



Provider Eligibility Standards (PES) Packet - RENEWAL

Paths to QUALITY™ and CCDF Eligibility Certification for
Preschool Classrooms in a Public School



Provider Eligibility Standards (PES) Paths to QUALITY™ and CCDF PES Certification

Indiana statute IC12-17.2-3.5 requires that early care and education, preschool and Out of School Time programs meet certain basic health and safety standards, known as Provider Eligibility Standards, or PES, prior to receiving public funds through the Child Care Development Fund (CCDF) voucher program. These PES standards also make up the minimum requirements for Level 1 of Paths to QUALITY™, Indiana's voluntary quality rating and improvement system.

Under IC12-17.2-7, preschool classrooms operated by a public school that wish to participate in the Indiana PreK Pilot Program must be rated at a Level 3 or Level 4 on Paths to QUALITY in order to receive these public funds. Participation in the PreK Pilot Program is voluntary.

For more information on the Indiana PreK Pilot Program please visit: <http://www.in.gov/fssa/4899.htm>.

Public schools interested in joining Paths to QUALITY must achieve PES certification as the first step. Once these PES standards have been verified, the public school preschool program is eligible to enroll in Paths to QUALITY at a Level 1.

For more information on Paths to QUALITY, please visit <http://www.in.gov/fssa/carefinder/2554.htm#>.

By meeting the Paths to QUALITY and CCDF certification standards explained in this packet, a public school preschool program will also be eligible to receive CCDF vouchers. The CCDF voucher program is a federal program designed to support low income families with the cost of child care while the parent/guardian is working, going to school or participating in TANF Impact activities. These vouchers can provide an additional funding stream for public schools to support early learning programs as well as before and after school or wrap-around care.

For more information on the CCDF program please visit: <http://www.in.gov/fssa/carefinder/3900.htm>.

If your school does not wish to accept CCDF vouchers, please complete the **Public School Paths to QUALITY only Certification Application**, as the standards vary slightly.

If you are a charter school interested in enrolling in Paths to QUALITY or in accepting CCDF vouchers please contact the Office of Early Childhood and Out of School Learning for the Charter School application and packet, 317-234-8882 (Beth Barrett).

If you have any questions about this process or to begin the process please contact the Office of Early Childhood and Out of School Learning at 317-234-8882 (Beth Barrett).

Provider Eligibility Standards (PES) Paths to QUALITY™ and CCDF Eligibility Certification

1. Fire Drills

- Each early learning program must conduct monthly documented fire drills in accordance with the rules of the fire prevention and building safety commission.

2. TB Testing

- The early learning program and any teacher, assistant teacher and volunteers shall provide results of a current intradermal tuberculosis test prior to employment or volunteer service.
- Early learning programs must provide a copy of the test results to the verifying agency.
- The early learning program shall maintain annual documentation from a physician reflecting the results of symptom screening for tuberculosis for any individual with a history of latent or active tuberculosis.

3. Emergency Plans

- All early learning programs shall have written plans for notifying parents of illness, serious injury, or death of a provider; care in an emergency and emergency evacuation plans which are posted in the classroom where the provider operates the early learning program.

4. CPR/First Aid Certification

- At least one adult shall have **annual** certification in CPR applicable to all age groups enrolled in the early learning program and is present at all times when children are present, **and**
- Each teacher/assistant teacher shall have **current certification** in First Aid.
- The school nurse may be counted as the individual onsite with CPR training.

5. Communication Device

- The early learning program must have a communication device that is compatible with the time and attendance tracking system approved by the division.

6. Inaccessible Firearms, Poisons, Chemicals and Medications

- The early learning program shall provide a safe environment by ensuring that firearms, ammunition, poisons, chemicals and medications are inaccessible to the children in their enrolled in the preschool.
- Firearms and ammunition shall be secured in a locked area, by a key or combination, in an area where children cannot gain access.
- Inaccessible for poisons, chemicals and medications means that in lieu of a locked (key or combination) cabinet, the items mentioned above must be kept in an area inaccessible to the children. This could mean locked closets, rooms, garages, basements or medicine boxes. Childproof locks will not be acceptable.
- All areas that are accessible to children will be inspected.

7. Alleged perpetrator, Child Abuse and Neglect

- The early learning administrator, teacher, assistant teacher and volunteer shall provide evidence that they have not been named as an alleged perpetrator in the Child Protection Index. A Consent to Release Form (form number 53323) must be completed for each required individual and submitted to the verifying agency (TCC). This completed form gives The Office of Early Childhood and Out of School Learning permission to check this registry. This form can be found online at <http://www.in.gov/fssa/carefinder/2733.htm>. A copy of this form is also included on the last page of this packet.

8. National Criminal History Checks

- The early learning program shall agree to National Fingerprint Criminal History Checks for the administrator, teacher, assistant teacher and volunteers who have direct contact with a children enrolled in the early learning program. The acceptable fingerprints are good for 3 years. At the end of the three year period each individual will be required to be finger printed again.
- National Fingerprint Criminal History Checks must be completed using the services of L1 (Safran) who can be reached at 877-472-6917 or www.ibtfingerprint.com. All required National Fingerprint Criminal History Checks are done at the early learning program's expense. The original receipt should be kept in the individual's file. From the Agency Name drop down menu – Family and Social Services Administration must be chosen for results to be sent to OECOSL. Public Schools should NOT choose the school district. All employees should choose Child Care Center Employee/Volunteer as the card type under applicant type. (Please see the fingerprinting instruction sheet included in this packet for additional instructions.)
PLEASE NOTE: If results are NOT sent to OECOSL, corrected prints will be required. The cost for corrected fingerprints will be at an additional cost to the program.
- All criminal history reports must be clear of any felonies and/or misdemeanors related to the health or safety of a child. As well as, any felony sex offense or other offense classified as a dangerous felony or any other felony less than 10 years old as of discharge date from probation, imprisonment or parole, and any misdemeanor related to welfare fraud.
- Early learning programs are also responsible for reporting any police investigations, arrests or criminal convictions not listed on any National Fingerprint Criminal History Check for any individual required to provide such a report.
- The early learning program shall maintain a written policy requiring administrators, teachers, assistant teachers and volunteers who have direct contact with a child enrolled in the early learning program to report any criminal convictions.
- Please see additional information on checks for staff or volunteers under the age of 18 on page 7 of this packet.
- **Documentation may not be more than 60 days old at the time a completed application is received.**

9. Drug Test

- The early learning program teachers, assistant teachers and volunteers shall provide, at the early learning program's expense, results of a 5 panel drug test that documents the individual is free of the presence of illegal controlled substances.
- Drug testing shall be required prior to employment or participation in the CCDF voucher program. Additional drug testing may be required of an individual who is suspected of non-compliance.
- A provider who suspends an individual based on the results of a drug test shall maintain a written policy for reinstatement following rehabilitation and drug testing results that are negative for a prohibited substance.
- **Documentation may not be more than 60 days old at the time a completed application is received.**

10. Immunizations (if not on file at the Pre-K program)

- Each child has age appropriate immunizations including Varicella and Pneumococcal vaccines. Documentation includes:
 - ✓ Names of all children (*including provider's*) enrolled in the early learning program.
 - ✓ Immunization records for each child (*includes month, day and year given for each immunization and child's birth date*).
 - ✓ The child's physician documents child is in process of receiving immunizations **or**
 - ✓ A medical exempt statement from a physician **or**
 - ✓ A religious belief exemption statement from the parent
- If it is the school's policy to collect and maintain immunization forms for children enrolled in the preschool classrooms, these forms do not need to be submitted to the PES Dept.

11. Supervision Policy

- The early learning program shall ensure that all children are continually within sight or sound at all times.
- Supervision of the children will be validated during the inspection.

12. National Fingerprint Criminal History Results

An individual's criminal history report must be clear of any felonies and/or misdemeanors related to the health or safety of a child. As well as, any felony sex offense or other offense classified as a dangerous felony or any other felony less than 10 years old as of discharge date from probation, imprisonment or parole, and any misdemeanor related to welfare fraud. All fingerprint results must be sent to OECOSL. Public Schools should not choose the school district. **PLEASE NOTE:** If results are NOT sent to OECOSL, corrected prints will be required. The cost for corrected fingerprints will be at an additional cost to the program.

13. Hand Washing Standards

- The early learning program must assure that all staff are following appropriate hand washing procedures, as defined by the Office of Early Childhood and Out of School Learning, at all times.
- Hand washing practices will be observed during inspection.

14. Discipline Policy

- An early learning program shall have a written discipline policy which includes the type of discipline to be used and under what circumstances it will be used. This plan must include information about how the policy will be modified to meet a specific child's age and/or abilities, if applicable.
- Parents of children enrolled shall receive a copy of this policy. The early learning program must maintain a copy of the policy, signed by the parent/guardian of the child, in the child's records.
- An early learning program shall assure all employees and volunteers are following the discipline policy.
- This will be observed during the inspection.

15. Unscheduled Visit

- An early learning program shall allow parents/guardians to make unscheduled visits anytime during the hours the early learning program is in operation.

16. Age of teacher/assistant teacher

- The individual is:
 - ✓ At least eighteen (18) years of age and may act as a teacher/assistant teacher without supervision of another teacher
- Is under eighteen (18) years of age and may act as a teacher/assistant teacher only if the individual:
 - ✓ Is at least fourteen (14) years of age
 - ✓ Is at all times when early learning is provided, directly supervised by a teacher who is at least eighteen (18) years of age

17. Orientation

- The early learning program shall have a signed Orientation Training documenting their understanding of orientation topics. (Sample of required topics may be obtained)
- Prior to employment or volunteer duties each employee or volunteer must receive a formal orientation to the school and the early learning program.
- The early learning program shall document the completion of teacher, assistant teacher and volunteer orientation training.
- An early learning program shall maintain documentation of teacher, assistant teacher and volunteer orientation training with the employee/volunteer's records.

18. Employee Records

- An early learning program shall maintain documentation of all required teacher, assistant teacher and

volunteer training.

- An early learning program shall maintain documentation of teacher, assistant teacher and volunteer orientation training with the employee/volunteer's records.
- An early learning program shall make the documentation available to the Office of Early Childhood and Out of School Learning or its authorized representative, The Consultant's Consortium, Inc., upon request.

19. Reporting Child Abuse and Neglect

- An early learning program shall provide to all teacher, assistant teachers and volunteers of the early learning program written material provided by the Office of Early Childhood and Out of School Learning in regards to reporting child abuse and neglect.
- A teacher, assistant teacher and volunteer of the early learning program who has reason to believe that a child in their care is a victim of child abuse or neglect shall make a report as required under IC 31-33-5.

20. Reporting Injury and/or Death of a Child

- An early learning program shall immediately notify the parent or legal guardian of a child in the early learning program concerning any of the following that occur during the hours that a child is in the early learning program
 - ✓ Bodily injury
 - ✓ Serious bodily injury
 - ✓ Death of a child
- The early learning program shall notify the division:
 - ✓ Not more than twenty-four (24) hours after the occurrence for bodily injury and serious bodily injury.
 - ✓ Immediately after the occurrence of the death of a child.

21. Sanitation and Fire Safety Inspections

- Indiana School House regulations for sanitation, fire safety and food service standards must be met as required for public schools as verified by the appropriate state agency. Copies of inspection reports may be requested.

22. Teacher: Child ratios and Group Sizes

- Preschool classrooms meet the requirements for child to teacher ratios and group size as required under IC12-17.2-4 and 470 IAC 3-4.7
 - ✓ Ratios and Groups sizes are as follows:

Age of Child	Teacher: Child Ratio	Maximum Group Size
30–36 months	7:1	14
3 years	10:1	20
4 years	12:1	24

23. Daily Activities

- A provider (applicant) must make available daily activities appropriate to the age, developmental needs, interests, and number of children in their care. This plan must:
 - ✓ Be written and flexible; and
 - ✓ Include both active and quiet play; and
 - ✓ Include both indoor and outdoor activities; and
 - ✓ Include the use of safe, age-appropriate toys, games and equipment for indoor and outdoor play; and
 - ✓ Include sufficient quantities of toys and equipment to allow children to make choices.
- Daily outdoor is required unless one (1) of the following apply:

- ✓ Severity of the weather poses a safety or health hazard; or
- ✓ A health related reason exists for a child to remain indoors which is documented by the child's parent, guardian or physician; and
- ✓ Indoor activities provide for gross motor development.

24. Continuing Education

- At least twelve (12) hours of continuing education approved by the Office of Early Childhood and Out of School Learning (OECOSL) and age appropriate for the children in their care including their educational development, care and safety.

25. Nutrition

- A provider (applicant) must make available to each child in their care nutritious meals and snacks which:
 - ✓ Are appropriately timed (not less than 2 hours and not more than 3 ½ hours between each); and
 - ✓ Are in sufficient quantities to meet the needs of a child, including the availability of seconds; and
 - ✓ Include at least 1 item from each food group at meal time and at least 2 different food groups at snack time; and
 - ✓ May be brought from home, however, the provider (applicant) must be able to offer nutritious meals and snacks for children arriving without their sack lunch.
- Drinking water must be available at all times.

26. Health and Safety Orientation Training (NEW Effective 07/01/2016)

- The training will support basic health and safety standards designed to prevent harm to children. This training is required for all volunteers, caregivers, teachers, directors and any individual included in staff to child ratios/group size in 10 specific health and safety topic areas.
- Training in each applicable topic area, appropriate to the provider setting and age of children served is needed to meet the Health and Safety Orientation training.

Other Important Information:

Definition of a volunteer: As defined in IC12-7-2-199.2, a volunteer is an individual who, without compensation, provides services to an early learning program for at least 8 hours per month.

- If an individual is not a volunteer, they are considered a guest. A guest **may not** be left alone with a child enrolled at the early learning program at any time and may not be counted in staff to child ratios.

All new staff and volunteers must complete the fingerprints necessary for a national criminal history check and a consent to release form must be submitted to the Verifying Agency (TCC) prior to working with children.

Possible Changes to Your Ability to Participate in the CCDF Voucher Program

After you have been certified as a CCDF Eligible Provider, your certification status can change. Indiana law outlines certain conditions which may place the child(ren) enrolled in your preschool at risk and can result in an Emergency Decertification. If these conditions exist, you will be unable to receive CCDF payment effective immediately.

Additionally, this law includes reasons for the revocation of your ability to receive CCDF payment. If it is determined that the applicant has given false statements on an application or any records required by FSSA, there are credible allegations that fraud has been committed or if criminal charges of fraud have been filed, your CCDF eligibility will be revoked. If this happens, you will not be able to reapply to become a CCDF Eligible Provider for at least 2 years.

CCDF decertification and/or revocation may impact your ability to participate in Paths to QUALITY™.

**Legally Licensed Exempt
Certification**

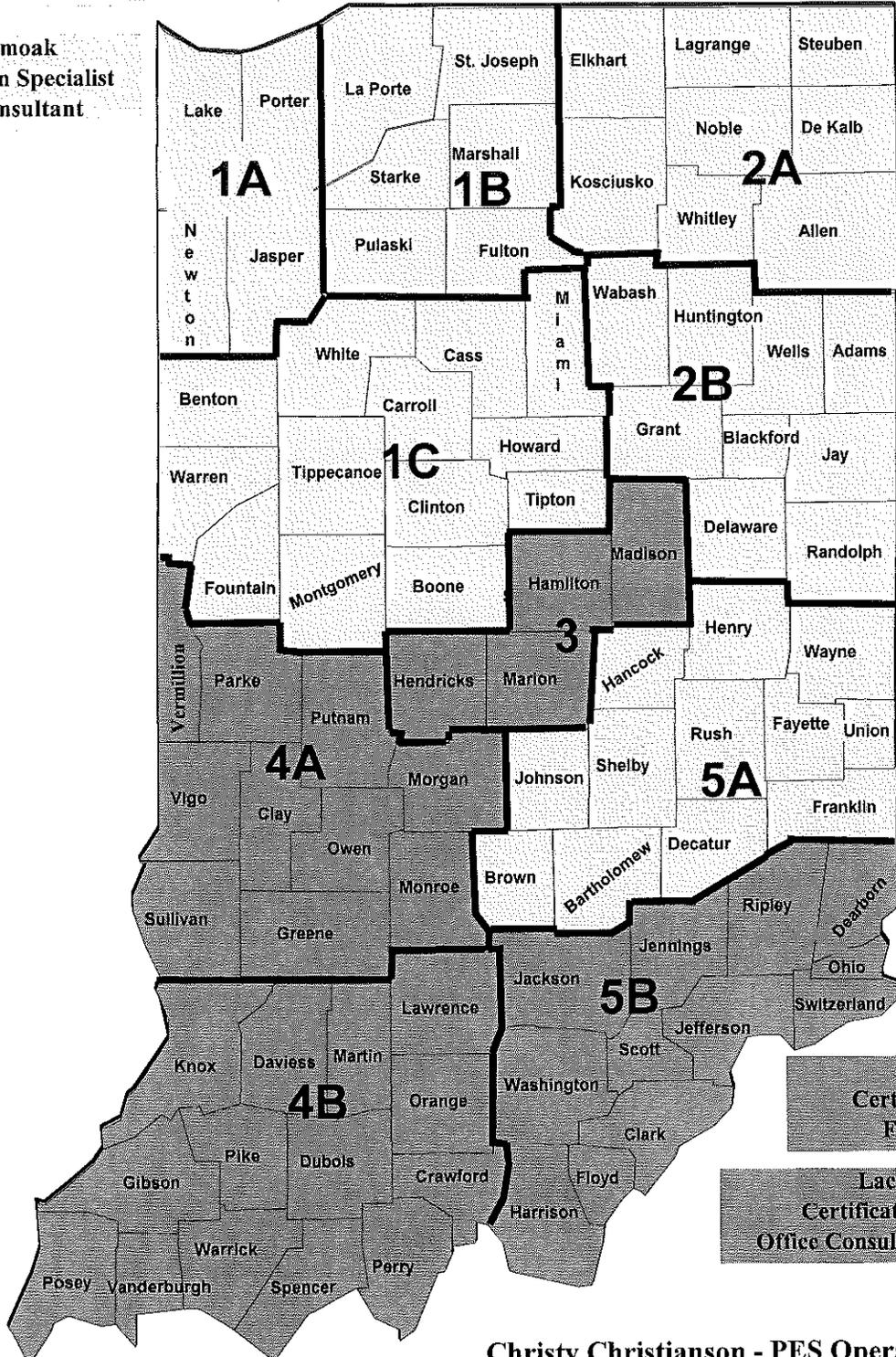
Provider Eligibility Standards Team Contact Information

Phone # 1-866-921-6623 Fax# 1-866-642-8002

Email: PES@e-tcc.com

Lindsey ONeal
Certification Specialist
Office Consultant 317-234-9510

Rob Smoak
Certification Specialist
Field Consultant



Ashley Brooks
Certification Specialist
Field Consultant

Lacey Gray
Certification Specialist
Office Consultant 317-234-9511

Christy Christianson - PES Operations Manager

Please Keep This Information Sheet For Your Records.

*******IMPORTANT INFORMATION BELOW*******

PLEASE READ THIS ENTIRE PAGE BEFORE COMPLETING ANY OF YOUR DOCUMENTATION

Your initial application must be completed within 60 days. If the application is not complete within the 60 days, updated information will be required. As a new provider your site inspection will be scheduled prior to the end of the quarter your application was submitted. The site inspection will not be scheduled until all file documentation is received in the office and approved by The PES Department including the National Fingerprint Criminal History check results from the state.

Your recertification application will be good until the end of your certification quarter. Your exempt certification is good for one year. You will receive a Recertification Notice 60 days prior to your quarter of expiration. Once the PES Department has received all required recertification documentation you will be notified that no additional items are needed and your unannounced site visit will be completed prior to the end of your expiration quarter.

Your 53323 Consent to Release Information results are only valid for 60 days. A site inspection must be conducted and certification approval granted prior to the expiration date.

Sample Forms contained in this packet are provided for your convenience; however, you may use any form that meets the requirements of the standard.

First Aid and CPR Requirements

First Aid

The American Red Cross and National Safety Council classes are approved; however, they must include demonstration of skills. Therefore, online classes may not be accepted.

If another entity or individual is offering the course, it must cover the following:

- ✓ Choking
- ✓ Bleeding
- ✓ Artificial Breathing
- ✓ Poisoning
- ✓ Seizures
- ✓ Shock

All courses must also require the pupil to complete a return demonstration of skills. These courses must be taught by a licensed R.N., L.P.N., M.D., D.O., E.M.T. Paramedic or a certified First Aid Instructor. The provider must submit proof of all of the above requirements to meet the PES requirement.

CPR

The American Red Cross and National Safety Council classes taught by certified instructors are approved; however, they must include demonstration of skills. Therefore, online classes may not be approved.

All other CPR courses must meet and document compliance with the JAMA (Journal of American Medical Association) standards and be taught by a certified CPR instructor. The course should require that participants demonstrate skills on mannequins as well as pass a written or oral test.

If you are obtaining instruction from the American Heart Association you must complete the certification process. Your card must state certification, not participation.

PLEASE NOTE: CPR training should be complete for all ages of children enrolled in the preschool program. CPR *must* be completed annually despite the expiration date on your CPR certification card. The school nurse may be counted as the individual certified in CPR for the preschool.

Please Keep This Information Sheet For Your Records.

PES Checklist for Public Schools
Paths to QUALITY Enrollment and CCDF Certification:

School representative must submit the following documentation to the PES Department.

- _____ **Form A:** Public School PES Cover letter
- _____ **Form B:** Staff Worksheet for the preschool administrator/teacher/assistant teacher/volunteer
- _____ Picture ID- Preferably a State Driver's License or State ID – The ID must show the Date of Birth for preschool director/administrator and all preschool staff/volunteers
- _____ A copy of the signed receipt from L1 (Safran) for Fingerprint Criminal Background Check for preschool director/administrator and all preschool staff/volunteers to document proof of fingerprinting. (DO NOT SEND THE ORIGINAL) See information on page 7 for regarding checks for individuals less than 18 years of age.
- _____ State Form 53323- Consent for Child Protection Index Check and Sex Offender Registry for preschool director/administrator and all preschool staff/volunteers.

THESE ITEMS WILL BE VERIFIED DURING THE SITE VISIT.

- _____ **Form 1-** Posted evacuation plan in case of fire or severe weather
- _____ **Form 3 -** Posted monthly fire drill chart
- _____ **Form 4-** Posted emergency telephone numbers
- _____ **Form 5-** Emergency contact information for children enrolled in the preschool and maintained in each child's file
- _____ Verification of required teacher: child ratios and group size
- _____ Verification all firearms and ammunition inaccessible to children
- _____ Verification all medications, poisons, chemicals, bleach, cleaning materials are inaccessible to children
- _____ Proof of Orientation signed by signed by administrator/ staff /volunteers and maintained in the staff files. (Sample available)*
- _____ Child's Immunization Records maintained in the child's file
- _____ Discipline Policy signed by a parent/guardian and maintained in the child's file*
- _____ Daily Activities Schedule
- _____ Proof of 12 hours of Continuing Education
- _____ Proof of required First Aid and CPR Certification
- _____ Nutrition (Breakfast, Lunch/Dinner, Snacks)
- _____ Proof of Health and Safety Orientation

* These items may be mailed in with the other required documentation if this is preferred by the school.

FORM A

*** This form should accompany all forms sent, scanned or faxed to the PES Dept to meet Provider Eligibility Standards***
PLEASE USE SECURE FAX OR MAIL WHEN SENDING CONFIDENTIAL DOCUMENTS

Preschool Classrooms in Public School PROVIDER ELIGIBILITY STANDARDS COVER SHEET



From: [Type the name of the School Corporation]
Phone: [Type the sender phone number]
Fax: [Type the sender fax number]
Preschool Name: [Type the name of the Preschool]
Date: [Type in today's date]

To: PES Department
Phone: 317.638.7095 TOLL FREE 1.866.921.6623
Fax: 317.972.0351 TOLL FREE 1.866.642.8002
Company Name: TCC
TCC Email Address: PES@e-tcc.com
TCC Mailing Address: PES Department
P.O. Box 1186
Indianapolis, IN 46206-1186

Comments:
[Type comments]

FORM B Teacher/ Assistant Teacher/Volunteer Worksheet

Early Learning Program Name: _____ Pre-School Director/Administrator Name: _____

Please list the director/administrator and all teachers, assistant teachers and volunteers whose documentation will be verified by the PES Department at the time of certification.
Please attach **copies** of identification (i.e. driver license) of the director/administrator, staff and volunteers.

Printed Staff Name	Title	Birth Date	Current Age	Is this individual in the building where the care is being provided? YES OR NO	Is this individual counted in staff to child ratio/group size? YES OR NO
Pre-School Director/Administrator Name:					
Staff:					

I certify that the individuals listed above are the only persons employed or volunteering at this early learning program. I understand that should staffing changes take place after certification, the appropriate personnel documentation will be collected and made available to the TCC upon request. Failure to stay in compliance with staffing documentation requirements will be considered non-compliance and could result in the loss of PES certification.

Director/Administrator signature _____ Date _____

Title _____



**CONSENT TO RELEASE INFORMATION FOR LICENSED CENTER, LICENSED HOMES,
UNLICENSED REGISTERED MINISTRIES, AND CCDF LLEPs**

State Form 53323 (R6 / 5-16)
OFFICE OF EARLY CHILDHOOD AND OUT OF SCHOOL LEARNING

The information in this document is governed by privacy protection standards under IC 4-1-6.

In accordance with IC 12-17.2-4-3, IC 12-17.2-5-3, and IC 12-17.2-6-14, each staff member and/or volunteer shall complete a section of this form in order to have his or her background information checked.

You must return this completed form to your consultant. If information is missing or illegible, the form will be returned.

Name of facility / licensee / LLEP / applicant		County	
Address of facility (number and street)		City	State ZIP code
Mailing address of facility (number and street)		City	State ZIP code
E-mail address of facility			
License / registration number / LLEP number EX#	License / registration / certification expiration date (mm/dd/yy)	Name of consultant PES DEPARTMENT	

By signing below, I hereby consent to a release of information from Child Protective Services and the Criminal Justice System to the Indiana Child Care Licensing Section, Office of Early Childhood and Out of School Learning, and to the licensee / applicant. The information may contain any prior criminal history, arrest record, or child protective service history and is sought to ensure the safety of children in child care settings. I also verify that all information given here is correct.

Legal Name (please print) First	Middle	Last	Maiden or other name
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Type
 Applicant Staff Volunteer Contractor Practicum Student Household member (should be over eighteen (18) years old)

Do you have a Social Security number? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, number.)	Date of birth (mm/dd/yy)	Sex	Race
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Telephone number ()	Cellular number ()	E-mail address
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Mailing address (number and street)	City	State	ZIP code
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List all other addresses you have lived at in the last five (5) years. (Please use reverse side if more room is needed.)

Number and street	City	State	ZIP code	Beginning Date (mm/yy)	Ending Date (mm/yy)

Signature	Date signed (mm/dd/yy)
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FOR OFFICE USE ONLY

OECOSL STAFF ONLY	Is this a Pre-K Provider that takes CCDF? <input type="checkbox"/> Yes <input type="checkbox"/> No
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NCH		SOR		CPI		CH	
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Date checked (mm/dd/yy)	Staff initials	Date checked (mm/dd/yy)	Staff initials	Date checked (mm/dd/yy)	Staff initials	Date checked (mm/dd/yy)	Staff initials
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Staff initials	Date (mm/dd/yy)	Staff initials	Date (mm/dd/yy)	Staff initials	Date (mm/dd/yy)	Staff initials	Date (mm/dd/yy)
DQ reason		DQ reason		DQ reason		DQ reason	
Staff initials that logged in:		Date (mm/dd/yy)		Staff initials that logged out:		Date (mm/dd/yy)	

HELPFUL TIPS AND IMPORTANT INFORMATION FOR COMPLETION OF THE STATE FORM 53323

- **Helpful Tips for completing the State Form 53323 Consent to Release Information**
 - ❖ *Please use Black or Blue ink to complete the form. (Do Not Use A Pencil)*
 - ❖ **The Applicant needs to complete the Name, Address and County in the top section of the form. The address listed in this top section should be the site address where the care is being provided. The PES Department will complete the License/Registration Number/LLEP #, License/Registration/Certification Expiration Date and Name of Consultant sections. NOTE: The PES Department must be made aware of any applicant, director, employee or volunteer that work at multiple locations. The PES Department must know each location that the applicant, director, employee or volunteer might work so they can properly process the State Form 53323.**
 - ❖ **The name printed on the form needs to match the ID/Driver's License submitted to The PES Department.**
 - ❖ **The Maiden or Other Name field should be completed if applicable.**
 - ❖ **Each person completing the form must check the box as the Applicant, Staff, Volunteer or Household Member.**
 - ❖ **The SS#, Date of Birth, Sex and Race fields are required.**
 - ❖ **Complete your current contact phone numbers and email address if one is available**
 - ❖ **The address must include the City, State and Zip Code.**
 - ❖ **If you have resided at a different address within the last 5 years other than the one listed in the section above you will need to provide that information to the best of your ability in the section provided on the form**
 - ❖ **The signature field and date field are required for each individual. The signature date should be within the last 30 days from the date received by The PES Department.**



Instructions for Livescan Fingerprint Appointment Registration

PLEASE NOTE: Please follow instructions carefully. If you select the incorrect agency or card type when prompted, you may be required to get re-fingerprinted for the correct agency or card type at cost to you.

❖ On-line Scheduling Option - Available 24/7:

1. Go to www.identogo.com and Select the State of Indiana
2. Select the Online Scheduling option and your language preference.
3. Enter the Applicants First and Last name.
4. From the Agency Name Drop Down Menu please select
 - **Family & Social Services Administration**
5. From the Applicant Type Drop Down Menu please select the correct Card Type that FSSA instructed you to use.
 - **Child Care Center Employee**
 - **Child Care Center Volunteer**
 - **Child Care Home Employee**
 - **Child Care Home Volunteer (includes household members)**
 - **Licensed Exempt CCDF Certified Employees**
 - **Licensed Exempt CCDF Certified Volunteers**
 - **Unlicensed Registered CC Ministry / Employee**
 - Once this Card Type has been selected you will be asked to data enter your OCA Number, this is the first five numbers of your Registered Ministry Number.
 - **Unlicensed Registered CC Ministry / Volunteer**
 - Once this Card Type has been selected you will be asked to data enter your OCA Number, this is the first five numbers of your Registered Ministry Number.
6. Our next screen will ask you to choose the Identogo Fingerprinting Location by either entering the Applicants Home Zip Code OR by choosing a Region from the drop down menu.
7. Once you choose the Identogo Fingerprint Location you will be asked to select a date and time for the Applicants Fingerprinting Appointment from the available listed dates and times.
8. You will then be prompted to data enter the Applicants full name, address, methods of contact and complete personal demographic information.
9. Declare your preferred Payment Method.
10. Finalize and confirm the Fingerprint Appointment.

❖ Call Center Scheduling Option - Available Mon-Fri 7am – 6pm:

1. Call (866) 226-2952 and speak to one of our experienced, friendly operators.
2. Operators will collect required information and schedule the Fingerprinting Appointment.
3. Be sure to have the complete information for the Applicant available when calling as the Operator will ask for the Agency Name, Applicant Type, Registered Ministry Number if applicable and the Applicants full name, address, methods of contact and complete personal demographic information.

Please remember to bring a Valid Photo ID with you to your Livescan Fingerprint Appointment.

Requirements Under Federal Law for Fingerprint-based Background Checks

Title 28, CFR, 50.12 (b) *requires:*

Records obtained under this authority may be used solely for the purpose requested and cannot be disseminated outside the receiving departments, related agencies, or other authorized entities.

Officials at the governmental institutions and other entities authorized to submit fingerprints and receive FBI identification records under this authority must notify the individuals fingerprinted that the fingerprints will be used to check the criminal history records of the FBI. The officials making the determination of suitability for licensing or employment shall provide the applicants the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record.

These officials also must advise the applicants that procedures for obtaining a change, correction, or updating of an FBI identification record are set forth in 28 CFR 16.34. Officials making such determinations should not deny the license or employment based on information in the record until the applicant has been afforded a reasonable time to correct or complete the record, or has declined to do so. A statement incorporating these use-and-challenge requirements will be placed on all records disseminated under this program.

This policy is intended to ensure that all relevant criminal record information is made available to provide for the public safety and, further, to protect the interests of the prospective employee/licensee who may be affected by the information or lack of information in an identification record.

Based upon this Federal statute, your agency is required to notify applicants that their fingerprints are being submitted to the Federal Bureau of Investigation (FBI) for a national background check.

Additionally, you must notify the applicants they may challenge their record. Please review the second page of this document for instructions on challenging a record. *Each applicant who is subject to a background check is entitled to:*

- a. Obtain a copy of any background check report; and
- b. Challenge the accuracy and completeness of any such report and obtain a prompt resolution before a final determination is made by the authorized agency.

Procedure to Challenge Criminal History Record

Agency Instructions

The applicant may request a copy of their criminal history information obtained from a national background check. They must do so in person so their identity can be verified at the Indiana State Police Headquarters (see address below). The record may also be sent by US Mail (to address below) if they sign a waiver requesting a copy. The waiver shall include the applicant's name, date of birth, address, legal signature and a method of contact.

For the Applicant

You may challenge the record if you believe it contains inaccurate or incomplete information. You must follow the instructions listed below. The Indiana State Police (ISP) Records Division serves as the state's central repository for criminal history record and custodian for fingerprints. The ISP Records Division does not have the authority to modify any record unless specifically notified to do so by the owner (Court, Clerk of Court or Criminal Justice Agency) of the information.

Instructions for Challenge

Your written request should clearly identify the information that you feel is inaccurate or incomplete and should include copies of official court documents and supporting documentation that substantiate your claim. For example, if your disposition information is incorrect or missing, you may submit documentation obtained from the court having jurisdiction over the arrest or the office prosecuting the offense. The ISP will make appropriate changes and notify you of the outcome when we are in receipt of the official Court or Criminal Justice Agency documents.

You may submit a record challenge to the ISP Records Division by writing to the following address:

Indiana State Police
Attention: Records Division
100 North Senate Avenue, IGCN
Indianapolis, IN 46204

Juvenile Criminal History Check Process

Parents of the juvenile will follow the steps outlined below to complete the fingerprinting process for their child under the age of 18:

1. Using your computer web browser go to **www.identogo.com** and choose Indiana.
2. If you do not have access to the internet, you may call the vendor toll-free at (877) 472-6917 to schedule an appointment. If you call, you will be asked the following questions instead of completing these steps yourself.
3. Click Online Scheduling and choose the language you wish to use for scheduling (English or Spanish).
4. Enter the child's first and last name and click "go".
5. Choose your Agency Name as **Criminal Record Review/Challenge** and click "go".
6. Select the location where you want to be fingerprinted. Enter a zip code to get a list of locations in a specific area. Press "go".
7. Click on the words "Click to Schedule" across from the location you want, under the day you wish to be fingerprinted. If you want a date further in the future, click the "Next Week>>" link to display more dates. Once you select the location/date combination, select the time for your appointment and click "go".
8. Complete the demographic information page. Required fields are indicated by a red asterisk (*). When complete, click "Send Information".
9. Confirm the information. Follow the on screen directions to make any changes necessary. Once you see the data is correct, click "Send Information".
10. Complete your payment process and click "Send Payment Information". The cost is \$19.95.
11. Print your confirmation page. If you provided an email address, you will receive an email confirmation as well.
12. Bring **one** of the following with you to your fingerprinting appointment: Valid Driver License, Valid State Issued Identification Card, Valid Passport, **Student ID with Picture and DOB**, Work ID with Picture and DOB, Valid Alien ID card with Picture and DOB. If you do not have the above identification, you will need **both a valid Birth Certificate and a Social Security Card**.
13. Arrive at the facility at your appointed date and time.
14. The Enrollment Officer at the site will check you ID, verify your information, verify or collect payment, capture your fingerprints, and submit your data. This normally takes less than five minutes.
15. You will receive a signed receipt at the end of your fingerprinting session (A copy of the receipt must be provided to the verifying agency as proof that fingerprints have been submitted.)
16. All results will be processed and sent to the applicant/parent. A copy of the results must be provided to the verifying agency (TCC) within 60 days of requesting the application.

SAMPLE FORMS

- ❖ These sample forms are provided for your convenience. They may be used as a template or you may use other forms as long as the required information is included on each form.

Form 1

Early Learning Program Name: _____ Location Address _____

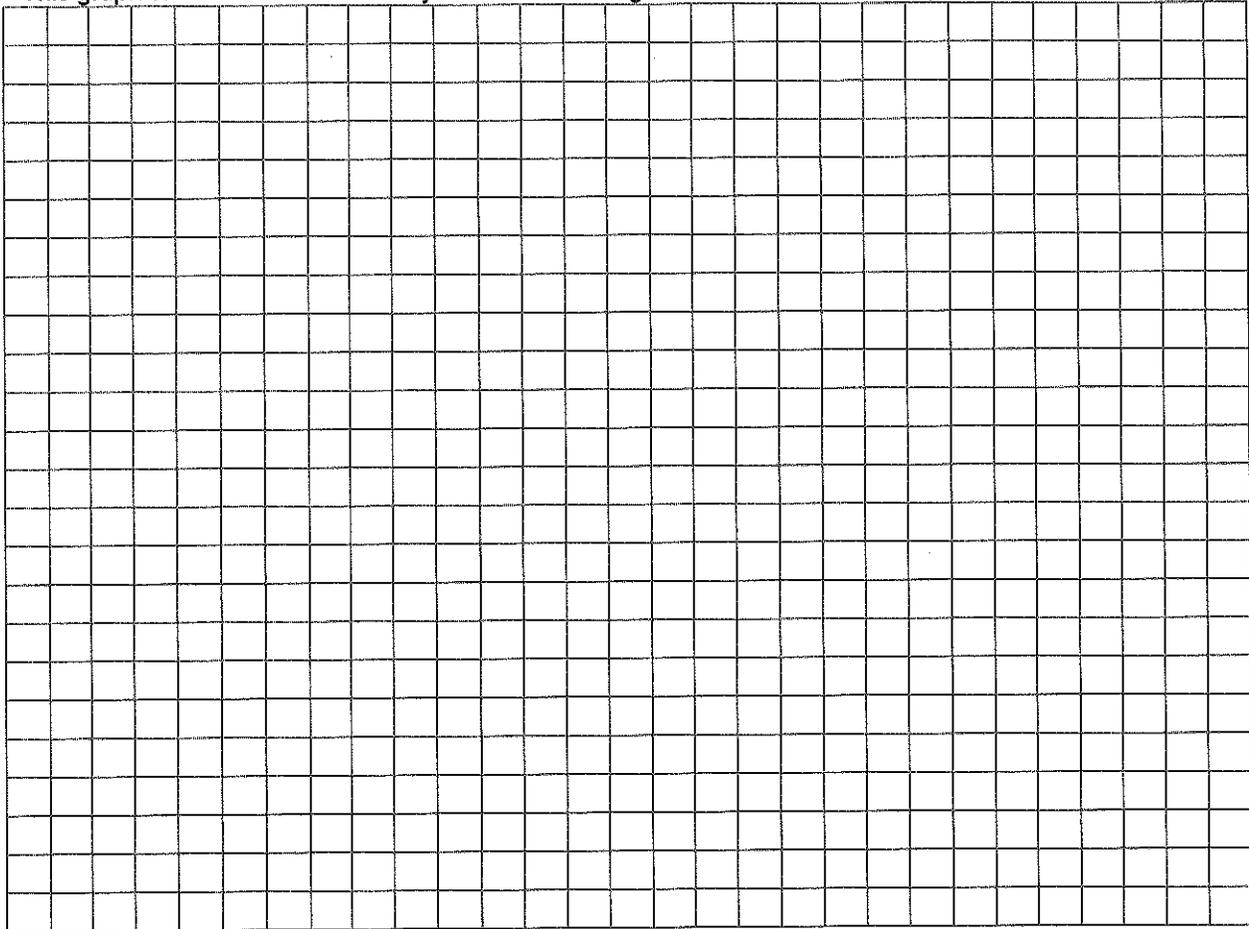
Evacuation Plan In Case of a Fire or Other Emergency

Type of Structure: House _____ Apartment _____ Mobile Home _____ Non-Residential Facility _____

Use the graph below to draw a floor plan layout of your home.

- ❖ Label each room in your home
- ❖ Mark the doors in your home
- ❖ Use arrows to show **two ways out**
- ❖ Mark the Severe Weather Location- Mark the location on the graph above where you will gather in the event of a tornado or severe weather. **It should be a basement or interior area**, where the children will not be exposed to flying glass. If possible, store a battery operated radio and flashlight, blankets, small toys and books in this area. Take your cell or portable phone (if available) with you to this area.

This graph should reflect the route you will take during a fire drill. Remember to practice fire drills monthly!!!



*Fire Extinguishers are required on each floor of the home with an additional extinguisher in the kitchen.

Please indicate an outside meeting place: _____
This location should be at least 50 ft from your childcare.

Severe Weather Plan Location: _____

This form or one similar to it must be posted in a visible location.

FORM 3

Preschool Name _____

Emergency Contact Information to Be Posted By the Phone

Fire: 911 or (____) _____

Ambulance: 911 or (____) _____

Police: 911 or (____) _____

Poison Control: 1-800-222-1222

Our address is:

(Address)

(City) (State) (Zip Code)

Our Phone Number is: (____) _____

If a child should need immediate medical assistance I will contact a rescue squad or hospital at 911 or (____) _____. I will contact the parents of the injured or ill child to let them know their child's condition.

Transportation to the doctor or hospital will be provided by _____ (name the method of transportation to be used, such as personal car, rescue squad, or taxi)

FORM 4

Preschool Name _____

Emergency Contacts for Children

Child's Name _____
Address _____
Phone _____ Birthdate _____

Primary Contact _____
Employer _____ Phone _____
Cell phone _____ Beeper _____

Alternate Contact _____
Employer _____ Phone _____
Cell phone _____ Beeper _____

Alternate Contact _____
Employer _____ Phone _____
Cell phone _____ Beeper _____

Special medical health need(s): _____

Parent's Signature: _____

Date: _____

Early Learning Program Name _____

ORIENTATION FOR STAFF OR VOLUNTEERS

Employee Name _____ Position _____

Date of Hire _____ Orientation Date _____ Start Date _____

THE FOLLOWING TOPICS WERE DISCUSSED WITH THE NEW EMPLOYEE:

- ❖ Names, ages, specific needs of children assigned, including food allergies
- ❖ Location of children's records
- ❖ Children's emergency information
- ❖ Received documentation provided by FSSA regarding reporting Child Abuse and Neglect
- ❖ Group sizing and ratio requirements
- ❖ Children's Daily Schedule
- ❖ Meal and snack time requirements
- ❖ Safe Conditions Policy
- ❖ Transportation Policy
- ❖ Supervision Policy
- ❖ Discipline Policy
- ❖ Safe Sleep Practices
- ❖ Medication storage and use
- ❖ Illness Policy including when to exclude children due to illness
- ❖ Diapering Procedures
- ❖ Hand Washing Procedures
- ❖ Cleaning, sanitizing, disinfecting procedures
- ❖ Location of emergency numbers
- ❖ Location of first aid supplies
- ❖ Smoking, Alcohol and Drug Policies
- ❖ Emergency evacuation procedures
- ❖ Location and operation of fire extinguishers
- ❖ Location and operation of smoke detectors for testing during drills
- ❖ Emergency procedures for bad weather
- ❖ Location and operation of gas, electric and water shut-off
- ❖ Requirements for caregiver's ongoing education/training
- ❖ Health and Safety Orientation Training
- ❖ Other _____
- ❖ Other _____

Signature of Employee/Volunteer _____ Date _____

Signature of Provider _____ Date _____

This form must be signed and kept in the employee/volunteer file

SAMPLE DISCIPLINE/GUIDANCE POLICY

Early Learning Program Name _____

It is very important a child's development is nurtured through caring, patience and understanding. However, while caring for your children, I may have to respond to your child's misbehavior. Hitting, kicking, spitting, hostile verbal behavior and other behaviors which will hurt another child are not permitted.

In response to these behaviors, I will not use:

- Threats or bribes
- Physical punishment, even if requested by the parent
- Deprive your child of food or other basic needs
- Humiliation or isolation

In response to misbehavior, I will:

- Respect your child
- Establish clear rules
- Be consistent in enforcing rules
- Use positive language to explain desired behavior
- Speak calmly while bending down to your child's eye level
- Give clear choices
- Redirect your child to a new activity
- Move your child to a time-out chair for no longer than one minute per year of your child's age, if necessary

If your child's behavior is very disruptive or harmful to himself or other children, I will discuss the issue with you privately. If the situation can be resolved, the child may remain enrolled. If we are unable to resolve the issue, you may be asked to make other child care arrangements.

As a parent, you may have some concerns or wish to offer suggestions. Using the lines below, we may modify the above plan with agreed upon suggestions.

Child's Name

Date of Birth

Parent/Guardian Signature _____ Date _____

This form, or one similar to it, will be checked by the verifying agency and must be maintained within the child's file.

Training Resources

The level of education and training received by teachers/caregivers is one of the most important indicators of a high quality early childhood program. Research has shown the education and training of caregivers/teachers is directly related to positive child outcomes including improved child health, safety, social and emotional development and school readiness.

Training Requirements:

The provider (applicant) must complete at least 12 hours of training annually, unless the provider is related to every child in their care, which:

- ✓ Is appropriate to the age of the children in the providers care
- ✓ Is documented by Training Certificates
 - Training Certificates must include:
 - The title and date of the training
 - The number of clock hours of the training
 - The trainer's name, organization and qualifications
 - The content area of the training

The required training may include but is not limited to:

- ✓ OECOSL approved child abuse detection and prevention (this training must be taken within three (3) months of employment or volunteering).
- ✓ Positive classroom management and discipline.
- ✓ Developmentally appropriate practices and curriculum.
- ✓ Child development including the use of appropriate screenings
- ✓ Health, nutrition, sanitation, and safety
- ✓ cardiopulmonary resuscitation (CPR)
- ✓ safe sleeping practices
- ✓ shaken baby syndrome
- ✓ communicable diseases and immunizations
- ✓ supporting children with special needs

Providers who are related to each child in their care must still take CPR, First Aid and Child Abuse Detection and Prevention.

Directors may offer trainings to their staff on subject matter that they are qualified in and must document each training with a training certificate that includes all of the required information.

Trainings online or through a video must also be documented with a training certificate which includes the required information. If the training organization/trainer does not offer training certificates, the director/owner must document the same information as required on a training certificate and the person receiving the training must write a summary of what was learned.

How do you document these trainings?

Training certificates must be maintained in each staff member's file. These files must be kept onsite and be made available to the State on request.

- Training hours will be prorated for the first year based on the effective date of the new laws (July 1, 2015) and the month of your inspection.
 - For example, if your inspection is in August each staff member will be required to have one hour of training. If your inspection is in September, each staff member must have two hours, and so on. For year two, each provider must have the full twelve (12) hours by the date of your inspection.
- The training requirements for new staff members will be prorated based on the individuals start date.

Training received within the past 12 months of your inspection will count towards the training requirements. First aid/CPR can be counted in the twelve hours, but the same training will not be counted more than once within one year. A duplicate training will not be counted in subsequent years unless the training is designed as a refresher or has been required or recommended by an OECOSL consultant to address observed non-compliances.

- For example, the required First Aid and CPR training and the Safe Sleep Refresher courses

Free and low cost training opportunities are available. For a comprehensive list of what is available, go www.iaccrr.org and click on "*Help with the new CCDF Provider Eligibility Standards*". You can also go to www.iaccrr.org/PES.

For more information on face-to-face training opportunities provided by your local Child Care Resource and Referral (CCR&R) agency, visit <http://www.iaccrr.org/default.cfm?page=face-to-face-training-calendar>.

For information on free online training opportunities, visit IACCRR Training Central at <http://www.iaccrr.org/default.cfm?page=training-central>.

Other free and low cost trainings are available from:

- The federal Administration of Children and Families at <http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/teaching/development/teacher-time-webinars.html>.
- Penn State Extension through the Better Kid Care Online Learning Program at <http://extension.psu.edu/youth/betterkidcare>. Click on "*On Demand Distance Education*" to register and access training.
- The Division for Early Childhood. Go to <http://www.dec-sped.org/learningdecks> to access their online Learning Decks.

Plan and Track Your Training/Professional Development

Name _____ Hire Date _____

Title of Training Class	Date of Class	# of Hours	Trainer's Name	Trainer's Qualifications/Organization	Content of Class

Training Certificates are required to be on file which match the training classes listed on the log. Track Your Training

HEALTH AND SAFETY ORIENTATION TRAINING FOR CCDF PROVIDERS

As part of the federal Child Care and Development Block Grant Act 2014, states must require health and safety pre-service or orientation training for CCDF providers. **The new law requires this training for all caregivers (including volunteer caregivers, and anyone else included in child staff ratio), teachers, and directors in 10 specific health and safety topic areas and recommends training in child development.** All Licensed Centers and Licensed Homes, Unlicensed Registered Ministries certified for CCDF, and legally license exempt providers must meet the requirements.

The intent of the training is to support basic health and safety standards designed to prevent harm to children. If applicable, individuals may be able to use their existing certificates and credentials to help meet the training requirements. In most cases the required training in health and safety can be applied toward the annual training hours needed for licensing, PES, and Paths to QUALITY™ as well.

Your local Child Care Resource and Referral agency (**1-800-299-1627**) can help you to understand and meet the training requirements.

REQUIRED HEALTH AND SAFETY TRAINING TOPIC AREAS

There are 10 required training topic areas, in addition to the recommended Domains of Child Development. The training will support basic health and safety standards designed to prevent harm to children. Training in each applicable topic area, appropriate to the provider setting and age of children served, is needed to complete the requirement for health and safety orientation training.

1. Prevention and Control of Infectious disease (including immunizations)
2. Administration of medication consistent with standards for parental consent
3. Prevention and response to emergencies due to food and allergic reactions
4. Building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic
5. Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) OF THE Robert T, Stafford Disaster Relief and Emergency Assistance Act.
6. Handling and storage of hazardous materials and appropriate disposal of bio-contaminants
7. Appropriate precautions in transporting children (if applicable)
8. Prevention of sudden infant death syndrome and use of safe sleeping practices (if applicable)
9. Recognition and reporting of child abuse and neglect; Prevention of shaken baby syndrome and abusive head trauma
10. First Aid and CPR Overview
11. Major domains of Child Development (recommended)

OPTIONS FOR MEETING THE REQUIREMENTS

A brand new online training course has been developed specifically for Indiana to help providers meet the new health and safety training requirements. The online course, *Introduction to the Early Childhood and Out of School Learning Profession*, will be available 24/7 through Training Central at no cost beginning in late-June 2016. The three module course is designed to meet all the health and safety training topics- with the exception of Recognition and Reporting of Child Abuse and Neglect which is already approved and available through local Child Care Resource and Referral Agencies. An optional Module 4 will be available in August 2016 focusing on child development for school agers which can be taken in lieu of Module 1. A face to face training version of Indiana's new online course will be available beginning in July 2016 through local Child Care Resource and Referral Agencies. The health and safety training hours can be applied toward meeting the required annual training hours needed for licensing, CCDF/PES, and Paths to QUALITY™ as well.

Individuals who have already earned degrees, certificates, credentials or completed higher education coursework may be able to use these as options to meet the training requirements in a health, safety, and/or child development topic area. In addition, individuals can use prior in-service training if the training is applicable toward meeting any of the required topic areas.

A list of approved options for meeting each Health and Safety topic area has been compiled. ***Please refer to the Health and Safety Training Approved Options List for more information at www.childcarefinder.in.gov or through local CCR&Rs or your Paths to QUALITY coach.*** The List includes applicable online webinar trainings available through Training Central and approved local training such as from Child Care Resource and Referral Agencies (CCR&R). Options for other online training courses such as the *Better Kid Care* courses available through Penn State Extension and the *Healthy Futures Project* courses available through the American Academy of Pediatrics are included.

The List is not exhaustive and will be updated as new options are identified and approved. Individuals can refer to this List and choose from the approved health and safety training options listed by topic area that will meet the requirements. There are many training options on the list that are available at little or no cost. Some training options will apply toward multiple topics. Indiana T.E.A.C.H. scholarships are available for higher education coursework or CDA credentials.

If an individual is certified in First Aid and CPR they will meet the requirement for the topic area - *First Aid and CPR Overview*, however, certification in First Aid and CPR is not required.

The current state mandated and approved training in Recognition and Reporting of Child Abuse and Neglect available through local Child Care Resource and Referral Agencies and Training Central will meet the requirement for the topic area - *Recognition and reporting of child abuse and neglect; Prevention of shaken baby syndrome and abusive head trauma.*

Likewise, the current state mandated and approved training in SIDS and Safe Sleep available through local Child Care Resource and Referral Agencies and Training Central will meet the requirement for the topic area - *Prevention of sudden infant death syndrome and use of safe sleeping practices.*

If an individual has taken equivalent training that they believe meets a required topic area but the training is not on the ***Health and Safety Training Approved Options List***, they should contact their local CCR&R for assistance. The individual

will need to submit a copy of their transcript or training certificate, and the training's content/subject and objectives, the date of the training, name and credentials of the trainer/or the training organization, the type of training, and the number of clock hours of training in the required topic area. A process has been established to review and approve requests on an individual basis.

TIMELINE AND PROCESS FOR MEETING REQUIREMENTS

All caregivers (including volunteer caregivers, and anyone else included in child staff ratio), teachers, and directors in Licensed Centers, Licensed Homes, Unlicensed Registered Ministries certified for CCDF, or legally license exempt providers, must meet the staff health and safety training requirements **by 9/30/16**. New staff will need to complete the required health and safety orientation training prior to employment or within 3 months of caring for children.

Each individual staff person should refer to the *Health and Safety Training Approved Options List* and to their training file to determine if their existing professional development and training documentation meets the requirements for each topic area or if additional training will be needed prior to 9/30/16. An optional *checklist tool* has been developed to help with the individual review process. Some training options will apply toward multiple topics.

Supporting documentation must be maintained to demonstrate compliance with the health and safety training requirements and so that caregivers, teachers, and directors will not need to repeat the orientation training if they change employment. Documentation may include training certificates, transcripts, curriculum schedules from Early Childhood/Child Development degree programs, or other appropriate evidence. The supporting documentation should be placed in the individual's professional development file and be available for review. In-service training information used for documentation must include:

- Date of training
- Name and credentials of the trainer/or the training organization
- Content/subject of the training
- Type of training
- Number of clock hours of training in content area

MONITORING COMPLIANCE

OECOSL staff will begin checking for staff compliance with the health and safety training requirements beginning 10/1/16 during regular annual inspections. If a non-compliance is cited, the provider will be given 14 calendar days to submit a written plan to their OECOSL consultant or PES inspector on how the provider will correct the insufficiency and come into compliance with the new training requirement.

05/31/16