



Staff File Check List- Home

Name _____ DOB _____
 Role _____ Start Date _____
 Date checked (* if applicable)

_____ Orientation

Health & Safety Training:

- Recognizing the signs of child abuse or neglect, including prevention of shaken baby syndrome;
- Basic child development, including supervision of children;
- Safe sleep practices and sudden infant death syndrome;
- Prevention and control of infectious diseases, including immunizations;
- Prevention of and response to emergencies due to food and allergic reactions;
- Building and premises safety, including identification of and protection from hazards that could cause bodily injury, including electrical hazards, bodies of water, and vehicular traffic;
- Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event, including violence at a facility;
- Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants, including blood and other bodily fluids or waste; and
- Precautions when transporting children, if transportation is provided.

_____ Medication administration training

_____ Renewal In-Service

_____ KBI/DCF

_____ Health Assessment

_____ TB test negative

_____ Pediatric First Aid

Exp. Date: _____

_____ Pediatric CPR

Exp. Date: _____

_____ Discipline Policy

_____ Supervision Plan

_____ Driver's License *

_____ Car Insurance * (Declaration page)

_____ Vehicle Inspection *

_____ Check First Aid Kit *

_____ Pet Vaccinations *

_____ Well Child Info

_____ Crib/Playpen Info

Regulation Book _____

Other * _____