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| **REGIsTERED Faith-Based CHILD FILE CHECKLIST** |

**The facility shall keep a separate record for each child. *DSS Regulation 114-523 G(1)***

**REFER TO JUNE 2005 REGULATION BOOKLET 114-523 E(1) through (4)**

[ ]  **Current Immunization Record – (**must be on SC DHEC form**)**

[ ]  **DSS Form 2900 - General Record and Statement of Child’s Health** signed and dated by parents and director and updated as needed

[ ]  **General Record /Enrollment Form** to include **ALL** of the following:

[ ]  **Child’s full legal name, nickname, birth date, date of enrollment,**

 **current home address and home telephone number**

[ ]  **Full name of parents/guardians, work and home telephone numbers,**

 **or reachable telephone numbers when the child is in the center**

[ ]  **Name, address and telephone number of TWO emergency persons who can assume responsibility for the child and are authorized to arrange medical care if necessary**

[ ]  **Name, address, and telephone number of family physician or health**

 **resource**

[ ]  **Name, address and form of identification for anyone authorized to**

 **take the child from the center**

 [ ]  **Written permission/authorization to obtain emergency medical**

 **treatment, to transport children -** 114-525 I. (2) (c)**, to administer medication** - 114-525D. (1), **and to participate in swimming**

**activities**

**THE CENTER SHALL HAVE WRITTEN POLICY TO SAFEGUARD THE CONFIDENTIALITY OF ALL RECORDS 114-523 E(2).**

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| Child’s Name:       | Date:       |

Revised 04/06

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| **REGIsTERED Faith-Based Policies** |

**Written** policies and procedures should include the following:

[ ]  **Administration of Medication** - *DSS Regulation No. 114-525C.(1)*: Written signed and dated parental consent is required prior to administering any medication to any child.

[ ]  **Confidentially** - *DSS Regulation No. 114-523 E*: This procedure must safeguard the confidentiality of all records of children to include name, address, and other information about the child or family and information that may identify a child.

[ ]  **Tracking Children** (Supervision) - *DSS Regulation No. 114-524.A(2)*: Procedures to account for the presence of each child as they enter or exit the premises, enter and exit a vehicle, or move to new location in or around the center.

[ ]  **Emergency Medical Plan** - *DSS Regulation No. 114-525 C*: This plan must address conditions under which emergency medical care or treatment is warranted, steps to be followed in a medical emergency, the hospital/ medical entity to be used, the method of transportation to be used and staffing plan to include who will accompany the child with records to the emergency location and will stay with the child until parents arrive.

[ ]  **Evacuation Plan/** Emergency Preparedness - *DSS Regulation No. 114-525.H(2)*: The facility must have an up-to-date written plan for removing children from the building in case of fire, a natural disaster, or threatening situation that may pose a health or safety hazard. The plan should include procedures for staff training in this emergency plan.

[ ]  **Transportation/Field Trips** - *DSS Regulation No. 114-525.I*: Plans are required for routine travel and must be on file in the facility. Plans should include a checklist to account for the loading and unloading of children at every location. Written permission from parents for transporting children to and from the home, school, or other designated places including planned field trips and activities. Reference DSS Regulation No. 114-525.I(1-2) to ensure completion of policy.

[ ]  **Care for Mildly Ill Children** – *DSS Regulation No. 114-529.B*: If a facility chooses to provide care to children who are mildly ill, written policies and procedures specifying inclusion and exclusion from others is required. The plan must also include communicating with parents, recording of illness, and list type of care provided. Specific types of illnesses and symptoms which prohibit care from being provided. Staff must receive required training.

**Facility Notices-** Parents should be provided the following information upon admission

[ ]  Liability Insurance – *SC Statue 63-13-210 (A)(B)*: All child care facilities will be asked to show proof of Liability insurance. If facility does not have insurance coverage a written notice must be provided to parents of enrolled children.

[ ]  Provisional Employment – *SC Statue 63-13-45 (A)*: If a facility chooses to provisionally employ persons to provide care to enrolled children, written statements must be provided to parents indicating that the facility may provisionally employ a person in order to comply with SC laws and regulations when unexpected staff vacancy occurs.

**REGISTERED FAITH BASED**

**STAFF CHECKLIST**

**REFER TO JUNE 2005 REGULATORY BOOKLET 114-523 H**

**Information must be keep on file at the facility**

**[ ]** Copy of all staff member’s High School Diploma, GED, Degree or Certificate of Completion. (Consult your Regional Office if a Certificate of Completion is presented).

[ ]  **Verification of experience:** A written statement on each child care employee. The facility’s name, address and permit number and employee’s dates of employment is required.

[ ]  **State and Federal background check results** – An employee **MAY NOT** work without state AND federal fingerprint results on file (Fees are required) unless a provider uses the Provisional Employment process. (Your Regional Office can provide information about Provisional Employment). A break in service for more than a year will require a background check to be repeated.

[ ]  **Director/Staff Evidence of Non-Conviction and Statement of Compliance** **(DSS Form #2925)** must becompleted upon hire and notarized. This form shall only be completed one time and shall remain on file as long as the employee remains at the facility.

[ ]  **Consent to Release Information (DSS Form #2924) – Fee of $8.00** per form – Make check or money order payable to DSS – must be submitted to DSS prior to employment. An employee **MAY NOT** work without Central Registry results on file.

[ ]  **Medical Statement (DSS Form #2901)** completed and signed by staff and updated as needed.

[ ]  **Health Assessment (DSS Form #2926)** to be completed within 3 months prior to employment or **within 30 days of hire** and every four years thereafter – signed by physician or health source person. **TB** test is done one time unless staff has a positive test or has been exposed to TB.

[ ]  Copy of current **Infant/Child CPR and First Aid Card**, if applicable.

[ ]  **Training record (Renewals ONLY)** – 15 clock hours per year for staff and 20 clock hours per year for Director(s) – Training for two years prior to renewal visit will be checked. All staff members are required to complete annual training in blood borne pathogens which includes an exposure control plan. You have the option of having training tracked on an Official Transcript from the Center for Child Care Career Development. To request copies **PRIOR TO VISIT** phone toll free 1-866-845-1555 or visit their website at [www.sc-ccccd.net](http://www.sc-ccccd.net).

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| Employee’s Name:       | Date of Hire:       |

*Child Care Licensing*

*Revised March 2011*

**SOUTH CAROLINA DEPARTMENT OF SOCIAL SERVICES**

**CHILD CARE LICENSING**

# n Checklist

Transportation Checklist

If you transport children, you **must** create and maintain a transportation file. For more details, refer to the Transportation section of the regulations. The following information must be included in this file:

[ ]  Verify existence of a valid driver’s license for every authorized driver;

[ ]  FBI, SLED report and Central Registry Check for all drivers;

[ ]  Copies of current CPR/First Aid Cards for staff or driver when no staff is available;

[ ]  A written plan for staff to follow in emergency situations such as accidents, bad weather, a

sick child, etc.;

[ ]  Written directions for every travel destination;

[ ]  A record for the driver, which lists the name, address and telephone number of the child

care provider as well as names of children being transported;

[ ]  An on/off checklist with each child’s name to account for the loading and unloading of

 children MUST be used;

[ ]  There shall be a First Aid Kit and emergency information for each child in the vehicle;

[ ]  Written consent from the parent/guardian is required prior to transporting children in the

 vehicle; and

[ ]  Vehicles must meet the requirements of federal school bus safety standards. For more

 information on Jacob’s Law visit the website at [www.jacobs-law.org](http://www.jacobs-law.org).

In addition, departure and expected arrival time back to the center should be known by the person in charge at the center.

**IMPORTANT NOTE**: Staffing ratios must be maintained. Driver may not be counted in the ratios for infants and toddlers.

*March 2011*