light bulbs and tubes | |
| | | Windows screened (if applicable) | |
| | | Sleeping equipment or indoor climbing structures are not next to windows unless safety glass installed | |
| | | Shielded heater (if applicable) | |
| | | Portable heaters prohibited | |
| | | Entrance/exit doors monitored | |
| | | Telephone accessible to staff | |
| | | Flashlight/emergency lighting device | |

| General Safety and Sanitation (continued) | | | |
|--|--|--|-------------|
| Codes: C = Compliance D = Discussed N = Non Compliance NA = Not Applicable E = Exception Granted | | | |
| Section | Requirement | | Code |
| 5040 | Clean and Sanitized Environment | Surfaces must be easily cleanable using approved cleaning solution according to cleaning schedule | |
| | | Building, equipment and premises maintained in a clean and sanitary manner | |
| | | Premises free from rodents, insects and other pests | |
| | | Written policies must include cleaning and sanitizing procedures | |
| Window Blind Pull Cords RCW 43.216.380 | | | |
| RCW | Window Blind Pull Cords | Window blind cords do not form a loop | |
| Program, Activities and Routines | | | |
| 2010 | Play Materials, Equipment and Materials | Children have adequate supply of accessible, culturally relevant, age-appropriate learning materials | |
| | | Children have a current daily schedule of activities and lesson plans that are developed to meet the children's developmental, cultural, and individual needs | |
| | | Include at least one (1) activity daily for each of the following: | |
| | | Child-initiated activity (free play) | |
| | | Staff-initiated activity (organized play) | |
| | | Individual choices for play | |
| | | Creative expression | |
| | | Group activity | |
| | | Quiet activity | |
| | | Active activity | |
| | | Large- and small- muscle activities | |
| | | Indoor and outdoor play | |
| | | Plan for smooth transitions by establishing familiar routines and using transitions as a learning experience | |
| | | Afford staff classroom planning time | |
| 2130 | Outdoor Play Area | A safe outdoor or equivalent play area is provided | |
| | | Square footage of play area: Minimum 75 useable square feet per child | |
| | | Outdoor or equivalent play area used daily | |
| | | A variety of age-appropriate outdoor play equipment is provided: <ul style="list-style-type: none"> ▪ Climbing ▪ Pulling ▪ Pushing ▪ Riding ▪ Balancing | |
| | | Equipment and ground cover arranged to prevent child injury | |
| | | Maintenance of playground equipment to prevent child injury | |

Summary, Comments and Recommendations:

| |
|--|
| |
|--|

Signatures:

| | |
|--|-------|
| Compliance Agreement: <input type="checkbox"/> Yes <input type="checkbox"/> No | Date: |
| Licensee Signature: | Date: |
| Licensor Signature: | Date: |
| Health Specialist Signature: | Date: |