

EIS 2000 ---- HEAD START FACILITY SELF AUDIT CHECKLIST
 MODEL TRIBAL HEAD START HEALTH AND SAFETY CODE
 December 2000

 Facility (w/ Permit # if Applicable) FDS# # Staff Employed # Children Enrolled Name of Facility Supervisor

 Mailing Address City/State/Zip / ____ / ____ Surveyed by

(____) ____ - ____ (____) ____ - ____ _____ _____ _____
 Telephone Fax Building Owner (Tribal, State, Fed) Classroom Space Avail. (ft²) Year Constructed Building Type (stick built, modular, trailer)

All Code #s marked with an asterisk (*) and in bold are critical and should be corrected immediately

IMMINENT HAZARD – Chapter 2, Section 101

Issue/Violation	Code #	Actions by Head Start Staff
Head Start Center staff in charge did not cease operation or eliminate the hazard when an imminent health hazard was declared or apparent. (PC-HSPS-1304.22(a)(3))	2-101.1*	Critical
The Health Advisor or other appropriate health department was not notified within 24 hours of an imminent health hazard declaration. (BP-HSPS-1304.22(a)(3))	2-101.2	
Written documentation to resume operation following an imminent health hazard declaration was not authorized by the grantee or their designee. (BP-HSPS-1304.22(a)(3); PC-HSPS-1304.53(a)(7))	2-101.3	
The Head Start Director did not prepare a written report within 10 working days of any imminent health hazard declared at their Center, or the report did not include the following: (BP-HSPS-1304.22(a)(3)) a. The name of the Head Start Center. b. The person who identified the hazard and their position or title. c. The date and time the hazard was identified. d. The specific reasons for declaring the imminent health hazard. e. If operation of the Center was discontinued. f. Specific actions to correct the health hazard should be documented including the identification of the dates, times, and persons taking actions. g. The date the Center resumed operation.	2-101.4	

ENVIRONMENTAL HEALTH AND SAFETY SURVEYS – Chapter 3, Section 102

Issue/Violation	Code #	Actions by Head Start Staff
The Head Start Director did not request the Environmental Health Advisor to conduct a pre-operational environmental health survey of this new or remodeled Head Start Center, or this survey was not conducted after construction and prior to operation of the Head Start Center.	3-102.4	
The Head Start Director did not request the Health Advisor to conduct a pre-occupancy survey on any existing building or portions of a building that were intended for use as a Head Start Center.	3-102.5	
Access to the facility, during reasonable working hours, was not granted to the Environmental Health Advisor to evaluate the environmental health and safety of a Head Start Program Center.	3-102.6	

NEW CONSTRUCTION AND MAJOR RENOVATIONS – Chapter 3, Section 103

Issue/Violation	Code #	Actions by Head Start Staff
<p>One set of engineering or architectural plans and site plans were not submitted to the Environmental Health Advisor for review and approval, prior to any construction or major renovation of this Head Start Center. Plans are to include the following:</p> <p>a. Plans are stamped by a licensed architect or engineer.</p> <p>b. Plans are of sufficient detail so that compliance with applicable health and safety requirements can be determined.</p> <p>c. The site plans submitted include the availability of utilities such as water, sewage disposal and electrical supply, the location of access roads and the location of any natural or man-made threats within one mile of the proposed Head Start Center.</p> <p>d. The Environmental Health Advisor's review of the plans is limited to a review of the functional design, including fire safety, infection control, food sanitation, playground safety and basic plumbing.</p> <p>e. The review will not include structural design, electrical system adequacy or other specific system design requirements.</p>	3-103.2	

STAFFING RATIOS – Chapter 3, Section 104

Issue/Violation	Code #	Actions by Head Start Staff									
<p>Early Head Start programs only – There were more than 4 children for every teacher, or more than 8 children in any group. (A-HSPS 1304.52(g)(4))</p>	3-104.1*	Critical									
<p>Early Head Start Programs only - The following staff to child ratios were not maintained with the understanding that staff here, includes paid staff and regular volunteers. (PC-HSPS 1304.52(g)(4))(1304.53(a)(6); (A-LSC- 31-1.1.2)</p> <table border="0" style="width:100%"> <tr> <td align="center"><u>AGE</u></td> <td align="center"><u>STAFF TO CHILD RATIO</u></td> <td align="center"><u>MAXIMUM GROUP SIZE</u></td> </tr> <tr> <td>Birth to 24 months</td> <td align="center">1:3</td> <td align="center">8</td> </tr> <tr> <td>25 months to 35 months</td> <td align="center">1:4</td> <td align="center">8</td> </tr> </table>	<u>AGE</u>	<u>STAFF TO CHILD RATIO</u>	<u>MAXIMUM GROUP SIZE</u>	Birth to 24 months	1:3	8	25 months to 35 months	1:4	8	3-104.2*	Critical
<u>AGE</u>	<u>STAFF TO CHILD RATIO</u>	<u>MAXIMUM GROUP SIZE</u>									
Birth to 24 months	1:3	8									
25 months to 35 months	1:4	8									
<p>Each Head Start class serving preschoolers (3-5 year olds), was not staffed by a teacher and a teacher's aide, or two teachers and whenever possible, a regular volunteer. (A-HSPS-1306.32(a))</p> <table border="0" style="width:100%"> <tr> <td align="center"><u>AGE</u></td> <td align="center"><u>STAFF TO CHILD RATIO</u></td> <td align="center"><u>MAXIMUM GROUP SIZE</u></td> </tr> <tr> <td>36 to 48 months</td> <td align="center">1:7</td> <td align="center">17 (15*)</td> </tr> <tr> <td>49 months to 60 months</td> <td align="center">1:8</td> <td align="center">20 (17*)</td> </tr> </table> <p align="right">* Maximum occupancy for double sessions</p>	<u>AGE</u>	<u>STAFF TO CHILD RATIO</u>	<u>MAXIMUM GROUP SIZE</u>	36 to 48 months	1:7	17 (15*)	49 months to 60 months	1:8	20 (17*)	3-104.3*	Critical
<u>AGE</u>	<u>STAFF TO CHILD RATIO</u>	<u>MAXIMUM GROUP SIZE</u>									
36 to 48 months	1:7	17 (15*)									
49 months to 60 months	1:8	20 (17*)									
<p>Head Start maximum class size was not determined by the predominant age of the children in the class. NOTE: Assuming adequate space for single session Head Start classes of predominantly 3 year olds, the maximum class size is 17 children. When double class sessions are used, the maximum class size of 3 to 4 year olds shall be 15 children. (A-HSPS-1306.32(a)(5)&(6))</p>	3-104.4										
<p>Head Start maximum class size was not determined by the predominant age of the children in the class. NOTE: Assuming adequate space for single session Head Start classes of predominantly 4 to 5 year olds, the maximum class size was greater than 20 children. When double class sessions were used, the maximum class size of 4 to 5 year olds was greater than 17 children. (A-HSPS-1306.32(a)(3)&(4))</p>	3-104.5										
<p>Staff did not supervise the outdoor and indoor play areas in such a way that children's safety could be easily monitored and ensured. (A-HSPS-1304.52(g)(5))</p>	3-104.6*	Critical									

HEALTH PROMOTION AND PROTECTION – Chapter 3, Section 105

Issue/Violation	Code #	Actions by Head Start Staff
The Head Start program does not have an established or maintained Health Services Advisory Comm. that includes Head Start parents, professionals and other volunteers from the community. (A-HSPS-1304.41(b))	3-105.1	
The Head Start Program has not developed a disability services plan providing strategies for meeting the special needs of children with disabilities and their parents. (A-HSPS-1308.4)	3-105.3	
Any special health and safety requirements for children with disabilities were not specified in the Individual Education Plan, or did not include any special evacuation requirements, any specific classroom layout requirements, any special classroom equipment needs, any special assistance required and any special training needs of the staff. (PC-HSPS-1304.53(a)(10)(xvii))	3-105.4*	Critical

HEALTH CARE AND MONITORING – Chapter 3, Section 106

Issue/Violation	Code #	Actions by Head Start Staff
There were no written policies or procedures to ensure that all required health records for staff and participants in the Head Start Program were not maintained or kept confidential. (PC-HSPS-1304.51(g))	3-106.1	
The Head Start Director did not ensure that a health care professional has determined that children's immunizations against vaccine preventable diseases were up-to-date. Immunizations were not in accordance with the schedule of well child care recommended by the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program in the State in which they operate. Immunization requirements did not incorporate the latest recommendations of the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP). (A-HSPS-1304.20(a)(1)(ii))	3-106.2*	Critical
Each staff member, including regular volunteers, did not have an initial health examination, including tuberculosis screening, before working with children. Health re-examinations, including tuberculosis screening, were not determined by Health Services Advisory Committee. (PC-HSPS-1304.52(j)(1))	3-106.3	
The Health Services Advisory Committee did not establish if the immunization status of the staff could be determined by immunization, serology or by assumed immunization based on a staff person's age. The staff did not have the same immune status against vaccine preventable diseases as required for the children. (PC-HSPS-1304.52(j)(1))	3-106.4	
Daily health assessments (of children, by staff) were not conducted in accordance with the established health and safety policies and procedures. Injuries and illnesses were not noted in the individual child's record. (PC-HSPS-1304.20(d))	3-106.5*	Critical
The Head Start staff did not maintain an incidence log of injuries and illnesses in accordance with the established health and safety policies and procedures. This injury and illness log did include personal identifiers. (PC-1304.20(d))	3-106.6	

MEDICATION HANDLING, STORAGE AND ADMINISTRATION – Chapter 3, Section 107

Issue/Violation	Code #	Actions by Head Start Staff
There was no written policy for the administration, handling, and storage of medication for the facility, or the policy did not comply with applicable Tribal or State regulations regarding the administration of medicine to children. (PC-HSPS-1304.22(c))	3-107.1*	Critical
There was no designated and trained staff member, or a school nurse, to administer, handle and store child medications. This staff member was not able to demonstrate proper techniques (of administration) in accordance with the established policies and procedures. (PC-HSPS-1304.22(c)(2); 1304.22(c)(6))	3-107.2	
Prescription or non-prescription medication was administered to a child without written parental permission. Prescription medications were administered without a physician's order or contrary to label directions. (PC-HSPS-1304.22(c)(3))	3-107.3*	Critical
Staff did not observe or record any changes in a child's behavior that may have implications for drug overdose or any type reaction to the medication, such as allergic reactions. (PC-HSPS-1304.22(c)(5))	3-107.4	

MEDICATION HANDLING, STORAGE AND ADMINISTRATION – Chapter 3, Section 107 - Continued

Issue/Violation	Code #	Actions by Head Start Staff
The Head Start staff did not receive training on recognizing adverse drug reactions from a qualified medical professional. (PC-HSPS-1304.22(c)(5))	3-107.5	
All medications were not stored under lock and key or refrigerated when necessary. External and internal medications were not stored separately. Medications stored in a refrigerator were not kept in a locked, leak-proof container. (PC-HSPS-1304.22(c)(1);1304.53(a)(10)(iii))	3-107.6*	Critical
Medications were not stored in a manner that prevented contamination of, or by, food products, toxic products, or hazardous products. (PC-HSPS-1304.22(c)(1);1304.53(a)(10)(iii))	3-107.7*	Critical
All medications were not clearly labeled with the child's name, dosage instructions, expiration date, and the name of the drug. (PC-HSPS-1304.22(c)(1);1304.53(a)(10)(iii))	3-107.8*	Critical
Records were not maintained on prescription and nonprescription medication administered to a child including the date, time, dose and who administered the medication. For prescription medication, the name and phone number of the ordering physician was not recorded. (PC-HSPS-1304.22(c)(4))	3-107.9	

EXCLUSION – Chapter 3, Section 108

Issue/Violation	Code #	Actions by Head Start Staff
The Head Start Program did not have written policies on the exclusion and readmission of children from a Head Start Program. (PC-HSPS-1304.22(b)(1)&(2))	3-108.1*	Critical
The Head Start Program did not temporarily exclude a child with a short-term contagious illness from program participation in center-based activities. Temporary exclusion of a contagious child was not done when keeping the child in care posed a significant risk to the health or safety of the child or anyone in contact with the (ill) child. (A-HSPS-1304.22(b)(1))	3-108.2	
This Head Start Program denied program admission to a child, or excluded an enrolled child from program participation, for a long-term period, solely on the basis of his or her health care needs or medication requirements. (Reference exceptions to this Code citation) (A-HSPS-1304.22(b)(2))	3-108.3	
Temporary exclusion and readmission policies were not provided to each child's parent or guardian upon the child's admission to the Head Start Program. (PC-HSPS-1304.22(b)(1))	3-108.4	

EMERGENCY MEDICAL CARE – Chapter 4, Section 101

Issue/Violation	Code #	Actions by Head Start Staff
The Head Start staff was not able to demonstrate how to respond to a medical emergency (includes dental emergencies). A written policy on responding to medical emergencies by the staff was not included in the health and safety policies and procedures. (PC-HSPS-1304.22(a))	4-101.1*	Critical
Emergency response services and poison control phone numbers were not posted next to every telephone or approved communications system. (PC-HSPS-1304.22(a)(2))	4-101.2	
At least one staff member trained and certified in basic life support techniques (CPR/First Aid) appropriate for the age groups at the Head Start Center was not present at all times. At least one Teacher in each Early Head Start group was not trained and certified in infant CPR. (PC-HSPS-1304.22(a); PC-HSPS-1304.52(f))	4-101.3	
Readily available, properly supplied first aid kits appropriate for the ages served and the program size were not maintained at the facility, or not available on outings away from the site. First Aid kits were not accessible to staff members at all times, or accessible to children. (A-HSPS-1304.22(f)(1))	4-101.4	
The contents of the first aid kit were not in accordance with recommendations of the American Red Cross, unless otherwise specified by the Health Services Advisory Committee: (PC-HSPS-1304-22(f)(1))	4-101.5	See Attachment 1
The First Aid kit was not taken on field visits away from the Head Start Center, or the field first aid kit did not contain sufficient supplies for the ages of the children and the size of the group. (PC-HSPS-1304.22(f)(1))	4-101.6*	Critical
Syrup of ipecac was administered without approval and guidance from poison control center or a physician. (PC-HSPS-1304.22(c)(3))	4-101.7	

INFECTIOUS DISEASE CONTROL – Chapter 4, Section 102

Issue/Violation	Code #	Actions by Head Start Staff
The Head Start Center did not comply with the Administration for Children, Youth and Families (ACYF), Information Memorandum (ACYF-IM-93-21) on occupational health standards for bloodborne pathogens, or the most current Centers for Disease Control and Prevention guidelines. (PC-HSPS-1304.22(e)(4)); (A-ACYF-IM-93-21); (A-OSHA, USDL:92-436)	4-102.1	
Standard (Universal) Precautions were not followed in response and disinfection after incidents involving blood or body fluids. The staff were not trained on the use of personal protective equipment or disinfection procedures in accordance with OSHA 29-1910.1030. (PC-HSPS-1304.22(c)(3)&(4))	4-102.2*	Critical
Staff or children suspected of having a communicable disease that poses a significant risk to the health of the child or anyone in contact with the child, were not excluded for a short-term period from the Head Start Center in accordance with the established exclusion and readmission policy. An ill child's parent was not notified immediately to take the child home, when it is determined that a child should be excluded. (PC-HSPS-1304.22(b)(1))	4-102.3*	Critical
Staff did not receive annual training on infectious disease prevention and control. (PC-HSPS-1304.52(k)(2))	4-102.4	
Children that developed a communicable disease during the course of the day were not isolated from other children until such time as the parent or guardian can take the child home, or the child is taken to a health care facility. (PC-HSPS-1304.22(b)(1); PC-HSPS-1304.53(a)(2))	4-102.5	
The facility did not provide a designated area for the temporary care of an ill child in need of separation from the group. The isolation area was not located so the child can be supervised at all times, or extra attention was not given to hygiene and sanitation practices until the child was picked up. (PC-HSPS-1304.53(a)(2))	4-102.6	
There were no policies and procedures for dealing with suspected disease and ectoparasite outbreaks, or staff did not consult with the Environmental Health Advisor or appropriate medical authority immediately upon suspicion of an ectoparasite outbreak. (PC-HSPS-1304.22(b)(1))	4-102.7	
The Head Start Center did not have handwashing and personal hygiene policies and procedures in place or posted near all handwashing sinks. Handwashing was not conducted by staff and participants after toileting, diapering, after attending ill children, before and after administering medication, after dealing with body fluids even though gloves are worn, before serving or preparing food, before and after eating meals and snacks and after handling pets or animals. (PC-HSPS-1304.22(e)(1)&(2))	4-102.8*	Critical
Handwashing sinks were not provided with a continuous supply of soap and disposable paper towels. (PC-HSPS-1304.22(e)(1))	4-102.9	
Frequently touched toys in infant and toddler rooms were not cleaned and disinfected daily or when soiled. Toys in rooms in which non-diapered children are cared for were not cleaned and disinfected when soiled and at least weekly. Soft, non-washable toys in infant and toddler areas were not limited to personal use articles or were shared between children. (PC-HSPS-1304.22(e); PC-HSPS-1304.53(b)(2))	4-102.10	
Personal items were not cleaned weekly; either at the Center or at home. (PC-HSPS-1304.22(e))	4-102.11	
Personal use items (toothbrushes, pacifiers, drinking cups, eating utensils) were not labeled with the child's name or were shared between children. (PC-HSPS-1304.22(e))	4-102.12	
Toothbrush storage allowed: dripping on other toothbrushes, touching of the bristles by other children, poor air-drying (use of covers), bristle contact with other (insanitary) surfaces. (PC-HSPS-1304.23(b)(3))	4-102.13	
Dispensing of toothpaste was not done by a staff member, or toothpaste was dispensed directly from the tube to the toothbrush bristles. (PC-HSPS-1304.23(b)(3))	4-102.14	
Individual cubicles or lockers of child's height were not provided for the storage of coats, clothing and other personal items, or lockers or cubicles were not designed to eliminate touching of one child's garment to another child's garment. (BP-HSPS-1304.53(b)(1); BP-HSPS-1304.53(b)(vii))	4-102.15	
Children's names were not clearly written on their coats, blankets and other similar personal items. (BP-HSPS-1304.53(b)(1); BP-HSPS-1304.53(b)(vii))	4-102.16	
Toilet training chairs were not cleaned and disinfected at least daily and when obviously soiled. Toilet training chairs were not emptied into a toilet, then cleaned in a utility sink, and disinfected after each use. The toilet training chairs were not stored in the bathroom. (PC-HSPS-1304.22(e)(6))	4-102.17	

INFECTIOUS DISEASE CONTROL – Chapter 4, Section 102 - Continued

Issue/Violation	Code #	Actions by Head Start Staff
A continuous supply of toilet paper was not provided for each toilet. (PC-HSPS-1304.53(a)(10)(xiv))	4-102.18	
Infants were not placed in the crib on their back for sleeping. The Head Start Center did not follow the "Back-to-Sleep" policy whenever infants are laid to sleep. (A-HSPS-1304.53(b)(3))	4-102.19*	Critical
Each bed, mattress, cot, and mat was not constructed of material that can be effectively cleaned/disinfected. Beds, mattresses, including crib mattresses, cots and mats were not cleaned and disinfected weekly, and when soiled or wet, and prior to assignment to (used by) another child. (PC-HSPS-1304.22(e)(7))	4-102.20	
All bedding (i.e., sheets, pillowcases, and blankets) were not washed and dried when soiled or wet. Infant bedding was not changed daily. All linens were not washed and dried at least weekly when used by one child, or after each use when used by different children. All linen was not laundered more often when soiled. All blankets were not changed and laundered monthly or when soiled. (PC-HSPS-1304.22(e)(7))	4-102.21	
Bassinets, cribs and sleeping mats were not spaced at least three feet (1 m) apart or did not meet the standards and requirements of the U.S. Consumer Product Safety Commission. Stacked cribs were allowed. (PC-HSPS-1304.22(e)(7); PC-HSPS-1304.53(b)(1)(vi))	4-102.22	

DIAPER CHANGING AND INFANT CARE – Chapter 4, Section 103

Issue/Violation	Code #	Actions by Head Start Staff
Written sanitation and hygiene policies and procedures for diapering were not developed or diapering procedures were not followed. (PC-HSPS-1304.22(e)(5))	4-103.1	
The diaper changing area was located in food preparation areas or was used for temporary placement or serving of food. (A-HSPS-1304.53(a)(10)(xiv))	4-103.2*	Critical
Handwashing sinks were not readily available in the diaper changing area to promote immediate handwashing after diapering and prevent children from being unattended. Handwashing sinks were not within arm's reach of the changing table or within about five feet (1.5 meters) of a diaper-changing table. (PC-HSPS-1304.22(e)(5); PC-HSPS-1304.53(a)(10)(xiv))	4-103.3*	Critical
One handwashing sink was not provided for every two diaper changing tables. (PC-HSPS-1304.22(e)(5); PC-HSPS-1304.53(a)(10)(xiv))	4-103.4	
Diaper changing tables were improperly designed, installed, or maintained after each use. (PC-HSPS-1304.22(e)(5); PC-HSPS-1304.53(a)(10)(xiv)) See Attachment 1 for design details	4-103.5	See Attachment 1
Diaper changing tables were not cleaned and disinfected after each use. The changing surface was not allowed to air-dry before being used again. (PC-HSPS-1304.22(e)(5))	4-103.6*	Critical
Soiled disposable diapers were not stored in containers separated from other waste. Conveniently located, washable, plastic-lined, tightly covered receptacles, operated by a foot pedal, were not provided within arm's reach of diaper-changing tables for soiled diapers. (BP-HSPS-1304.53(a)(10)(xvi))	4-103.7	
Only if allowed by the HSAC: Soiled cloth diapers were not placed in sealable and leak proof plastic bags and returned to the parents daily. If cloth diapers were rinsed out, the fecal contents of soiled diapers were not placed in toilets, or Head Start staff conducted rinsing activities. (PC-HSPS-1304.22(e)(5))	4-103.8	
Children's clothing that was soiled during the course of the day from toilet training accidents was not placed in sealable and leak proof plastic bags and returned to the parents at the end of the day, or rinsing of soiled clothing was conducted by Head Start staff. (PC-HSPS-1304.22(e)(5))	4-103.9	
Conveniently located, washable, plastic-lined, tightly covered receptacles, operated by a foot pedal, were not provided for soiled burping cloths and linen. (BP-HSPS-1304.53(a)(10)(xvi))	4-103.10	
All cribs, beds or cots used for infants were not provided with firm mattresses, or soft bedding material such as comforters, pillows, fluffy blankets or stuffed toys were used. (A-HSPS-1304.53(b)(3))	4-103.11*	Critical
Cribs, cradle boards or infant sleeping equipment did not keep the infant safe from the dangers of suffocation, or would allow a child to fall, to become entrapped or have clothing become entangled. (PC-HSPS-1304.53(b)(1)(vi) ; 1304.53(b)(3);)	4-103.12*	Critical

SANITARY WATER SUPPLY – Chapter 4, Section 104

Issue/Violation	Code #	Actions by Head Start Staff
Potable water under pressure from an approved source and meeting Safe Drinking Water Act requirements, was not provided to the Head Start Center in sufficient quantity to supply water for cooking, cleaning, hand washing, drinking, toilets and outside uses. (PC-HSPS-1304.53(a)(10)(xiii))	4-104.1*	Critical
The privately owned well or non-community water supply system that serves the Head Start facility was not properly developed and maintained, to meet applicable Federal, Tribal, State or local health standards. The water system was not approved by the Environmental Health Advisor prior to use, or documentation of such approval was not kept on file by the Head Start Director. (PC-HSPS-1304.53(a)(10)(xiii))	4-104.2*	Critical
Lead concentration exceeded 0.02 milligrams per liter from a tap normally used for drinking or cooking. Lead sampling did not adhere to sampling procedures established in the Lead Contamination Control Act, with analysis of samples conducted by an EPA or State certified laboratory. Test results were not maintained on file at the Head Start Center. (PC-HSPS-1304.53(a)(8); PC-1304.53(a)(10)(xiii); A-LCCA, 1988)	4-104.3*	Critical

LIQUID AND SOLID WASTE DISPOSAL – Chapter 4, Section 105

Issue/Violation	Code #	Actions by Head Start Staff
Wastewater was not disposed of in an approved individual or community wastewater disposal system, or in a manner approved by the Environmental Health Advisor. (PC-HSPS-1304.53(a)(10)(xvi))	4-105.1*	Critical
On-site wastewater treatment and disposal systems were not operated as designed or were not properly maintained. Chemical toilets were used by the Head Start Center. (PC-HSPS-1304.53(a)(8); PC-HSPS-1304.53(a)(10)(xvi))	4-105.2	
Solid waste generated by the Head Start Center and stored outside the facility was allowed to accumulate in quantities above storage capacity. Solid waste stored outside the facility was not removed twice weekly or at a frequency approved by the Environmental Health Advisor. The outside storage area used for intermediate and bulk storage of solid waste was not properly designed and maintained to prohibit unauthorized access to the area. Solid waste was not disposed of in an approved solid waste disposal site. (PC-HSPS-1304.53(a)(10)(viii))	4-105.3	
Solid waste was not removed from inside the facility daily, or as often as necessary to prevent its build-up beyond the capacity of available receptacles. (HSPS-1304.53(a)(10)(viii))	4-105.4*	Critical

OTHER UTILITY SERVICES – Chapter 4, Section 106

Issue/Violation	Code #	Actions by Head Start Staff
Utility connections to the building were not made by a licensed or qualified service contractor, or were not free from defects, leaks, and obstructions in accordance with the applicable national codes or with Tribal, State, or local regulatory agency codes. (PC-HSPS-1304.53(a)(7))	4-106.1*	Critical
Gas-fired equipment was not provided with a 100 percent cut-off safety control valve. (PC-HSPS-1304.53(a)(6)&(7); A-NFPA-54-5.5.4)	4-106.2	
When natural or propane/butane gas or heating oil is used, the facility did not have an outside shut-off valve that was easily accessible to adults in emergency situations (Gas shut-off valves on propane tanks are acceptable). A shut-off tool was not available to staff or accessible to children for non-hand operated valves. Staff were not instructed on the valve/shut-off tool location, and when/how to operate the shut-off valve. (PC-HSPS-1304.53(a)(6)&(7); A-NFPA-54-3.10.3)	4-106.3	
Licensed or certified repair personnel did not make repairs, renovations or changes to the piped gas system, or the fuel gas piping system and its appurtenances (valves, connectors) were not installed/maintained in accordance with the <u>National Fuel Gas Code, NFPA 54</u> , or equivalent. (PC-HSPS-1304.53(a)(6); PC-HSPS-1304.53(a)(7))	4-106.4*	Critical
Fuel gas storage tanks were not installed and maintained in accordance with the <u>Standard for Storage and Handling of Liquefied Petroleum Gases, NFPA 58</u> , or equivalent. (PC-HSPS-1304.53(a)(6); PC-HSPS-1304.53(a)(7))	4-106.5	

OTHER UTILITY SERVICES – Chapter 4, Section 106 - Continued

Issue/Violation	Code #	Actions by Head Start Staff
Electrical wiring, outlets and fixtures were not properly installed and connected to the source of electrical energy in a manner that meets the most recent edition of <u>NFPA-70 National Electric Code</u> , or equivalent. (PC-HSPS-1304.53(a)(6)&(7); PC-HSPS-1304.53(a)(10)(xi))	4-106.6	
A licensed electrician did not make major repairs or changes to the electrical system, or electrical work was not conducted in accordance with the latest edition of <u>NFPA-70 National Electric Code</u> , or equivalent. (PC-HSPS-1304.53(a)(6); PC-HSPS-1304.53(a)(10)(xi))	4-106.7*	Critical
A licensed or certified plumber did not make major repairs, renovation or changes to the plumbing system, or plumbing work was not conducted in accordance with the latest approved version of the <u>Uniform Plumbing Code</u> , or equivalent. (PC-HSPS-1304.53(a)(6); PC-HSPS-1304.53(a)(7))	4-106.8*	Critical
The Head Start Center was not provided with electrical service. (PC-HSPS-1304.53(a)(1))	4-106.9	
Telephone service or another approved communication system (cellular phones, commercial twoway radios or other systems) was not provided or easily accessible for this Head Start Center. (PC-HSPS-1304.22(a)(2))	4-106.10	

FUNCTIONAL DESIGN AND STRUCTURE – Chapter 4, Section 107

Issue/Violation	Code #	Actions by Head Start Staff
Safety glass or other such material was not provided for transparent panels accessible to children. All glass panels or windows, less than 40 inches (102 cm) from the floor were not marked with stickers, tape or other devices to ensure they are visible. (PC-HSPS-1304.53(a)(10)(xii))	4-107.1	
Insufficient routine maintenance was provided to keep the structure in good repair. (PC-HSPS-1304.53(a)(7))	4-107.2	
The Head Start Program facility was not in compliance with the Chapter entitled <u>New Educational Occupancies</u> or the Chapter entitled <u>Existing Educational Occupancies</u> of the latest version of the <u>National Fire Protection Association, Life Safety Code, NFPA-101</u> . (PC-HSPS-1304.53(a)(6))	4-107.3*	Critical
A minimum of 35 square feet (3.3 m ²) of useable indoor space per child was not available for the care and use of children (i.e., exclusive of bathrooms, halls, kitchen, storage places and fixed or difficult to move furniture and equipment). (A-HSPS-1304.53(a)(5))	4-107.4*	Critical
A minimum of 50 square feet (4.6 m ²) per child of useable indoor space was not provided in Early Head Start programs, when infant's and toddler's play and sleep areas are in the same room, and cribs are used. Refer to Section 3-104 for staffing ratios. (BP-HSPS-1304.53(a)(5))	4-107.5	
The indoor and outdoor spaces in use by mobile infants and toddlers were not separated from general walkways and from areas used by preschoolers. (A-HSPS-1304.53(a)(4))	4-107.6*	Critical
Outdoor space at the facility did not provide at least 75 square feet (7.0 m ²) per child for the outdoor play area. (The outdoor play area can accommodate 33 percent of the established Head Start Center capacity at one time) (PC-HSPS-1304.53(a)(5))	4-107.7	
Outdoor space at this Early Head Start Center did not provide outdoor play areas of 33 square feet per child (<18 months), and 50 square feet per child (18-24 months). (BP-HSPS-1304.53(a)(5))	4-107.8	
Adequate storage space was not provided for learning supplies or equipment. (PC-HSPS-1304.53(b)(1)(vii))	4-107.9	

ACCESSIBILITY TO PERSONS WITH DISABILITIES – Chapter 4, Section 108

Issue/Violation	Code #	Actions by Head Start Staff
The facility did not comply with the Federal Rehabilitation Act, 29 USC in designing access and use of Head Start facilities, including, but not limited to, access ramps, bathroom design and school bus accessibility (PC-HSPS-1304.21(a)(5)(iii); PC-HSPS1304.53(b)(1)(iii))	4-108.1*	Critical
Indoor and outdoor environments were not designed and constructed to be accessible to all and comply with <u>The Federal Rehabilitation Act</u> (PC-HSPS-1304.53(a)(10)(xvii); PC-HSPS-1308.4)	4-108.2	
Playgrounds do not meet ADA as required by the Head Start Performance Standards. (BP-HSPS-1304.53(a)(10)(xvii))(HSPS-1308.4)	4-108.3	

HEATING, VENTILATION AND AIR CONDITIONING (HVAC) – Chapter 4, Section 109

Issue/Violation	Code #	Actions by Head Start Staff
The heating, ventilation and air conditioning systems were not inspected annually by a qualified service contractor or the annual inspection results were not documented as required by the Head Start Performance Standard. (PC-HSPS-1304.53(a)(10))	4-109.1	
Combustion air (for gas, coal, or oil-fired equipment) was not drawn from outside the structure or combustion exhaust gases were not vented outside the structure. (PC-HSPS-1304.53(a)(6)&(7)); (A-UPC-506 & 507)	4-109.2*	Critical
Open flame and kerosene space heaters were used at the facility, or portable gas stoves were used for space heating, or vent-less fireplaces and combustion heaters were used. (PC-HSPS-1304.53(a)(10)(i))	4-109.3*	Critical
Portable electric heaters were not UL approved. Electrical heaters were placed in a location that was accessible to children, or too close (3 feet) to curtains, papers and furniture, or not provided with a protective cover to prevent burns. (PC-HSPS-1304.53(a)(10)(i))	4-109.4	
The wood burning stove was not properly installed in accordance with the manufacturer's requirements or in accordance with any Tribal, local or State requirements. The wood burning stove was not installed in accordance with all requirements of the most recent version of <u>Standard for Chimneys, Fireplaces, Vents and Solid Fuel Burning Appliances, NFPA 211</u> . A policy and procedure has not been developed for the proper maintenance and cleaning of the stove. (PC-HSPS-1304.53(a)(10)(i); 1304.53(a)(6)&(7))	4-109.5	
Sources of heat above 110 degrees F. (43.3°C.) were not protected with an appropriate barrier to make the heat source inaccessible to children (A noncombustible protective barrier is required around a wood burning stove to limit access to the stove surface by children). (PC-HSPS-1304.53(a)(10)(i))	4-109.6*	Critical
Temperatures in occupied spaces were not maintained within the wintertime range of 65-75 F°, and a summertime range of 68-82 F°. When not occupied, the heating system was not capable of maintaining a temperature of at least 45°F to protect plumbing from freeze damage. (BP-HSPS-1304.53(a)(10)(i))	4-109.7	
Rooms used by participants were not ventilated by natural or mechanical means to avoid the accumulation of objectionable odors and potentially harmful vapors and gases. (PC-HSPS-1304.53(a)(8))	4-109.8	
Windows that could be opened for ventilation and are accessible to children, were not of the safety type, or child proofed and screened when open. Windows that are above ground level or windows on the ground level that pose a substantial risk of injury if a child falls from it, were not constructed, adapted, or adjusted so that the windows may not open wider than 3.5 inches (8.9 cm). (PC-HSPS-1304.53(a)(10)(xii))	4-109.9*	Critical

LIGHTING AND ELECTRICAL – Chapter 4, Section 110

Issue/Violation	Code #	Actions by Head Start Staff
Electrical appliances were not UL approved, or equivalent, or maintained in accordance with the manufacturer's recommendations. (PC-HSPS-1304.53(b)(1)(vi))	4-110.1*	Critical
Unused electrical outlets in rooms accessible to children were not protected with child-proof caps or covers. (A-HSPS-1304.53(a)(10)(xi))	4-110.2	
Electrical outlets in toilet rooms and bathrooms were not protected by a ground fault circuit interrupter (GFCI), either at the outlet or at the circuit breaker, in accordance with applicable electrical codes. A GFCI protects outlets within 6 feet (2 m) of sinks or other "wet" locations. Equipment provided with internal GFCI can receive power from unprotected outlets. (HSPS-1304-53(a)(10)(xi)); (A-NFPA 70-210.8(b)(1))	4-110.3	
GFCI's were not tested (test button) or documented quarterly. (PC-HSPS-1304-53(a)(10)(xi))	4-110.4	
Extension cords were not UL approved, created a trip or shock hazard, or were used as permanent wiring. (PC-HSPS-1304.53(a)(10)(xi))	4-110.5	
Fuses and breakers were not labeled, inaccessible to staff, accessible to children, or by-passed. Staff were not knowledgeable on the location or function of electrical breakers/fuses. (PC-HSPS-1304.53(a)(10)(xi))	4-110.6	
Insufficient lighting was provided. See Attachment 1 (BP-HSPS-1304.53(a)(10)(iv))	4-110.7	See Attachment 1
Light fixtures in rooms accessible to children were not shielded. Windows used to provide natural illumination were not equipped with blinds or other devices that were child safe. (PC-HSPS-1304.53(a)(10)(iv))	4-110.8	

PLUMBING – Chapter 4, Section 111

Issue/Violation	Code #	Actions by Head Start Staff
Plumbing fixtures in new construction did not comply with the Federal Rehabilitation Act (UFAS Stds.) (PC-HSPS-1304.53(a)(10)(xiv); PC-HSPS-1304.53(a)(10)(xvii))	4-111.1	
Lead pipe or lead solder were used for new potable water lines or for the replacement or repair of existing water service lines. (PC-HSPS-1304.53(a)(7)); (A-UPC-316.1.3)	4-111.2*	Critical
Hot water temperature at fixtures accessible to participants exceeded 120°F. (PC-HSPS-1304.53(a)(10)(xiv))	4-111.3*	Critical
Handwashing sinks were not provided with hot water under pressure. (PC-HSPS-1304.53(a)(10)(xiv))	4-111.4	
Primary childcare area was not provided with at least 1 handwashing sink. (PC-HSPS-1304.53(a)(10)(xiv))	4-111.5	
Plumbing fixtures intended for use by children were not sized or and located so as to be easily accessible to children (step stools are acceptable). (PC-HSPS-1304.53(a)(10)(xiv))	4-111.6	See Attachment 1
The water heater was located in an area that was accessible to participants. (PC-HSPS-1304.53(a)(1))	4-111.7*	Critical
Separate staff toilet rooms were not provided for this facility. (PC-HSPS-1304.53(a)(10)(xiv))	4-111.8	
Toilets, urinals and handsinks were not provided at a ratio of 1 to 10 for toddlers and preschoolers. Urinals exceeded 30 percent of the required toilet fixtures. Sanitary facilities were not easily accessible for use and supervision. (BP-HSPS-1304.53(a)(10)(xiv))	4-111.9	
There were cross connections that could permit contamination of the potable water supply. Vacuum breakers were not provided on threaded hose connections. (PC-HSPS-1304.53(a)(10)(xiv); (A-UPC-602.3)	4-111.10*	Critical
This new facility did not have a janitor's closet equipped with a mop sink, mechanical ventilation to the outside or racks, shelves and other devices for the orderly and safe storage of cleaning supplies and equipment. (PC-HSPS-1304.53(a)(10)(xiv))	4-111.11	
The janitor's closet was not of a 1-hour fire rated construction or sprinklered. The door(s) to the janitor's closet was not equipped with a self-closing device. (PC-HSPS-1304.53(a)(10)(xiv)); (A-LSC-Chapter 10.3.2.1; LSC-Chapter 6.2.3.1.b)	4-111.12*	Critical
Doors to janitor's closets were not kept closed and locked whenever children were present. (PC-HSPS-1304.53(a)(10)(xiv))	4-111.13*	Critical

PREVENTATIVE MAINTENANCE – Chapter 4, Section 112

Issue/Violation	Code #	Actions by Head Start Staff
The Head Start Program did not provide for the maintenance, repair, safety, or security of all Early Head Start and Head Start facilities, materials and equipment. (A-HSPS-1304.53(a)(7))	4-112.1*	Critical
The Head Start Director has not developed a system for routine maintenance checks of the Head Start facilities, utility systems and equipment with their Head Start Facilities Maintenance Program or Tribal Facilities Maintenance Program. The replacement or repair of equipment or parts was not documented. NOTE: DO NOT write this as a violation if the Environmental Health Advisor has not assisted the Head Start Program with developing the routine maintenance check system. (PC-HSPS-1304.53(a)(10))	4-112.2	

SANITATION AND DISINFECTION – Chapter 4, Section 113

Issue/Violation	Code #	Actions by Head Start Staff
Sanitation and disinfection policies and procedures have not been developed for this Head Start Center. The policies and procedures did not include schedules for cleaning and sanitizing the Head Start Center, child contact surfaces of equipment and toys, the proper use of cleaning equipment, the proper mixing and use of cleaning chemicals or the proper storage of cleaning equipment and chemicals. (PC-HSPS-1304.53(a)(7); PC-HSPS-1304.53(a)(10)(viii))	4-113.1	
The indoor or outdoor premises were not cleaned daily or kept free of undesirable and hazardous materials and conditions. During periods of operation, all parts of the Head Start Center were not kept in a clean, sanitary, or orderly condition. (A-HSPS-1304.53(a)(10)(viii))	4-113.2	

SANITATION AND DISINFECTION – Chapter 4, Section 113 - Continued

Issue/Violation	Code #	Actions by Head Start Staff
All cleaning chemicals were not stored in a locked area, inaccessible to children. Compounds containing ammonia were stored in the same enclosure as compounds containing chlorine, or were being mixed. (PC-HSPS-1304.53(a)(8); PC-HSPS-1304.53(a)(10)(iii))	4-113.3*	Critical
Children participated in cleaning activities that exposed them to physical, chemical or biological hazards. Children engaged in unsupervised cleaning activities such as wiping down furniture with soap and water (desktops, tables, etc.) (PC-HSPS-130453(a)(8))	4-113.4*	Critical
Cleaning chemicals were in use while children occupied the facility (except that cleaning of spills as necessary to maintain infection control practices, control odors and maintain the appearance at the facility). (PC-HSPS-130453(a)(8))	4-113.5	
Floors and carpets were not cleaned daily. Toilet room and diaper changing area floors, toilets, and lavatories were not cleaned and disinfected daily or as often as necessary to prevent the accumulation of contaminants (excluding days that the Head Start Center was not in operation). (PC-HSPS-1304.53(a)(10)(viii); 1304.53(a)(10)(xiv))	4-113.6	
Indoor solid waste receptacles were not are durable or easily cleanable. Waste receptacles used for putrescent wastes were not covered. (PC-HSPS-1304.53(a)(10)(viii))	4-113.7	

VECTOR CONTROL – Chapter 4, Section 114

Issue/Violation	Code #	Actions by Head Start Staff
The facility was not free of insects, rodents or other pests that may constitute a health hazard. (PC-HSPS-1304.53(a)(10)(viii))	4-114.1*	Critical
The Head Start Center did not have written vector control policies and procedures that included types of vectors common to the area, pesticide use and application, documentation and emergency preparedness. (PC-1304.53(a)(8); PC-1304.53(a)(10)(viii))	4-114.2	
Pesticides were used when participants were present, or pesticides applied during non-operating periods, were not applied according to the manufacturer's instructions. (PC-HSPS-1304.53(a)(8))	4-114.3*	Critical
Restricted use pesticides were not applied or supervised by a Tribal or State-certified individual. Application of pesticides is in compliance with all provisions of the most recent editions of the <u>FDA Food Code</u> , <u>Federal Insecticide, Fungicide, and Rodenticide Act</u> , and <u>Hazard Communications Standard</u> , in the absence of Tribal codes. (PC-HSPS-1304.53(a)(6); PC-HSPS-1304.53(a)(8))	4-114.4	
Pesticide applications at the Head Start Center were not documented, or records of contractual extermination services were not maintained at the Head Start Center. Records include the types and amounts of pesticides applied, the purpose for using the pesticide, the date of application and who applied or supervised the application of the pesticide. The Head Start staff did not directly observe the application of pesticides. (PC-HSPS-1304.53(a)(8))	4-114.5	
If topical spraying of pesticides by agricultural agencies or farmers occurred near a Head Start Center, the Head Start Director did not take all necessary precautions to limit pesticide exposure to participants. (PC-HSPS-1304.53(a)(8))	4-114.6	

INJURY PREVENTION AND SAFETY – Chapter 4, Section 115

Issue/Violation	Code #	Actions by Head Start Staff
This Head Start Center did not have written safety policies and procedures that included fire protection, fire detection, fire suppression, the use and storage of toxic and hazardous substances, playground safety, playground equipment inspection, toy safety and age-appropriate use criteria, injury prevention or emergency preparedness. (PC-HSPS-1304.22(d)(1)&(2))	4-115.1*	Critical
Staff did not receive annual injury prevention and emergency response training. (PC-HSPS-1304.22(d)(1); PC-1304.52(k)(2))	4-115.2	
Injury records were not maintained or reviewed by staff to ID injury trends. (PC-HSPS-1304.20(d))	4-115.3	

FIRE PREVENTION AND EMERGENCY RESPONSE – Chapter 4, Section 116

Issue/Violation	Code #	Actions by Head Start Staff
The Head Start Center was located above or below the level of exit discharge. (PC-HSPS-1304.53(a)(6)); (A-LSC-10-2.1.2 & 11-2.1.2)	4-116.1*	Critical
At least two clearly identified, unobstructed, remotely located means of egress were not provided. (PC-HSPS-1304.53(a)(6); PC-HSPS-1304.53(a)(10)(vii)); (A-LSC-Chapters 3, 5, 10 & 11)	4-116.2*	Critical
Exit doors did not swing outward or were equipped with more than one latching device. (PC-HSPS-1304.53(a)(6); PC-HSPS-1304.53(a)(10)(vii)); (A-LSC-Chapters 3, 5, 10 & 11)	4-116.3*	Critical
Windows were used as the second means of egress from the facility. (PC-HSPS-1304.53(a)(6); PC-HSPS-1304.53(a)(10)(vii)); (A-LSC-Chapters 3, 5, 10 & 11)	4-116.4*	Critical
At least one working smoke detector was not available in each classroom with a floor area of 1600 ft ² (149 m ²) or less. For classrooms with greater than 1600 ft ² (149 m ²) floor area, smoke detectors were placed more than 40 feet (12 m) apart. Interior hallways of Head Start Centers did not have at least one smoke detector every 40 feet (12 m). All smoke detectors were not placed on the ceiling or within 12 inches (30.5 cm) of the ceiling. (PC-HSPS-1304.53(a)(10)(vi))	4-116.5	
New and remodeled Head Start Centers were not provided with hard-wired smoke detectors in accordance with NFPA 101, LSC, Chapter 7. (PC-HSPS-1304.53(a)(10)(vi))	4-116.6	
The battery-operated smoke detectors in this existing Head Start Center were not functioning properly. (PC-HSPS-1304.53(a)(10)(vi))	4-116.7	
Smoke detectors were not tested monthly as recommended by the manufacturer, or test results were not documented. (PC-HSPS-1304.53(a)(10)(vi))	4-116.8	
There was not at least one working fire extinguisher readily available in each classroom. (PC-HSPS-1304.53(a)(10)(v))	4-116.9	
Fire extinguishers were not rated at least 2A10BC, or were less than 5 pounds (2.3 kg) or more than 20 pounds (9.1 kg) in size. The top of the fire extinguisher was mounted more than 5 feet (1.5m) from the floor. In the absence of applicable Tribal, local or State codes, all fire extinguishers did not meet the most recent provisions of the Code for Portable Fire Extinguishers, NFPA 10. (PC-HSPS-1304.53(a)(6); PC-HSPS-1304.53(a)(10)(v)); (A-NFPA 10 1-6.9)	4-116.10	
Fire extinguisher manufacturer's recommended procedures for inspections and servicing of fire extinguishers were not followed or documented as outlined in the Head Start safety policies and procedures. (PC-HSPS-1304.53(a)(6); PC-HSPS-1304.53(a)(10)(v)); (A-NFPA 10 1-6.14)	4-116.11	
This new or renovated facility (related to the components of fire safety, egress, extinguishment, fire detection and fire protection) did not meet Tribal requirements, or all the provisions of the latest version of the <u>Life Safety Code, NFPA 101, Chapters entitled, New Educational Occupancies or Existing Educational Occupancies</u> . (PC-HSPS-1304.53(a)(6))	4-116.12*	Critical
Annual staff training was not provided in fire protection, detection and suppression. (PC-HSPS-1304.52(k)(2))	4-116.13	
Monthly fire drills were not conducted for the facility. One extra drill was not conducted within the first 30 days of classes. Fire drills were not documented to include the date and time of the drill, the number of children and staff involved, the evacuation time and any problems encountered. (PC-HSPS-1304.22(a)(3); PC-HSPS-1304.53(a)(6)); (A-LSC-Chapters 10 & 11 7.1.2.1 & 7.1.2.2)	4-116.14*	Critical
This Head Start Center did not provide adequate emergency lighting in the event of a power failure. (PC-HSPS-1304.53(a)(6); PC-HSPS-1304-53(a)(10)(iv))	4-116.15	See Attachment 1
Highly flammable chemicals, such as lighter fluids, duplicating fluids, and paint thinners and flammable materials were stored inside the facility. (PC-HSPS-1304.53(a)(10)(iii))	4-116.16*	Critical
Child toilet room doors were lockable from inside or outside. Interior doors to rooms normally occupied or accessible to children and staff toilet room doors were not unlockable from the outside or could be locked (from the inside). (BP-HSPS-1304.52(g)(5); BP-HSPS-1304.53(a)(10)(vii))	4-116.17*	Critical
The facility had a door labeled as "EXIT" locked from the inside, or the exit door was otherwise inaccessible, while the building was occupied. (PC-HSPS-1304.53(10)(vii)); (PC-LSC-5-2.1.5.1)	4-116.18*	Critical
Exit doors were not clearly labeled as <i>EXITS</i> . (PC-HSPS1304.53(a)(10)(vii)); (A-LSC-5-10.1.2)	4-116.19*	Critical

FIRE PREVENTION AND EMERGENCY RESPONSE – Chapter 4, Section 116 - Continued

Issue/Violation	Code #	Actions by Head Start Staff
The facility had no written emergency plan for responding to man-made or natural emergencies likely to occur in its geographical region. (PC-HSPS-1304.22(a)(3))	4-116.20*	Critical See Attachment 1
Emergency evacuation routes were not clearly marked or posted so the path to safety outside was unmistakable. (PC-HSPS-1304.53(a)(10)(vii)0; (A-LSC-5-10.4.1)	4-116.21	
Adequate provisions were not made for children with disabilities to ensure their safety, comfort and participation. Evacuation plans did not account for the safe evacuation of children with disabilities or their supervision during emergencies. (PC-HSPS-1304.53(a)(10)(xvii)	4-116.22	
This Early Head Start Center has not developed emergency evacuation plans for safely evacuating infants and toddlers while maintaining supervision (at all times). This plan may include using evacuation strollers or cribs. (PC-HSPS-1304.22(a)(3))	4-116.23	

DANGEROUS CHEMICALS AND MATERIALS – Chapter 4, Section 117

Issue/Violation	Code #	Actions by Head Start Staff
A Hazard Communication Program (MSDS) was needed at the facility, and the facility was not exempt, because the Head Start Center program could not show the following: a. hazardous chemicals in the workplace were used according to the manufacturer's intended purpose b. chemical exposure to workers is similar to what could be expected when the same chemical is used by the general public for domestic use. (PC-HSPS-1304.53(a)(8); PC-HSPS-1304.53(a)(10)(iii); (A-OSHA-1910.1200(b)(6)(ix))	4-117.1	See Attachment 1 See EIS Regulation Statement This statement is for the Head Start Exemption from the OSHA Hazard Communication Standard
A Hazard Communication Program (MSDS) was needed at the facility because chemical use was other than as specified in 4-117.1 (above) or the chemical was used in quantities or frequencies greater than the general public's expected use. (PC-HSPS-1304.53(a)(8); PC-HSPS-1304.53(a)(10)(iii); (A-OSHA-1910.1200(b)(5)(v))	4-117.2	See Attachment 1 See EIS Regulation Statement
The Head Start Program used chemical products other than consumer products or in amounts not available to consumers, and did not have a Hazard Communication Program in place. The hazard communication program did not include the following: Identified responsible staff, written hazard communication program document, a list of all hazardous chemicals in the Head Start Center, material safety data sheets for all hazardous chemicals, specific labels on all hazardous chemicals, and employee information and training. (PC-HSPS-1304.53(a)(8); A-OSHA-1910.1200)	4-117.3*	Critical
All chemical products at the Head Start Center were not used in accordance with the manufacturer's labeled instructions. (PC-HSPS-1304.53(a)(8))	4-117.4	
The Health Service Advisory Committee did not review all MSDS and information on any other hazardous or toxic materials (required by the Hazard Communication Program) prior to toxic chemical purchase and use by the Head Start Program, or did not replace the toxic substances with non-toxic substitutes whenever possible. (PC-HSPS-1304.53(a)(8); PC-HSPS-1304.53(a)(10)(iii))	4-117.5	
Access to hazardous sections of a Head Start Center was not restricted to authorized personnel. Doors to these areas were not closed and locked when children were present. (PC-HSPS-1304.53(a)(10)(iii))	4-117.6*	Critical
Hazardous or toxic substances were not kept in a location that was inaccessible to children and separate from medications and food. (PC-HSPS-1304.53(a)(10)(iii))	4-117.7*	Critical
Poisonous or potentially poisonous plants on the premises were not inaccessible to children. All plants accessible to children were not identified and checked by name with the local poison control center or county cooperative extension agent to determine safe use. (PC-HSPS-1304.53(a)(8); PC-HSPS-1304.53(a)(10)(viii))	4-117.8	
All toys were not age appropriate, contained toxic materials, or were not in good repair. All art supplies in the Center were not non-toxic. (PC-HSPS-1304.53(b)(1)(vi))	4-117.9	
All classroom equipment, including play equipment and countertops, were not designed with smooth rounded corners. (PC-HSPS-1304.53(b)(1)(vi))	4-117.10	

CHOKING HAZARDS – Chapter 4, Section 118

Issue/Violation	Code #	Actions by Head Start Staff
All toys were not age appropriate or posed a choking risk. (PC-HSPS-1304.53(b)(1)(vi))	4-118.1*	Critical
Coins, safety pins, paper clips, marbles, and similar small objects were available for children under 3 years of age . Children under the age of 3 years did have access to plastic bags. Recommendation: rubber balloons, inflated or un-inflated, should be banned from the Head Start Center. (PC-HSPS-1304.53(b)(1)(vi))	4-118.2	
Small objects such as beads, buttons or other similar objects were used without supervision, or by children under 3 years of age . The Teacher did not inspect or clean up areas where these small objects have been used to ensure they are not allowed to become choking hazards for young children. (PC-HSPS-1304.53(b)(1)(vi))	4-118.3	
Foods that were round, hard, small, thick and sticky, smooth or slippery were offered to children under 3 years of age . Examples of such foods include hot dogs (sliced into rounds), whole grapes, hard candy, nuts, seeds, raw peas, dried fruit, pretzels, chips, peanuts, popcorn, marshmallows, spoonfuls of peanut butter, and chunks of meat larger than can be swallowed whole. (PC-HSPS-1304.23(e))	4-118.4	
For Early Head Start programs food for infants and toddlers was not cut into small pieces that were no larger than ¼ inch cubes. (PC-HSPS-1304.23(e))	4-118.5	

TRANSPORTATION – Chapter 4, Section 119

(Unless otherwise noted, these requirements become effective on January 18, 2002)

Issue/Violation	Code #	Actions by Head Start Staff
Transportation services provided by the grantee were not in compliance with the requirements of 45CFR, Chapter XIII, Part 1310 – Head Start Transportation. (A-HSPS-1310.10(c))	4-119.1	
Publicly or privately leased transportation services were not in compliance with the requirements of 45CFR, Chapter XIII, Part 1310 – Head Start Transportation. (A-HSPS-1310.2(a))	4-119.2	
Each vehicle used to provide transportation services was not equipped with: (A-HSPS -1310.10(d)(1-4)) a. a communication system to call for assistance in case of an emergency; b. safety equipment for use in an emergency, including a charged fire extinguisher that is properly mounted near the driver's seat and a sign indicating its location; c. a first aid kit and a sign indicating the location of such equipment; d. a seat belt cutter for use in an emergency evacuation and a sign indicating its location.	4-119.3	
Any auxiliary seating arrangement used in transportation vehicles was not built into the vehicle by the manufacturer as part of its standard design, was not maintained in proper working order and was not inspected as part of the annual inspection. (A-HSPS-1310.10(e))	4-119.4	
All crashes that involved child transportation vehicles were not reported according to applicable Tribal or State requirements. (A-HSPS-1310.10(f))	4-119.5	
Children were not released after transportation to a parent or legal guardian, or other individual identified in writing by the parent or legal guardian. (A-HSPS-1310.10(g))	4-119.6	
(By January 20, 2004) All vehicles used to transport children as part of the transportation services were not equipped for use of height- and weight-appropriate child safety restraint systems. (A-HSPS-1310.11)	4-119.7	
(By January 18, 2006) Transportation services did not use school buses or allowable alternate vehicles to transport children enrolled in the Head Start or Early Head Start. (A-HSPS-1310.12(a))	4-119.8	
Any new vehicles purchased by Head Start and Early Head Start programs for use in transportation services were not either a school bus or an allowable alternate vehicle and equipped with the following: a. for use of height- and weight-appropriate child safety restraint systems; and, b. with a reverse beeper. (A-HSPS-1310.12(b)(1-2))	4-119.9	
Vehicles used to provide transportation services were not maintained in safe operating condition at all times. The grantee or their delegate agency did not establish and implement procedures for: a. a thorough safety inspection of each vehicle on at least an annual basis through an inspection program licensed or operated by the Tribe or State; b. systematic preventative maintenance on such vehicles; and, daily pre-trip inspection of the vehicles by the driver. (A-HSPS-1310.13(a-b))	4-119.10	

TRANSPORTATION – Chapter 4, Section 119 - Continued

Issue/Violation	Code #	Actions by Head Start Staff
<p>The grantee did not ensure that transportation services provide:</p> <ul style="list-style-type: none"> a. on a vehicle equipped for use of such devices, any child weighing 50 pounds or less was seated in a child restraint system appropriate to the height and weight of the child while the vehicle is in motion; b. that baggage or other items were properly stowed and secured, the aisles remain clear and the doors, and emergency exits remain unobstructed at all times. (A-HSPS-1310.15(a-b)) 	4-119.11	
<p>(By January 20, 2004) For each transportation vehicle there was not at least one bus monitor on board at all times, with additional bus monitors provided as necessary, such as when needed to accommodate the needs of children with disabilities. (A-HSPS-1310.15(c))</p>	4-119.12	
<p>Except for bus monitors assisting children, all vehicle occupants were not seated and wearing height and weight appropriate safety restraints while the vehicle was in motion. (A-HSPS-1310.10.15 (d))</p>	4-119.13	
<p>Persons that drive vehicles used to provide transportation services did not have a valid State Commercial Driver's License (CDL) for the same class as the operated vehicle. (A-HSPS-1310.16(a))</p>	4-119.14	
<p>(By April 18, 2002) Every driver did not receive a combination of classroom instruction and behind-the-wheel instruction sufficient to enable each driver to: (A-HSPS-1310.17(b)(1-7))</p> <ul style="list-style-type: none"> a. operate the vehicle in a safe and efficient manner; b. safely run a fixed route, including loading and unloading children, stopping at railroad crossings and performing other specialized driving maneuvers; c. administer first aid; d. handle emergency situations, including vehicle evacuation procedures; e. operate any special equipment (i.e., wheelchair lifts, assistance devices, special occupant restraints); f. conduct routine maintenance and safety checks of the vehicle; and, g. maintain accurate records as necessary. h. transport children with disabilities. 	4-119.15	
<p>(By April 18, 2002) Every driver did not receive annual refresher training courses including the topics listed in Section 4-119.15 above, and any additional required training. (A-HSPS-1310.17(a&d))</p>	4-119.16	
<p>The annual evaluation of each driver did not include an on-board observation of road performance. (A-HSPS-1310.17(f)(1))</p>	4-119.17	
<p>Prior to assignment, bus monitors were not trained on child boarding and exiting procedures, use of child restraint systems, any required paperwork, responses to emergencies, emergency evacuation procedures, use of special equipment, child pick-up and release procedures and pre- and post-trip vehicle check. (A-HSPS-1310.17(f)(2))</p>	4-119.18	
<p>The grantee or agency providing transportation services did not follow one or more of the following basic child safety principals:</p> <ul style="list-style-type: none"> a) The time a child is in transit to and from the Head Start or Early Head Start program must not exceed one hour unless there is no shorter route available or any alternative shorter route is either unsafe or impractical. (A-HSPS-1310.20(b)(1)) b) Vehicles must not be required to back up or make "U" turns, except when necessary for reasons of safety or because of physical barriers. Each agency ensures that no vehicles are loaded beyond the maximum capacity at any time. (A-HSPS-1310.20(b)(3)) c) Stops must be located to minimize traffic disruptions and to afford the driver a good field of view in front of and behind the vehicle. (A-HSPS-1310.20(b)(4)) d) When possible stops must be located to eliminate the need for children to cross the street or highway to board or leave the vehicle. (A-HSPS-1310.20(b)(5)) e) If children must cross the street before boarding or after leaving the vehicle because curbside drop off or pick up is impossible, they must be escorted across the street by the bus monitor or another adult. (A-HSPS-1310.20(b)(6)) f) Vehicles are not loaded beyond the maximum capacity at any time. (A-HSPS-1310.20(b)(2)) 	4-119.19	

TRANSPORTATION – Chapter 4, Section 119 - Continued

Issue/Violation	Code #	Actions by Head Start Staff
Within the first 30 days of the program year, each child that received transportation services by the grantee or their delegate agency, was not provided with the following transportation and pedestrian safety education: a. safe riding practices; b. safety procedures for boarding and leaving the vehicle; c. safety procedures in crossing the street to and from the vehicle at stops; d. recognition of the danger zones around the vehicle; and, e. emergency evacuation procedures, including participating in an emergency evacuation drill conducted on the vehicle the child will be riding. (A-HSPS-1310.21(b)(1-5))	4-119.20	
Within the first 30 days of the program year, parents of children that receive transportation services by the grantee or their delegate agency, was not provided with the following transportation and pedestrian safety education: a. the importance of escorting their children to the vehicle stop and the importance of reinforcing the training provided to children regarding vehicle safety; and, b. complements the training provided to the children so that safety practices can be reinforced both in Head Start and at home by the parent. (A-HSPS-1310.21(c)(1-2))	4-119.21	
There were not at least two bus evacuation drills, in addition to the one provided to the children during their training, every program year. (A-HSPS-1310.21(d))	4-119.22	
(By January 18, 2006) The grantee or delegate agency did not provide school buses or allowable alternate vehicles adapted or designed for transportation of children with disabilities available as necessary to transport such children enrolled in the program. (A-HSPS-1310.22(a))	4-119.23	

OUTDOOR ENVIRONMENT – Chapter 4, Section 120

Issue/Violation	Code #	Actions by Head Start Staff
Playground equipment was not age appropriate, of safe design, or free of hazards. The equipment and layout of the playground did not comply with the Consumer Product Safety Commission's, Handbook for Public Playground Safety and the requirements of the American Society of Testing Materials, or equivalent standards. (PC-HSPS-1304.53(a)(7); PC-HSPS-1304.53(a)(10)(x))	4-120.1*	Critical
The general playground area was not checked daily for broken glass, trash and other foreign materials and for areas of poor drainage and accumulations of water and ice. Documentation of these daily inspections and the findings was not kept according to the Safety policies and procedures . (PC-HSPS-1304.52(g)(5); PC-HSPS-1304.53(a)(7); PC-HSPS-1304.53(a)(10)(viii))	4-120.2	
Playgrounds and play areas were not accessible to persons with disabilities as required by the Head Start Performance Standards and the final ruling of the American's With Disabilities Act. (PC-HSPS-1304.21(a)(5)(iii); PC-HSPS-1304.53(a)(10)(xvii); PC-HSPS-1308.4(c))	4-120.3	
All outdoor areas normally occupied by children, such as recreation areas or playgrounds, were not separated from any roadway, parking lot or other area intended for the use of motor vehicles by a (continuous) fence that was a minimum of 48 inches (122 cm) high. (PC-HSPS-1304.53(a)(9))	4-120.4*	Critical
Monthly inspections of the playground equipment were not conducted and documented, or identified hazards were not eliminated. (PC-HSPS-1304.53(a)(10)(viii))	4-120.5	
Records were not maintained pertaining to the manufacture, installation and regular inspection of playground safety equipment. (PC-HSPS-1304.53(a)(7))	4-120.6	

ENVIRONMENTAL HAZARDS – Chapter 4, Section 121

Issue/Violation	Code #	Actions by Head Start Staff
The facility was not located on a well-drained site that was free from hazards, subject to high air pollution, loud or constant noises, or heavy traffic and away from unsafe structures, deep excavations, radiation or any other unsafe or harmful environmental conditions. (PC-HSPS-1304.53(a)(7); PC-HSPS-1304.53(a)(10)(viii))	4-121.1	
Environmental hazards, such as pits, storm shelters, abandoned wells, or abandoned appliances, that present a risk of entrapment or burial within or near the grounds of the facility, were not covered, removed, or made inaccessible to children. (PC-HSPS-1304.53(a)(10)(viii))	4-121.2*	Critical
The facility had radon in excess of 4 picocuries per liter of (interior) air, as measured according to approved standard procedures. NOTE: State can certify the Head Start facility is in a radon safe area. (PC-HSPS-1304.53(a)(8))	4-121.3	
Additional risk based radon sampling was not conducted at the facility as recommended by the Environmental Health Advisor as required by local, State or Tribal requirements. Risk based radon sampling was due to the facility location in a high-risk radon area, or remodeling/renovation of the Head Start Center. (PC-HSPS-1304.53(a)(8))	4-121.4	
Annual inspections for visible signs of deterioration of the lead-based paint were not conducted and documented. NOTE: Annual inspections necessary only when EPA or State certified Lead Based Paint Risk Assessors have determined the paint should be left in place. (PC-HSPS-1304.53(a)(6); 1304.53(a)(10)(ix))	4-121.5*	Critical
Environmental contaminants were not removed or abated by a licensed contractor with expertise in removal of the contaminant. (PC-HSPS-1304.53(a)(10)(xviii))	4-121.6	
Maintenance and repair workers were not informed of the presence of environmental hazards in the facility such as, lead, asbestos, formaldehyde and radon. PC-HSPS-1304.53(a)(7)	4-121.7	
Participants, staff and visitors were exposed to hazardous levels of asbestos, radon, lead, formaldehyde, PCB, or any other suspected/known carcinogen, or any physical, chemical, biological hazard, or disease vector. (PC-HSPS-1304.53(a)(8); PC-HSPS-1304.53(a)(10)(viii))	4-121.8	
Hazardous materials were used in the construction of the facility; including, but not limited to, lead-based paint (interior or exterior), lead-based solder (on potable water pipes), lead pipes or joints (for potable water plumbing), and asbestos containing materials. (PC-HSPS-1304.53(a)(10)(ix); PC-HSPS-1304.53(a)(8))	4-121.9*	Critical
A child, staff member, or visitor within the facility or grounds used tobacco for other than religious or spiritual purposes. (PC-HSPS-1304.53(a)(8)); (A-ACYF-11-HS-95-04)	4-121.10	
Animals were permitted within the facility or grounds without the approval of the Environmental Health Advisor, or animal policies and procedures were not established. (PC-HSPS-1304.53(a)(8))	4-121.11	

FOOD PROTECTION – Chapter 4, Section 122

Issue/Violation	Code #	Actions by Head Start Staff
Food service operations do not comply with the most recent edition of the <u>FDA Food Code</u> , or other applicable Tribal, State or local food codes. (PC-HSPS-1304.23(e)(1); PC-HSPS-1304.53(a)(6))	4-122.1*	Critical
Food procured from outside the facility did not come from an approved source as defined in the applicable Tribal, State or local food code. (PC-HSPS-1304.23(e)(1))	4-122.2*	Critical
Staff involved in food handling did not possess a current food handler card, or other evidence of current food handler training, when required by Tribal, State or local food codes. (PC-HSPS-1304.53(a)(6))	4-122.3	
Children were engaged in food preparation, dispense or service in a way that posed a potential for food contamination. (PC-HSPS-1304.23(c)(7))	4-122.4	See Attachment 1
Policies and procedures did not ensure the safety of infant and toddler foods, including feeding schedules, amounts/types of foods, handling/storage of breast milk and other baby foods. (PC-HSPS-1304.23(e)(1)&(2))	4-122.5*	Critical
Infant and toddler foods, such as milk, formula and other food items, were heated with microwave ovens. (PC-HSPS-1304.23(e)(1)&(2))	4-122.6	
Infants were not held while being fed, or were laid down to sleep with a bottle. (A-HSPS-1304.23(c)(5))	4-122.7	

ATTACHMENT 1

RECOMMENDED CONTENTS OF FIRST AID KIT – 4-101.4 EIS # 504-101.0001

- | | | |
|--|--|--|
| a) Disposable, nonporous gloves; | h) Safety pins; | n) Water (sterile water for wound cleaning); |
| b) Sealed packages of alcohol wipes or antiseptic; | i) Eye dressing; | o) Small plastic or metal splints; |
| c) Scissors, tweezers; | j) Syrup of ipecac; | p) Soap; |
| d) Thermometer; | k) Cold pack; | q) Gowns; |
| e) Bandage tape; | l) Current American Red Cross Standard First Aid text or equivalent first aid guide; | r) Protective eye goggles; |
| f) Sterile gauze pads, flexible roller gauze; | m) Insect sting preparation; | s) Mouth barriers for CPR. |
| g) Triangular bandages; | | |

DIAPER CHANGING STATION DESIGN DETAILS – 4-103.5 EIS # 504-103.0005

Diaper changing tables, or other elevated surfaces, used for no other purpose are required. The diaper-changing table has an impervious, nonabsorbent surface and is disinfected after each use. It is recommended that diaper changing tables or other elevated surfaces used for diaper changing be sturdy and be about 36 inches (91.4 cm) in height from the floor to the changing surface. It is recommended that the table or elevated surface be equipped with railings a minimum of six inches (15.2 cm) high to reduce the potential for a child to roll off the table. Safety straps on changing tables are not used because the straps are difficult to clean and lend themselves to allowing children to be unsupervised while on the changing table.

MINIMUM LIGHTING REQUIREMENTS – 4-110.7 EIS # 504-110.0007

Lighting levels, either natural or mechanical, are between 40 to 50 foot-candles (430 -538 lux) of illumination in the play areas and general activity areas of the Head Start Center. During naptime the level of illumination in the facility is reduced to 5 foot candles (54 lux) of illumination. There are between 50 to 70 foot candles (538 - 753 lux) of illumination provided on desk surfaces used by participants for studying or reading and 100 foot candles (1076 lux) for fine detail work.

CHILD SIZED PLUMBING FIXTURES – 4-111.6 EIS # 504-111.0006

Child sized fixtures means a maximum toilet height of 11 inches (27.9 cm) and a maximum hand sink height of 22 inches (55.9 cm). If child sized fixtures are not provided, then stable step stools or stands are provided.

EMERGENCY LIGHTING – 4-116.15 EIS # 504-116.0015

For small, one classroom Head Start Centers, emergency lighting may consist of operable, portable flashlights. In facilities that operate before or after daylight hours, permanently installed emergency lighting is provided at building exits. For large, multi-classroom Head Start Centers, requirements for emergency lighting found in the Life Safety Code, NFPA 101, or equivalent Tribal, State or local codes are followed.

EMERGENCY PLAN DETAILS - 4-116.20 EIS # 504-116.0020

Emergency types - fire, flood, tornado, earthquake, hurricane, blizzard or major utility failure or other disaster that could create structural damages to the Head Start Center or pose health hazards. The plan details responsibilities and actions to be taken in the event of an emergency situation and includes procedures for staff training on the emergency plan.

OSHA HAZARD COMMUNICATION PROGRAM (MSDS) – When Required – 4-117.1 and 4-117.2 EIS # 504-117.0001 and 504-117.0002

4-117.1 If the Head Start Center program can not show hazardous chemicals are used in the workplace according to the manufacturer's intended purpose, or the chemical exposure to workers is similar to that which could be expected when the same chemical is used by the general public in domestic use.

4-117.2 If the Head Start Center program uses consumer products or hazardous substances, for purposes other than described in 4-117.1, or in amounts and frequencies greater than what could be expected when the same chemical is used by the general public for domestic use.

WHAT THE OSHA HAZARD COMMUNICATION PROGRAM MUST INCLUDE - The hazard communication program includes an identified responsible staff, a written hazard communication program document, a list of all hazardous chemicals in the Head Start Center, material safety data sheets for all hazardous chemicals, and employee information and training.

CHILDREN ENGAGED IN FOOD PREPARATION – 4-122.4 EIS # 504-122.0004

During meal service, children are to be adequately supervised and follow proper hygienic practices, such as handwashing, proper handling of serving utensils, and proper care not to contaminate food. Foods served during meals are not re-served or saved for the next day.