



PINELLAS COUNTY LICENSE BOARD FOR CHILDREN'S CENTERS AND FAMILY DAY CARE HOMES Plan of Operation

Children's Center Name Corded Telephone Number Email Address

Address of Center (Street, City, Zip Code) Fax Number

Director Contact Number

Director Credential: Certificate Number Expiration Date

PLEASE REFER TO LICENSING REGULATION GOVERNING PINELLAS COUNTY CHILDREN'S CENTERS DATED 2-26-2020 TO ASSIST YOU IN ANSWERING THESE QUESTIONS.

A. ORGANIZATIONAL PLANS

- 1. How many children do you plan to be licensed for? (approximate)
Do your plans include children enrolled: part-time? half-day? full day only?
Do you plan to care for infants (children under 2 years of age)? If yes, please complete the Infant Plan of Operation in addition to this plan.
Do you plan to care for school-age children?
Do you plan to regularly transport children?
2. Indicate months of operation: From To
3. Indicate hours of operation: From To
4. Check only the applicable category/categories you plan to apply for:
Day Nursery School Age Center Indoor Recreation Center Urban Center
5. How many staff members meet the staff credentialing requirement? (Not applicable for School Age Centers unless School Readiness provider)

B. DIAGRAM OF INDOOR AND OUTDOOR SPACE

- 1. Submit a diagram of the floor plan of the center, including room measurements. License Board staff will figure square footage. Label rooms, exits, and indicate location of toilets and sinks. Plan does not need to be drawn to scale. Include all rooms that may be used by the program. (Label B1)
2. Submit a diagram of the entire playground space including measurements. Indicate the location of the playground equipment and shaded areas. Playground must be on same premise as building(s). Indicate the 2 exits - one must be remote from the building. For stationary equipment there must be a six foot fall/use zone around the perimeter of the equipment and six inches of resilient surface in that fall/use zone. (Label B2)

C. INVENTORY OF EQUIPMENT

1. Submit an inventory for appropriate toys and equipment for each classroom, indicating ages of children using room. Include all equipment and materials including children’s tables, chairs, cots and sheets, storage shelves and consumable supplies. Refer to Licensing Regulations for requirements. Do you have the required equipment and materials for the following? See Director’s Checklist for Indoor Equipment for suggestions. (Label C1)

Dramatic play	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Construction play	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Art, music, and creative expression	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Early literacy and language	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Science and math games	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Gross and fine motor development	<input type="checkbox"/> Yes	<input type="checkbox"/> No

2. Submit an inventory of equipment for outdoor use. (Label C2)

D. FIRE, SANITATION, AND SAFETY

1. How will you conduct monthly fire drills? You must use the approved fire alarm system, approved by the local fire authority. How do you engage this system for a drill? How will you track and record monthly fire drills? How will you track and record emergency preparedness drills? How long will you keep the documentation?

2. Where in each room will you post evacuation diagram,(noting location of children's emergency records), daily schedule and capacity?

3. Where will you store toxic/hazardous materials, such as cleaning supplies, so that they will be inaccessible to children, either locked or out of reach of children?

4. What is your first aid plan for minor injuries? Remember to schedule staff members on site at all times who have the appropriate first aid and CPR training to cover your operating hours, including on field trips. Submit a copy of the Accident/Incident Form you will use to notify parents/guardians. (Label D4)

5. What is your first aid plan for serious accidents? Include procedures for calling 911 and other applicable agencies.

6. Submit a plan for reporting and managing any incident or unusual occurrence that is threatening to the health, safety or welfare of the children, staff or volunteers. (Attach and label D6)

7. Where are the first aid supplies kept? _____

a. Is the first aid container visibly labeled or cabinet door labeled "first aid?" Yes No and accessible to staff?

b. Submit a copy of your written exposure plan regarding universal safety precautions. (Label 7b)

What are your plans for training staff on this plan prior to hire and then providing an annual refresher course?

8. Do you plan to diaper children? Yes No

a. If so, where will you diaper the children? _____

b. Where will you keep supplies available? _____

c. Where will the hand-washing sink be installed? _____

d. What is the procedure for diapering children? _____

3. Where will you post diapering procedures? _____

9. Do you plan to dispense medications? Yes No

a. If so, where will you store the medications so that they are out of the reach of children?

b. Do you have a locked container for refrigerated medications? Yes No

c. What system is in place for parental permission and administration of medications?

d. How will you document that staff has been trained to administer medication? _____

e. When instructions for medication state "as needed" describe how you will document the symptoms that would require the medication to be given _____

Attach a copy of the Medication Authorization Form you will be using. (Label D9)

10. What is your plan for caring for a child who becomes ill?

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- a. Where is the supervised isolation area? _____
- b. Do you have bedding/sheets to use for sick children? Yes No
- c. Where will you store used bedding/sheets until cleaned/disposed of?
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11. Is the emergency information located on or near each working telephone (address of children's center, 911, poison control center, abuse hotline number, health department telephone number and simple directions to your children's center)? Yes No

12. Do you plan to take field trips? Yes No

a. If so, what will be your procedure for advising parents and obtaining permission?

b. Where will you post the required two (2) working days notification for field trips?

b. Attach a permission slip. (Label D12b)

13. If you plan to take field trips, are you prepared to meet these requirements?

- Additional adult on field trip Yes No
- Means of communication (such as a cell phone) Yes No
- Staff member with current First Aid, CPR certificates Yes No
- First Aid Kit for each vehicle, complete and labeled Yes No
- Transportation Log (for walking and vehicle trips)(Attach copy Label D13) Yes No
- Transportation Training for staff Yes No

14. If transportation is to be provided regularly (such as before/after school care), are you prepared to meet these requirements?

- Driver's license for each driver in personnel file Yes No
- Driver's annual physical examination in personnel file and vehicle Yes No
- Transportation Log (Attach copy and Label D14) Yes No
- Annual vehicle mechanical safety inspection Yes No
- Vehicle liability insurance in center file and vehicle Yes No
- Transportation Training for staff Yes No

E. DISCIPLINE/EXPULSION POLICY

Submit your plan for managing children's behavior, keeping in mind age-appropriate guidelines, positive behavioral supports and dealing with challenging behaviors. Be sure to include, from Licensing Regulations under Child Discipline, wording regarding what discipline is prohibited. (Label E)

F. CHILD ABUSE AND NEGLECT

1. Do you understand the mandated responsibility for reporting child abuse/neglect for all child

care personnel?

Yes

No

- 2. Submit a written policy on how you will inform staff of their mandated responsibility for reporting suspected child abuse and neglect (Using and explaining the Acknowledgement Form should help).

G. FOOD SERVICE AND NUTRITION

a. Submit a week's sample snack menu and a sample breakfast or lunch menu if meals will be served, showing nutritious meals and snacks that you plan to provide. USDA MyPlate should be used to determine age appropriateness of the selected food for children. (Label G2a).

b. Submit a copy of the children center's food and nutrition policies that include language on food safety and allergens. (Label G2b.)

c. How will you ensure that all children have healthy food options if they are not provided from home? _____

c. Submit a copy of a Food Experience Form. (Label G2c).

d. Do you have thermometers in all classroom refrigerators and freezers? _____

H. RECORDS

1. Daily Attendance

a. Describe procedure for recording daily attendance for each child in care, including transitions:

b. Submit a sample attendance record; including an explanation of symbols (key) noted on attendance record. (Label H1b)

c. Submit a sample transition record, if a separate form. (Label H1c)

d. Submit a sample Center Closing Log that will be used as part of your closing procedures ensure all children have left the premises. (Label H1d)

2. Posted Records

a. Submit a daily schedule for each group of children for whom you plan to provide care. (Label H2a)

b. Submit an evacuation diagram including location of children's emergency records. (Label H2b)

3. Personnel Records

a. Describe your plan for ensuring that the required personnel information is on site in the personnel file on the first day of employment and maintaining records on an ongoing basis:

b. Describe your plan for submitting Background Screening during required timeframes:

c. Describe your plans for tracking required staff trainings, completed within required timeframes: (DCF 40 Clock hours, literacy, safe sleep, fire extinguisher, safety precautions)

4. Children's Records

a. Describe your plans for ensuring children's records information is on site/on file within required timeframes and maintained on an ongoing basis:

b. How will you track the expiration date of Student Health Examinations, and Florida Certificates of Immunization?

c. What will you do if parents/guardians do not provide the DH680 or DH681 Immunization Record on the first date that the child is enrolled?

d. How will you notify parents that all children may not be up-to-date on required Immunizations?

e. Submit a copy of the required Child Enrollment Information form. (Label H4e)

I. FACILITY INSPECTIONS

Submit only the approved inspection forms as applicable for the following:

- Certificate of Approval - Building (C-0109) if applicable
- Certificate of Approval - Fire (C-0110)
- Certificate of Approval - Electrical (C-0111) if applicable
- Health Inspection Report - facility, and food if applicable

OR

- Certificate of Approval form for Building, Electrical, and Fire (C-0102) for Children's Centers operated in facilities owned by the Pinellas County School Board

J. ADMINISTRATION PLANS

1. How will you prepare to accept children with disabilities?

2. How will you ensure continuity of care, especially for younger children? _____

3. How will you ensure that during the hours of operation the center has exclusionary controls in place to provide effective measures for keeping out individuals who are not screened or trained? _____

4. How will you maintain a safe outdoor space? Attach a copy of your Monthly Outdoor Checklist and label it J4.

a. What is the form that you will use for a daily playground check before children use it? (School Age Centers Only) Label it J4a.

b. How will you ensure that six inches of resilient surface will be maintained in all fall zones?

c. How will you ensure that the sandbox is covered at the end of each day? _____

d. Do you have manufacturer instructions for the construction and maintenance of all out door stationary equipment? _____

Does the equipment indicate what age group(s) it is designed to be used by? _____

Attach a copy or instructions and photographs and/or age labels and label J4D

5. Describe the procedure for ensuring that the buildings and indoor equipment are maintained in a safe and sanitary condition. Include a daily checklist that you plan to use. (Label it J5).

a. How will you ensure that all safety plugs that are not tamper resistant are covered?

b. Where will handwashing signs be posted? Will they list times or circumstances under which hands need to be washed? _____

c. Submit a cleaning schedule for indoor and outdoor equipment and furnishings, daily and weekly and label it J5c.

6. Submit a checklist for staff with their duties and responsibilities for classroom. (Label J6)

7. Submit a list of duties for staff that are openers in the morning and for staff that are closers at the end of the day. (Label J7)

8. Do you have an operable telephone even in the event of power outage? Yes No

9. Describe your plans for an integrated pest management system.

10. Radon Testing (please see the flyer sent to you with your Application to Open a New Children's Center.) Please go to RADON.FLORIDAHEALTH.GOV and then click on MANDATORY TESTING on the left-hand side of the web page. Follow the directions in Form DH1777 and send the results to the address in Tallahassee on the bottom of page 2.

Have you submitted your Radon Testing results to Tallahassee? _____

Attach a copy of what was sent (Label J10).

Plan of Operation was reviewed: _____
Date

Applicant

Licensing Specialist