

SPOKANE PARENT COOPERATIVE PRESCHOOLS
RISK MANAGEMENT CHECKLIST

FOR INSURANCE COVERAGE PURPOSES, ALL ADULTS MUST COMPLETE AN ORIENTATION TO CO-OP SAFETY BEFORE PARTICIPATING IN THE PROGRAM

SAFETY AND HEALTH

- _____ Children must be escorted by an adult into the classroom and may only be left in classroom if 2 adults are present.
- _____ Children may only be picked up from co-op by adults as authorized by the enrolling parent on a Permission form.
- _____ At least 2 adults must remain at co-op until all children have left.
- _____ Children are required to be current on their immunizations and have a shot record on file at co-op.
- _____ Garbage must be emptied daily. It is recommended not to allow diapers to be put in co-op garbage/waste cans.
- _____ Indoor Safety (no hot beverages or smoking, no kids in storage areas, adult supervision of activities, poisons in locked cupboards, floors clean, protective mats under equipment).
- _____ Outdoor Safety (use both hands when climbing, stay in fenced area, feet first down slides, 4 inches of appropriate material under play equipment, adult supervision).
- _____ Disease Control (children and adults must ALWAYS wash hands with soap and running water before eating, when serving snack and after toileting; no shared towels).
- _____ Food Preparation/Clean-up (sinks, counters, tables must be cleaned with diluted bleach water before serving snacks).
- _____ Safety and Health Inspections are conducted monthly by parents and Safety Checklist is turned into the college quarterly.
- _____ Non-enrolled siblings and other non-enrolled children are not allowed at co-op due to insurance regulations except at designated Special Events. A Special Event form must be sent to the Parent Education Office.
- _____ The Parent Education/Cooperative Preschool is to be a “drug-free” program (i.e., no smoking on the premises, no alcohol served at parent meetings or special events, etc.).

CHILD MANAGEMENT AND PROTECTION

- _____ Adults should not be left alone with children where they cannot be observed by others.
- _____ Staff and volunteers are not allowed to physically, verbally, or emotionally abuse or punish children. Discuss any other local co-op policies on appropriate discipline and child behavior concerns at the center.
- _____ If there is reasonable cause to suspect child abuse or neglect, contact the Parent Education Office in Spokane at 279-6020 or 1-800-845-3324. A report to Child Protective Services must be made by the reporting adult within 24 hours. College and co-op staffs are required by law to report suspected child abuse or neglect.

Turn over→

RISK MANAGEMENT CHECKLIST, continued

TRANSPORTATION AND FIELD TRIPS

- _____ Carpools to and from the center are not part of co-op and do not have insurance coverage.
- _____ Co-op must turn in Field Trip Notification to have insurance coverage (does not include vehicles) for classroom field trips.
- _____ Parents must sign a Field Trip Permission form. Parents must be notified in advance of location, date and time of each field trip.

FIRST AID AND EMERGENCY PROCEDURES

- _____ Location of First Aid Kit/flashlight/radio/fire extinguishers and other emergency supplies.
- _____ There must be at least one adult on the premises with a current First Aid/CPR card.
- _____ No medicine may be given without written parental permission.
- _____ Adults & children will follow public health policies to avoid contact with blood or other bodily fluids. Gloves are available.
- _____ Ill children are isolated (not necessarily in a separate room) until picked up by parent or other emergency contact. Parents must always keep Emergency Information card at the co-op up-to-date.
- _____ Emergency Evacuation Procedures (explain procedures and evacuation routes, monthly fire drills, earthquake drill in October and February).
- _____ Location of safety and health bulletin board.
- _____ Contact Parent Ed Office in Spokane at 279-6020 or 1-800-845-3324 if any accidents occur or if there are insurance questions.

I have been informed of all the Risk Management information listed on this form.

SIGNATURE _____

DATE _____

PRINT YOUR NAME _____

[Keep this signed checklist on file at co-op.]