Montessori
SCHOOL OF CAYMAN

# HEALTH POLICY

*Health, Hygiene & Wellbeing of Students, Staff and Visitors*

Originally approved and adopted: January 11, 2021

Reviewed: September 2024

**Reviewed and updated: July 2026**

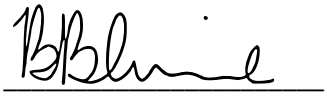
# Montessori School of Cayman — Health Policy

Approved and adopted: January 11, 2021

Reviewed: September 2024

Reviewed and updated: July 2026 — this revision incorporates current Cayman Islands Department of Environmental Health (DEH) hand hygiene guidance (May 2025), a standardised diaper-changing procedure, and the health- and hygiene-related standards from the ECCE Environment, Health and Safety Checklist (May 2025).

**Head of School / Director**



Mrs. Briana Bergstrom Currie

**Director of Teaching, Learning and Operations**

Ms. Aristea Underwood

*This policy has been approved by the Cayman Islands Ministry of Education and Early Childhood Care & Education Unit.*

## 1. Purpose & Scope

For the purposes of this Policy, the term “school” includes both early childhood and primary education, and the term “student” refers to all children enrolled at Montessori School of Cayman, including those in early childhood.

Our Health Policy has been developed with the primary concern for the wellbeing of our students and school community. It sets out our expectations for keeping children and staff at home when unwell, our procedures for accidents, illness and medication, and the hygiene standards — including hand hygiene and diaper-changing practice — that every member of staff is expected to follow in order to maintain a healthy, safe environment for all.

## 2. Guidelines for Illness & School Attendance

To maintain a healthy school environment, please do not send your child to school if any of the following symptoms are present. Please also refer to the Cayman Islands Public Health guidelines reproduced in Appendix A, which the school follows alongside the criteria below.

| Symptom / Illness | Exclusion Criteria |
|---|---|
| Appearance / Behaviour | Children should remain at home if they appear to be under the weather — unusually tired, pale, or lacking appetite. |
| Fever | Above 99.0°F: remain off school until fever is completely gone for 24 hours without the use of a fever-reducing medicine. A child found with a fever at school will be sent home immediately. |
| Skin problems | A contagious skin-related issue requires a doctor’s note confirming the child may return before they come back to school. |
| Cold / Cough | May return once the cold or cough has subsided and the child is no longer showing signs of mucous and is well enough to participate in the full daily schedule. |
| Vomiting & Diarrhoea | Must be symptom-free for at least 48 hours before returning. A child who vomits or has diarrhoea at school will be sent home and must remain home until symptom-free for 48 hours. |
| Eye / Nose discharge | Must remain out of school with excessive nasal discharge and/or discoloured (green/yellow) nasal discharge. |
| Streptococcal sore throat / Scarlet fever | Remain away from school until at least 48 hours after treatment begins, and fever-free for 24 hours without medicine. |
| Head lice | Families will be notified by email if a case is identified at MSC. Children must remain home until the first treatment is completed. |
| Chicken pox | Remain home until all blisters have dried into scabs (about six days after rash onset). A doctor’s note confirming the illness and clearance to return is required. |
| Conjunctivitis (Pink eye) | Bacterial: remain home for 48 hours after treatment begins. Viral: remain out of school until a doctor’s note confirms the child is no longer contagious. |

Our Health Policy is strictly enforced. If any of these symptoms develop during school hours, parents will be called to collect their child immediately. Children who are ill at school will be isolated in our school office with a member of staff until they can be collected; the isolation area will be thoroughly sanitised before it is used by other students

again. The school reserves the right to send a child home due to any illness or injury — a child who comes to school should be well enough to participate in ALL day-to-day activities.

## 3. Accidents & Incidents

Occasionally, accidents and incidents take place at school during the school day. If a student is involved in an accident or incident, we will notify the parent or guardian and complete an Accident, Incident and Illness Report to be signed at the end of the day for the student's file.

Accident, Incident and Illness Reports are completed electronically via Transparent Classroom and emailed to parents for review and signature (see Appendix B).

## 4. Medication Administration & Storage

When children require medication during the day, Montessori School of Cayman will accommodate this need for both prescription and non-prescription medication. The following guidelines must be followed:

- Parent/guardian completes a Permission to Administer Medication form prior to medication being kept at our centre and given to the child. This form is shared electronically via Formstack and is kept on the child's record (Appendix C).
- When the prescribed dosage is three times per day, the first and last dosages are administered at home; Montessori School of Cayman will only administer the midday dosage.
- Prescription medication must be properly labelled by a pharmacy, marked with the child's name, and provided in its original container as dispensed by the pharmacy.
- Non-prescription medication provided by the family is given following the manufacturer's directions.
- All medications are administered by the assigned staff member and recorded on the Medicine Record of Administration form (Appendix D).
- Medication is stored out of reach of all children and refrigerated if required. If refrigerated, it is placed on the highest shelf, out of children's reach; if stored outside the refrigerator, it is kept in the hallway cabinet by the school's First Aid Kit.

## 5. First Aid Kit & Emergency Provisions

Montessori School of Cayman keeps a large first aid kit, stocked and stored in the top hallway cupboard. Items are checked, kept fully stocked and replenished as needed.

An AED machine is located on the wall of the main school hallway and is available for use in an emergency.

Staff CPR/First Aid training and Child Protection training are kept up to date and are reviewed as part of the school's regular Environment, Health and Safety checks (see Section 8).

## 6. Hand Hygiene

This section reflects the Cayman Islands Department of Environmental Health (DEH) Guidelines on Hand Hygiene, Food Handlers Permits, and Cleaning & Sanitization of Tables and Counter Tops in Early Childhood Care and Education Centres (May 2025). Proper hand hygiene is one of the most effective ways to prevent the spread of illness among young children, who are especially vulnerable to diarrhoeal disease and respiratory infection.

## 6.1 Handwashing Procedure

Every classroom is equipped with at least one proper handwashing station with running water, liquid soap in an appropriate dispenser, disposable paper towels, and a covered, hands-free bin. All children and staff follow this seven-step procedure:

1. Moisten hands with running water and then apply liquid soap.
2. Rub hands together away from the stream of water for 20 seconds.
3. Rinse hands free of soap under running water.
4. Leaving the water running, dry hands with a clean paper towel or an air blower.
5. Turn off the faucet with a paper towel.
6. Throw the used paper towel into a hands-free trash can.

## 6.2 Key Moments for Handwashing

Staff and children wash their hands at the following key moments:

- After using the toilet or changing a nappy/diaper
- Before and after handling raw foods such as meat and vegetables
- Before eating or handling food
- After blowing the nose, sneezing or coughing
- Before and after treating a cut or wound
- After touching animals, including pets, their food, or after cleaning their cages
- Whenever hands are visibly dirty

## 6.3 Hand Sanitizer & Personal Hygiene Standards

- An approved hand sanitizer may be used only when hands are not physically dirty; sanitizer is not a substitute for washing when soiling is visible. Children under 2 years old do not use hand sanitizer.
- Staff wear sleeves above the elbow (long sleeves rolled up to the elbow).
- Staff remove all hand or wrist jewellery, with the exception of one plain band.
- Nails are kept short and clean.
- Nail brushes are not used.
- Cuts and abrasions are covered with a waterproof dressing.

## 6.4 Gloves

Disposable gloves are never a substitute for good hand hygiene. Glove wearing is not mandatory, but handwashing or sanitising must occur before and after use, and gloves must be used correctly. Used gloves are discarded immediately in a lined, hands-free bin, out of children's reach, as they are contaminated and present a choking hazard.

## 6.5 Food Handlers Training & Surface Sanitization

- At least one caregiver at Montessori School of Cayman is trained and certified in food handling; the school works toward the DEH's incremental requirement that all food preparation, handling, and hygiene-support staff be trained and certified in Food Hygiene and Safety.
- Tables and counter tops are cleaned and sanitized between uses, following DEH-endorsed CDC guidance on cleaning and disinfecting early care and education settings.
- Soap dispensers are cleaned thoroughly on a regular schedule.

Full DEH guidance, including the seven-step handwashing diagram and glove-use instructions, is reproduced in Appendix E. For further information the DEH can be contacted at 949-6696 or *dehcustomerservice@gov.ky*.

## 7. Diaper Changing Procedure

This procedure, adapted from Penn State Extension's Better Kid Care guidance, applies wherever diapers are changed at Montessori School of Cayman. All staff who change diapers are trained in this procedure.

### 7.1 Preparation Steps

7. Adult washes their hands following the handwashing procedure in Section 6.1.
8. Gather all supplies and place them near or on the changing surface above the child's head (never on the diapering surface itself): enough wipes, a clean diaper, and — if used — gloves, clean clothes, a plastic bag for soiled clothes or cloth diapers, a dab of diaper cream on a disposable cloth, and changing table paper long enough to reach from the child's shoulders to their feet.

### 7.2 Dirty Steps

9. Place the child on the changing table and remove clothing to access the diaper, keeping clothing out of the contaminated area. Soiled clothing goes straight into a plastic bag to send home.
10. Never leave the child unattended on the changing table — staff keep a hand on the child at all times.
11. Unfasten the diaper, leaving it under the child.
12. Use wipes to clean the child from front to back, placing each wipe inside the soiled diaper or directly into a lined, hands-free covered trash can. Use each wipe for only one swipe.
13. Fold the soiled surface of the diaper inward over the used wipes.
14. Throw away the soiled diaper and wipes in the lined, hands-free trash can (place soiled clothing or cloth diapers immediately in a plastic bag, stored for parents out of children's reach).
15. Remove gloves, if used, and discard in the same lined trash can.
16. Use a wipe to clean your own hands and another to clean the child's hands, discarding each in the trash can.
17. If a paper liner was used, check for soil under the child and fold the paper up from the child's feet to create a clean surface underneath.

### 7.3 Clean Steps

18. Put on the clean diaper and apply creams if needed, then dress the child.
19. Wash the child's hands, then return them to the group without touching other surfaces.
20. Dispose of the paper liner in the trash can.
21. Clean visible soil from the changing table and disinfect the surface with a bleach/water solution or an EPA-approved product, following the product directions.
22. Adult washes their hands following the handwashing procedure in Section 6.1.
23. Record the diaper change in the child's log.

### 7.4 Additional Standards

- Children in diapers are checked and changed regularly and as needed; all diapering supplies are kept within reach of the changing table.
- The changing table is sanitized between every use and is never used for storage.
- Garbage bins used for diapers are covered at all times.

- Staff wash their hands, following the Section 6.1 procedure, before and after every diaper change; children wash their hands after every diaper change.

## 8. Environment, Health & Safety Standards

Montessori School of Cayman is regularly assessed against the Ministry of Education's ECCE Environment, Health and Safety Checklist (May 2025). The health- and hygiene-related standards from that checklist that support this policy are summarised below; the checklist itself is used internally, and by ECCE Officers, as the audit tool for compliance walk-throughs.

### 8.1 Supervision & Care of Children

- All children, staff and visitors are signed in; visitors wear a badge.
- All children are actively supervised at all times, including during mealtimes and rest/sleep time, with staff circulating through indoor and outdoor spaces.
- There is clear visibility into bathrooms, allowing supervision of a child being assisted while maintaining a level of privacy.
- Cribs and sleeping mats are separated by at least 30 inches and set up according to the manufacturer's instructions; children's bedding does not touch another child's when stored.

### 8.2 Daily Safe Environment Checks

Before children access any indoor or outdoor space, staff carry out a Safe Environment Check of that space, and continue to monitor it throughout the day. The purpose of these checks is to identify and address anything that could put a child at risk, so that incidents and accidents are prevented rather than simply responded to after the fact.

At the start of each day, and at each transition between spaces, staff check that:

- indoor spaces are free of hazards — no broken furniture, toys, or equipment; no sharp edges, splinters, or loose fittings; and any damaged item is removed from use immediately and reported for repair or replacement
- floors and walkways are clear of trip hazards, spills, and clutter, with resources stored properly and safely
- outdoor areas are secure — gates and fences are closed, latched, and in good repair, with no gaps a child could pass through or climb
- outdoor equipment and surfaces are safe — free of rust, breakage, or sharp/protruding parts, with ground cover intact to cushion falls
- the outdoor environment is free of hazards such as standing water, harmful plants, litter, or animal waste
- nothing has been left within a space that should not be accessible to children (e.g. tools, chemicals, hot beverages).

Any hazard identified is addressed immediately where possible — for example, removing a broken toy from circulation, wiping up a spill, or securing a gate. Where a hazard cannot be resolved immediately, staff restrict access to that area, inform leadership, and log the issue on the maintenance log so it is tracked through to resolution. These daily checks are in addition to, and support, the broader Environment, Health and Safety Checklist process described in Section 8.5 and Appendices H, I and J.

### 8.3 Facility, Equipment & Chemical Safety

- The facility and furnishings are kept in good, clean repair, with spaces free of hazards, electrical outlets covered, and flooring free of tripping hazards.
- Chemicals, cleaning supplies and toxic substances are stored in a locked cupboard or otherwise inaccessible to children, labelled, and used according to manufacturer directions; Safety Data Sheets are kept on site.

### 8.4 Emergency Preparedness & Training

- First aid kits are up to date, with no expired items, and located appropriately (see Section 5).
- Fire exits are clear and accessible, evacuation cribs are kept closest to the exit and free of items, and fire evacuation plans are displayed at the occupants' eye level in every space.
- Fire drills and earthquake drills are conducted as required, with drill records maintained.
- Staff Child Protection training and CPR/First Aid training are kept up to date.
- Risk assessments are conducted for field trips and for relevant on-site activities and situations.

### 8.5 Ongoing Monitoring

Health and safety checks are conducted regularly, using the ECCE Environment, Health and Safety Checklist, and records are kept organised and accessible. Where a review identifies a hazard, the school addresses it promptly; settings found in breach of Ministry standards must submit a Compliance Plan outlining corrective action.

## 9. Policy Review

This Health Policy is reviewed at least annually, or sooner if Cayman Islands Public Health, DEH, or Ministry of Education/ECCE guidance changes. All staff are required to read, understand, and sign the Acknowledgement of Health Policy in Appendix G.

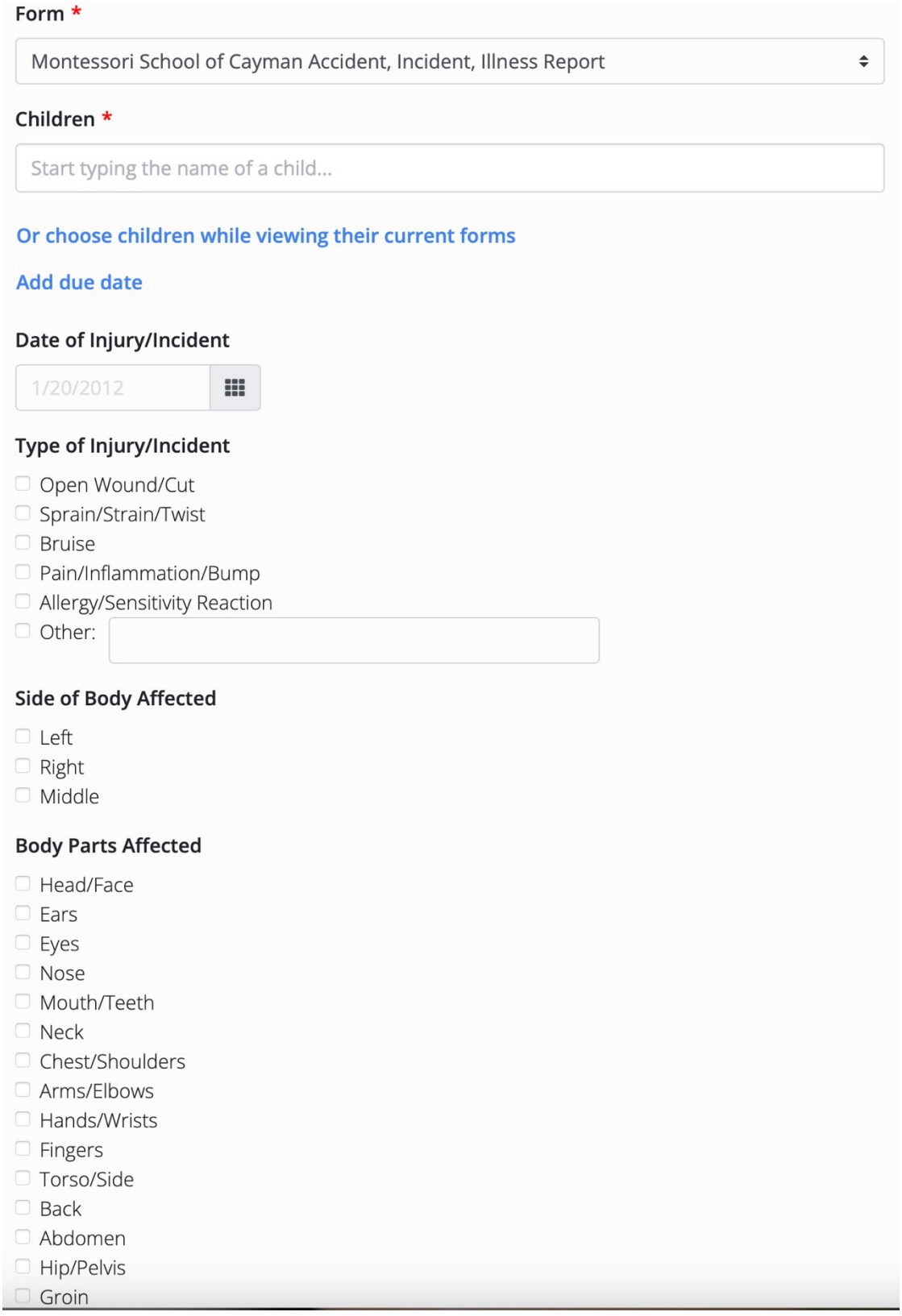
## Appendix A — Cayman Islands Public Health Guidelines on Illness & School Attendance

Source: Public Health Department, School Health Services, Cayman Islands Health Services Authority (revised September 2014).

| Condition | Guidance |
|---|---|
| Chicken pox | Remain home until all lesions are crusted over, about 5–7 days. |
| Conjunctivitis (pink eye) — Bacterial | Remain home from the time eyes become red and draining until 24 hours after commencing antibiotics. |
| Conjunctivitis (pink eye) — Viral | Contagious for 5–7 days. |
| Diarrhea and/or vomiting | Keep home until symptom-free for 24 hours. |
| Temperature of 100°F or above | Keep home until symptom-free for 24 hours. |
| Throat infection | Keep home until 24 hours after commencing antibiotics. |
| Ear infection | May return to school 24 hours after commencing antibiotics, provided pain is not severe enough to prevent participation in activities. |
| Pediculus (Head lice) | May return once treatment has started but should be excluded from activities likely to cause exposure to other children. |
| Ringworm | May return once treatment has started but should be excluded from activities likely to cause exposure to other children. |
| Impetigo | Keep home until treatment has started and all lesions are crusted over. |
| Cold & Flu | If symptoms are mild, the child may be in school. Keep home if the child generally does not feel well, has a persistent cough, or is congested. Keep home until fever has subsided for 24 hours. |

## Appendix B — Accident, Incident and Illness Report

Montessori School of Cayman's Accident, Incident and Illness Reports are completed electronically via Transparent Classroom and emailed to parents.



Form *

Montessori School of Cayman Accident, Incident, Illness Report

Children *

Start typing the name of a child...

Or choose children while viewing their current forms

Add due date

Date of Injury/Incident

1/20/2012

Type of Injury/Incident

- Open Wound/Cut
- Sprain/Strain/Twist
- Bruise
- Pain/Inflammation/Bump
- Allergy/Sensitivity Reaction
- Other:

Side of Body Affected

- Left
- Right
- Middle

Body Parts Affected

- Head/Face
- Ears
- Eyes
- Nose
- Mouth/Teeth
- Neck
- Chest/Shoulders
- Arms/Elbows
- Hands/Wrists
- Fingers
- Torso/Side
- Back
- Abdomen
- Hip/Pelvis
- Groin

- [ ] Buttocks
- [ ] Legs/Knees
- [ ] Feet/Ankles
- [ ] Toes

**What Happened** *

Provide a description of what occurred.

**Treatment Given** *

Provide a description of the treatment given.

**Staff Signature** *

Click to sign

Parents will get a notification that they have a form to fill out once you add this form.

Assign new forms | Cancel

## Appendix C — Medication Form

Montessori School of Cayman's Medication Form is completed electronically via Formstack and emailed to parents.

NB: Medication MUST be in its original container, as dispensed by the pharmacy. By signing, the parent/caregiver confirms the information is accurate, consents to MSC staff administering the medication in accordance with this policy, agrees to inform the school immediately in writing of any change in dosage, frequency, or discontinuation, and acknowledges responsibility for notifying staff of the last dose given before arriving at school.

# Montessori School of Cayman - Medication Form

Student's Name

First Name

Last Name

Date

MMMM DD, YYYY

Name of Programme

Medication Name and Strength:

Has your child ever had this medication before?

- Yes
- No

Medication Dose to be Administered:

Time for Medication to be Administered:

MMMM DD, YYYY

hh:mm aa

Why is this medication needed?

Please list any additional notes regarding medication:

NB: *Medication MUST be in its original container, as dispensed by the pharmacy.*

Name of child's teacher/teachers authorised to administer medication:

Please list your child's GP and their contact number:

Parent/Caregiver's Name

First Name

Last Name

Parent/Caregiver Contact Number

*The information above is, to the best of my knowledge, accurate at the time of writing and I give my consent to Montessori School of Cayman staff administering the medication in accordance with their policy. I will inform Montessori School of Cayman immediately in writing, if there is any change in dosage or frequency of the medication or if the medication is stopped.*

Text

*I understand it is my responsibility to notify staff of last dose given before arriving at school.*

Parent/Caregiver's Signature

clear

Use your mouse or finger to draw your signature above

Submit Form

## Appendix D — Medicine Record of Administration

For each medication given at school, staff maintain a Medicine Record of Administration capturing: name of child; programme; name and strength of medication; dose and frequency; expiry date; date returned to parent; and, for each administration — date, last dose given by parent/carer, time given, dose given, staff member(s) administering, comments, and parent/carer name and signature.

Montessori
SCHOOL OF CAYMAN

MEDCINE RECORD OF ADMINISTRATION

Name of child: _____
Date: _____
Programme: _____

Name and strength of Medication _____ Expiry Date _____
Dose and Frequency of Medication _____ Date returned: _____

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| **Date** | | | | | | | | | | | |
| **Last dose given by parent/carer** | | | | | | | | | | | |
| **Time Given** | | | | | Text | | | | | | |
| **Dose Given** | | | | | | | | | | | |
| **Staff members** | | | | | | | | | | | |
| | | | | | | | | | | | |
| **Comments** | | | | | | | | | | | |
| **Name of Parent/Carer** | | | | | | | | | | | |
| **Parent/Carer Signature** | | | | | | | | | | | |

## Appendix E — DEH Hand Hygiene, Food Handlers & Surface Sanitization Guidelines

Source: Guidelines — Hand Hygiene, Food Handlers Permits and Cleaning and Sanitization of Tables and Counter Tops in Early Childhood Care and Education Centres, Department of Environmental Health, Cayman Islands Government (May 2025).

Key points from the DEH guidance are incorporated into Section 6 of this policy. The seven-step handwashing technique can also be viewed at: https://www.nhs.uk/live-well/best-way-to-wash-your-hands/. CDC guidance on cleaning and disinfecting early care settings is available at: https://www.cdc.gov/hygiene/about/how-to-clean-and-disinfect-early-care-and-education-settings.html.

For further information, the DEH can be contacted at 949-6696 or dehcustomerservice@gov.ky.

# Appendix F — Diaper Changing Quick Reference

A condensed version of Section 7 is displayed at every changing station for quick staff reference:

## Preparation

- Adult washes their hands following the handwashing procedure in Section 6.1.
- Gather all supplies and place them near or on the changing surface above the child's head (never on the diapering surface itself): enough wipes, a clean diaper, and — if used — gloves, clean clothes, a plastic bag for soiled clothes or cloth diapers, a dab of diaper cream on a disposable cloth, and changing table paper long enough to reach from the child's shoulders to their feet.

## Dirty steps

- Place the child on the changing table and remove clothing to access the diaper, keeping clothing out of the contaminated area. Soiled clothing goes straight into a plastic bag to send home.
- Never leave the child unattended on the changing table — staff keep a hand on the child at all times.
- Unfasten the diaper, leaving it under the child.
- Use wipes to clean the child from front to back, placing each wipe inside the soiled diaper or directly into a lined, hands-free covered trash can. Use each wipe for only one swipe.
- Fold the soiled surface of the diaper inward over the used wipes.
- Throw away the soiled diaper and wipes in the lined, hands-free trash can (place soiled clothing or cloth diapers immediately in a plastic bag, stored for parents out of children's reach).
- Remove gloves, if used, and discard in the same lined trash can.
- Use a wipe to clean your own hands and another to clean the child's hands, discarding each in the trash can.
- If a paper liner was used, check for soil under the child and fold the paper up from the child's feet to create a clean surface underneath.

## Clean steps

- Put on the clean diaper and apply creams if needed, then dress the child.
- Wash the child's hands, then return them to the group without touching other surfaces.
- Dispose of the paper liner in the trash can.
- Clean visible soil from the changing table and disinfect the surface with a bleach/water solution or an EPA-approved product, following the product directions.
- Adult washes their hands following the handwashing procedure in Section 6.1.
- Record the diaper change in the child's log.

# Diaper changing procedure

The following guidelines are for use in child care centers, group homes, and family child care homes. This resource was developed using best practice guidelines from Caring for Our Children, DHS Certification Regulations, and ECELS (Early Childhood Education Linkage System at the PA Chapter of the American Academy of Pediatrics).

## Preparation steps

1. **Adult washes their hands.** See below for the proper handwashing procedure.
2. **Gather all supplies and put the containers back.** Place supplies near or on the changing surface above the child's head. Do not put containers on the diapering surface.
   - » **Enough wipes**
   - » **Clean diaper**
   - » If used/needed: **Gloves, Clean clothes, Plastic bag** for soiled clothes or cloth diapers, **Dab of diaper cream** (place on a disposable cloth), **Changing table paper** (enough to reach from child's shoulders to their feet)

## Handwashing procedure

1. **Moisten** hands with running water and then apply liquid **soap**.
2. **Rub** hands together **away from** the stream of water for **20 seconds**.
3. **Rinse** hands free of the soap under running water.
4. Leaving the water running, **dry hands** with a clean paper towel or an air blower.
5. **Turn off** the faucet with a paper towel.
6. Throw the used paper towel into a hands-free trash can.

## Dirty steps

1. **Place the child** on the changing table and **remove clothing to access the diaper** keeping the clothing out of the contaminated area. If clothing is soiled, place it in a plastic bag to send home.
2. **Never leave the child unattended on a changing table.**
3. **Unfasten diaper** leaving it under the child.
4. Use **wipes to clean child** from front to back and place inside the soiled diaper or directly into a lined, hands-free covered trash can. Use each wipe for only one swipe.
5. Fold the soiled surface of the diaper inward over the used wipes.
6. **Throw away the soiled diaper and wipes in a lined hands-free trash can** (place soiled clothing or cloth diapers immediately in a plastic bag).*
7. **Remove gloves** (if used) and **discard** in the same lined hands-free trash can.
8. **Use wipes to clean hands.** Use one wipe to remove soil from your hands and then throw it in the trash can. Use another wipe to remove soil from the child's hands and then throw it in the trash can.
9. If **paper liner** was used, check for soil under the child and fold paper up from the child's feet to cover the soiled area to create a clean surface under the child.

## Clean steps

1. **Put on the clean diaper** and **apply creams** if needed.
2. **Dress the child.**
3. **Wash the child's hands.** Then return them to the group without touching other surfaces.
4. **Dispose of paper liner** in trash can.
5. **Clean** visible soil from changing table and **disinfect**** the surface with bleach/water solution or an EPA-approved product according to directions.
6. **Adult washes** their hands.
7. **Record** the diaper change in the child's log.

* Store bagged, soiled clothing or cloth diapers for parents in an area inaccessible to the children.

** Disinfecting a diapering surface after use is a recommended step described in Caring for our Children 3.2.1.4 and Managing Infectious Diseases in Child Care and Schools, 6th edition, p. 26. Pennsylvania Code currently only requires sanitizing diapering surfaces after use. (3270.135(b); 3280.135(b); 3290.135(b)

PennState Extension
BETTER • KID • CARE

extension.psu.edu/programs/betterkidcare

This publication is available in alternative media on request.

HO_DiaperChanging.indd

Developed in collaboration with The Pennsylvania Key.

THE PENNSYLVANIA KEY

# Appendix G — ECCE Environment, Health and Safety Checklist

*This is the Ministry of Education/ECCE Unit's official inspection tool (May 2025), used by ECCE Officers and school leadership during compliance walk-throughs. For each item, rate: Y (Yes) / N (No) / M (Monitor) / N.O. (Not Observed) / N/A (Not Applicable).*

## 5.1.1 Care and Welfare of Children

| Item to Check | Rating |
|---|---|
| All children and staff have been signed in. | |
| All visitors are signed in and have badges. | |
| Outside doors are secure. | |
| Gates and access points are secure. | |
| There are at least two Child Safeguarding Leads/Protection Officers appointed. | |
| Child Safeguarding Leads/Protection Officers are posted for all to see. | |
| Staff are aware of the child abuse and neglect reporting procedures. | |
| All children are actively supervised at all times. | |
| All children are actively supervised during meal times. | |
| Staff circulate in the indoor and outdoor environment. | |
| There is visibility into bathrooms that allows for adequate supervision, ensuring that an adult assisting a child can be observed, as well as a level of privacy. | |
| Set up of room provides for clear visibility. | |
| Spaces are arranged to allow free flow with pathways that allow for uninterrupted play. | |
| Lighting allows for some direct natural light. | |
| There is an appropriate noise level. | |
| There is no excessive crying. | |
| Room temperature is comfortable for the occupants. | |
| Resources are accessible to the children. | |
| Resources not in use are stored properly. | |
| Resources are stored in the correct places. | |
| Equipment/Resources are developmentally appropriate for the age group accessing it. | |
| Staff personal belongings are not accessible to children and stored properly. | |
| Adult spaces are not accessible to children. | |
| Spaces that are unoccupied are not accessible to children. | |

| Item to Check | Rating |
|---|---|
| Cribs and sleeping mats are separated by a distance of 30". | |
| Cribs are free of soft items (contain only the child's blanket — no pillows or other). | |
| Staff have hands on children on the change table. | |

### 5.1.2 Quality of Maintenance & Record Keeping

| Item to Check | Rating |
|---|---|
| Facility is in good repair. | |
| Space is clean; all areas are free of litter and debris. | |
| Furnishings are sturdy, clean and in good repair. | |
| Set up of the room is safe for all, with no furniture, fixtures or equipment that could cause injury or damage. | |
| Spaces are free of hazards that could cause injury or illness. | |
| Electrical outlets are covered. | |
| Kitchen area is not accessible to children. | |
| Chemicals, cleaning supplies and toxic substances are stored in a locked cupboard or are otherwise not accessible to children. | |
| Chemicals are labelled and used according to manufacturer directions. | |
| Flooring and carpets are free from tripping hazards. | |
| Cribs are set up according to the manufacturer's instructions. | |
| Fences and gates are in good repair. | |
| Gardens, plants and landscaping are taken care of. | |
| Plants are identified as safe for children. | |
| The outside ground layer is safe (tripping and slipping; provides cushioning from falls). | |
| Equipment is free of rust. | |
| Equipment is in good repair. | |
| First Aid Kits are up to date (no expired items) and in appropriate locations. | |
| Fire exits are clear and accessible. | |
| Evacuation crib is closest to the exit and free of items. | |
| Fire evacuation plans are displayed in each space at the eye level for the occupants. | |
| Fire drills are conducted according to the requirements of the Fire Code. | |
| Fire drill records are maintained. | |

| Item to Check | Rating |
|---|---|
| Fire Services Annual Inspection is current. | |
| Earthquake drills are conducted as recommended by HMCI. | |
| Earthquake drill records are maintained. | |
| DEH Annual Inspection is current — facilities. | |
| DEH Annual Inspection is current — canteen. | |
| DEH Food Handler's Certificate(s) valid. | |
| Public Health Annual Inspection is current. | |
| Staff Child Protection training is up to date (International/CSW x2/Refreshers). | |
| Staff CPR/First Aid training is up to date. | |
| Risk assessments are conducted for field trips. | |
| Risk assessments are conducted for relevant activities and situations on site. | |
| Maintenance logs/records are maintained. | |
| Health and safety checks are conducted regularly. | |
| Health and safety records are organised and accessible. | |
| Safety Sheets are available for chemicals stored on site. | |
| Soap dispensers are cleaned thoroughly. | |

### 5.1.2 Compliance with Regulatory Requirements

| Item to Check | Rating |
|---|---|
| Registration Certificate or Other is posted in a public space. | |
| Staff-to-Child Ratio is met in all spaces. | |
| Space Ratio (maximum number in the space) is met. | |
| Space Ratio signs are visible for each space (for ECCE). | |
| All required inspections from outside agencies are current. | |
| Trade and Business License is posted. | |
| Volunteers are not alone with children, and have undergone the centre's volunteer procedures (i.e. training, police clearance). | |
| Settings policies are readily available. | |

### 5.1.3 Provision for and Promotion of Healthy Lifestyles

| Item to Check | Rating |
|---|---|
| Age-appropriate personal safety programme in place. | |
| Schedule is balanced and allows time for children to rest and spend time outdoors. | |
| Outdoor space allows for children to engage in vigorous play. | |
| There is a space for quiet time with a level of privacy that allows for supervision. | |
| Staff engage in hand washing, following handwashing procedures at relevant times. | |
| Children engage in hand washing, following handwashing procedures at relevant times. | |
| Handwashing station has running water, liquid soap and disposable paper towel. | |
| If hand sanitizer is used, it is used according to the directions on the bottle. | |
| No child under 2 years old is using hand sanitizer. | |
| Toys/resources that are contaminated are sanitized. | |
| Tables and surfaces are cleaned between uses, following DEH Guidelines procedures. | |
| Healthy meals/snacks are served; preferred options are food from home. | |
| Children's blankets and soft items do not touch another child's when stored. | |
| Children's bedding (mats, cots, etc.) are hygienically stored when not in use. | |
| Toilets are developmentally appropriate for the age group. | |
| Children can reach the sink, soap and towels when hand washing. | |
| Bathrooms are not used for storage. | |
| Potties are cleaned between uses. | |
| Infants under 6 months old, and other children unable to drink independently, are held semi-upright when being fed. | |
| Infants above 6 months are held or in a developmentally appropriate seat to be fed. | |
| Bibs are removed promptly following feeding. | |
| Children in diapers are changed regularly and as needed. | |
| All items for diapering are within reach of the change table. | |
| If staff use gloves, proper glove procedures are followed. | |
| Staff wash hands, following handwashing procedures, before and after changing diapers. | |
| Children wash hands, following handwashing procedures, after diaper changes. | |
| Garbage bins for diapers are covered. | |
| Change table is sanitized between uses. | |

| Item to Check | Rating |
|---|---|
| Change table is not used for storage. | |
| Staff nails are short and unpolished, according to DEH guidelines (staff with children under 6 years old). | |

Overall: ☐ No minor hazards in the centre ☐ No major hazards in the centre

*To expedite corrective actions, settings found in breach will receive a Notice of Non-Compliance from the Ministry of Education. They must then submit a Compliance Plan outlining how they will rectify the identified safety violations.*

# Appendix H — Daily / Weekly / Monthly / Yearly Health & Safety Checklist (Leaders)

This self-audit tool is used by Montessori School of Cayman's leadership team to check health and safety standards at the frequency indicated.

## Daily

| Think… | Yes | No |
|---|---|---|
| Are all children signed in? | | |
| Are all staff signed in? | | |
| Are all visitors signed in? | | |
| Do all visitors have a visitor badge? | | |
| Are doors secure? | | |
| Are gates and fences secure around the premises? | | |
| Are the Child Protection Officers/Safeguarding Leads posters/pictures posted throughout your setting? | | |
| Are all staff aware of the steps to take if there are concerns for child abuse and/or neglect? | | |
| Are all children actively supervised during sleep time, meal time, and at all times? | | |
| Do staff move around indoors when supervising the children? | | |
| Do staff move around outdoors when supervising the children? | | |
| Can staff see into the children's bathrooms to supervise while ensuring a level of privacy for the child? | | |
| When staff assist a child in the bathroom, is there clear visibility with a level of privacy for the child so that others can observe the interaction? | | |
| During walkthroughs, are all spaces in all rooms visible? | | |
| Are all spaces the children access outside visible to the staff? | | |
| Does the set up for each space provide clear paths that allow for easy exit in an emergency? | | |
| Does the set up for each space provide clear paths that allow for uninterrupted play? | | |
| Is there an appropriate level of noise in the setting? | | |
| Are any children crying excessively? | | |
| Is the temperature of the spaces comfortable (not too hot, not too cold) for the children and staff? | | |
| Can the children reach the resources without needing adult support? | | |
| Are the resources stored properly? | | |
| Are resources stored in the right places? | | |
| Are the resources appropriate for the children? | | |

| Think… | Yes | No |
|---|---|---|
| Are staff personal belongings in a space that the children cannot access? | | |
| Are adults-only spaces secure so that children are not able to access? | | |
| Are empty rooms kept secure, not accessible to children? | | |
| Are children napping 30" apart from each other? | | |
| Are cribs free of soft items? | | |
| Are the diaper changing procedures followed? | | |
| Do staff keep hands on the child on the change table? | | |
| Are the facilities and the furniture safe and in good condition? | | |
| Are all spaces clean, with no obvious signs of dirt or litter? | | |
| Is the furniture sturdy and safe? | | |
| Are spaces set up so that it is safe for all? | | |
| Are electrical outlets covered? | | |
| Are the outlets on extension cords or other extenders covered? | | |
| Is the kitchen locked or secured so that children cannot enter? | | |
| Are chemicals or cleaning supplies locked in a cupboard or out of reach of children? | | |
| Are the chemicals used according to the directions? | | |
| Are the indoor spaces free of tripping hazards? | | |
| Is the outdoor environment free of tripping hazards? | | |
| Are the fences free of holes and other openings? | | |
| Do the gates open and close, and latch properly? | | |
| Is the outdoor equipment safe? (i.e. no broken parts, etc.) | | |
| Are the fire exits clear and easy to access at all times? | | |
| Is/are the evacuation crib(s) close to the exit door? | | |
| Is/are the evacuation crib(s) free of items and ready to be used? | | |
| Are the fire evacuation maps at the eye level of the occupants? | | |
| Are the fire evacuation maps near the exit door? | | |
| Do staff inform leadership in writing, or following the procedures, when items are broken or need fixing? | | |
| At the start of the day, are all spaces the children will use checked for health and safety concerns? | | |
| Are health and safety checks recorded? | | |

| Think… | Yes | No |
|---|---|---|
| Are all areas within the required staff-to-child ratio? | | |
| Are all areas within the requirement for space ratio? | | |
| Are volunteers always with a staff member? | | |
| Do all staff wash hands following the handwashing procedures? | | |
| Do all staff wash hands at all the required times? | | |
| Do children wash their hands following the handwashing procedures? | | |
| Do children wash their hands at the required times? | | |
| Does the handwashing area have running water, liquid soap and disposable paper towels? | | |
| Is hand sanitizer used according to the directions on the bottle? | | |
| Are only children above 2 years old using hand sanitizer? | | |
| Are contaminated toys and resources placed in a dirty toy bin and sanitized prior to use? | | |
| Are tables and surfaces washed between each use? | | |
| Are tables and surfaces washed according to the DEH Guidelines? | | |
| Are children and families encouraged to bring healthy snacks from home? | | |
| Is the food offered by the setting healthy? | | |
| Are the children's blankets and soft items stored so that they do not touch each other? | | |
| Are the mats or cots stored hygienically when not in use? | | |
| Are the children and adult bathrooms free of storage items (e.g. toys, resources)? | | |
| Are potties cleaned/sanitized between each use? | | |
| Are babies under 6 months old held semi-upright when feeding? (i.e. no bottles in the crib) | | |
| Are children unable to drink independently held semi-upright when feeding? | | |
| Are infants above 6 months old held or in an appropriate seat to be fed? | | |
| Are bibs removed from children immediately after feeding? | | |
| Are children's diapers changed regularly and when needed? | | |
| Can staff reach all items for diapering at the change table? | | |
| If staff use gloves for diapering, are the proper procedures for putting on and removing gloves followed? | | |
| Do staff wash hands before changing diapers? | | |
| Do staff wash hands after changing diapers? | | |
| Do staff make sure the children wash hands after a diaper change? | | |

| Think… | Yes | No |
|---|---|---|
| Do staff sanitize the change table between each use? | | |
| Is the change table free of all other items? (i.e. not used for storage) | | |

## Weekly

| Think… | Yes | No |
|---|---|---|
| Would all areas be safe during an earthquake? Are the items in the spaces secure in the event of an earthquake? | | |
| Are the grass, garden and plants taken care of regularly? | | |
| Are risk assessments completed for all field trips? | | |
| Are risk assessments completed for relevant activities and situations on site? | | |
| Do garbage bins for diapers have a hands-free lid? | | |
| Is the maintenance log updated with the date and status when an item has been addressed? | | |
| If the soap dispensers are refilled, are they cleaned thoroughly before new soap is added to them? | | |
| Is there a log of all chemicals on site? | | |
| Are labels on the chemicals, cleaning supplies and substances read to ensure proper use? | | |
| Are the chemicals labelled? | | |
| Are safety sheets for chemicals and toxic items stored on site accessible to staff? | | |
| Are staff nails short and unpolished? | | |

## Monthly

| Think… | Yes | No |
|---|---|---|
| Is the equipment appropriate for the children? (i.e. no dangling feet from chairs, appropriate table height for development, etc.) | | |
| If a child was to fall from equipment in the outdoors, is the ground cover soft to provide a cushion to the fall? | | |
| Is the outdoor equipment free of rust? | | |
| Are the items in the first aid kit(s) in date? | | |
| Are fire drills conducted regularly, with two in the first two weeks of the new academic year, and ten in total for the year? | | |
| Are records of the fire drills kept? | | |
| Are earthquake drills/earthquake-tsunami drills conducted, ensuring there are two to three per year? | | |

| Think… | Yes | No |
|---|---|---|
| Are records of the earthquake drills kept? | | |
| Are the toilets the children use appropriate for their age? Do their feet have a stable surface when using the toilet? | | |
| Are the children able to reach the sink, soap and paper towels independently when washing their hands? | | |
| Do we keep a maintenance log/record? | | |
| Do we prioritize the urgency of items on the maintenance log? | | |
| Are procedures followed when someone wants to volunteer? | | |
| Are the volunteers' valid documents on file? | | |
| Do all rooms have a space for quiet time with visibility to see the children? | | |
| Is the Cayman Islands Fire Services Annual Inspection in date and not older than 12 months? | | |
| Is the Department of Environmental Health Annual Inspection for the facility in date and not older than 12 months? | | |
| If there is a kitchen/canteen, is the DEH Annual Inspection in date and not older than 12 months? | | |
| Is the Public Health Annual Inspection in date and not older than 12 months? | | |
| Is there, at minimum, one person with a valid DEH Food Handler's Certificate? | | |
| Is leadership aware of, and working towards, having all ECCE staff trained in DEH Health and Safety for Early Childhood Professionals by October 2027? | | |
| Have all staff completed the Ministry-Approved International Child Protection Training prior to employment, with copies of certificates kept on file? | | |
| Have all staff completed the Child Safeguarding Workshop Online Module prior to employment, with copies of certificates kept on file? | | |
| Have all staff completed, or signed up for, the Child Safeguarding Workshop Skills Development and Practice, with copies of certificates kept on file? | | |
| Do all staff have valid First Aid/CPR certificates, with copies kept on file? | | |

## Yearly & At First Time of Use

| Think… | Yes | No |
|---|---|---|
| Is the registration certificate posted where it can be seen by all? | | |
| Are personal safety lessons taught at all levels? | | |
| Are cribs set up to the manufacturer's instructions? | | |
| Are the plants that the children have access to safe for children? | | |
| Do all spaces where children spend the majority of their day have direct natural light? | | |

| Think… | Yes | No |
|---|---|---|
| Are there basic supplies for first aid in all rooms? | | |
| Is there a master first aid kit? | | |
| Is there a first aid kit for field trips? | | |
| Do we have a copy of, and follow, the current Child Protection Training requirements? | | |
| Have we held our annual child protection refresher? | | |
| Are all staff familiar with the location of the muster points? | | |
| Are all staff familiar with the setting's hazard management plan? | | |
| Are all required inspections from outside agencies current? | | |
| Are risk assessments updated for regular events or medical situations? | | |
| Is there a volunteer policy? | | |
| Are the setting's policies available for staff (Child Protection, Safeguarding/Code of Conduct, Safe Environment, Reporting Procedures, Removal of a Child from the Institution, Transportation, Volunteer, Intimate Care, ALSN, Behaviour, Anti-Bullying, Illness, Hazard Management Plan, and any additional setting policies)? | | |
| Are the setting's policies available for parents/families? | | |
| Does the daily schedule allow for time indoors and outdoors? | | |
| Does the daily schedule allow for time for the children to rest? | | |
| Are the timetables across the setting balanced to meet the needs of the children? | | |
| Is the outdoor area large enough to allow the children to play and move freely? | | |

## Appendix I — Daily / Weekly / Monthly / Yearly Health & Safety Checklist (Staff)

This self-audit tool is used by Montessori School of Cayman's classroom staff to reflect on health and safety practice in their own room, at the frequency indicated.

### Daily

| Think… | Yes | No |
|---|---|---|
| Are all my children signed in? | | |
| When I see someone who does not work at the setting, do I ensure they have a visitor badge on? | | |
| Are the doors secure? | | |
| When I go to the playground, are the gates and fences secure? | | |
| Do I know who the Child Protection Officers/Safeguarding Leads are? | | |
| Am I aware of the steps to take if I have concerns for child abuse and/or neglect? | | |
| Are the children in my care actively supervised during play? | | |
| Are the children in my care actively supervised during sleep time? | | |
| Are the children in my care actively supervised during meal times? | | |
| Are the children in my care actively supervised at all times? | | |
| Do I move around indoors when supervising the children? | | |
| Do I move around outdoors when supervising the children? | | |
| Can I see into the children's bathrooms to supervise while ensuring a level of privacy for the child? | | |
| When I assist a child in the bathroom, is there clear visibility with a level of privacy for the child so that others can observe me? | | |
| When in my room, can I see all the children in my care? | | |
| When outside, can I see all the children in my care? | | |
| Does the set up for my room provide clear paths that allow us to easily exit in an emergency? | | |
| Does the set up for my room provide clear paths that allow for uninterrupted play? | | |
| Is there an appropriate level of noise in my room? | | |
| Are any children crying excessively? | | |
| Is the temperature of my room comfortable (not too hot, not too cold) for the children and staff? | | |
| Can the children reach the resources without needing adult support? | | |
| Are the resources in my room stored safely? | | |
| Are resources stored in the right places? | | |
| Are the resources appropriate for the age and developmental stage of my children? | | |

| Think… | Yes | No |
|---|---|---|
| Do I keep my personal belongings in a space that the children cannot access? | | |
| When I go into spaces that are for adults only, do I ensure I secure the door/access? | | |
| Do I ensure that empty rooms in my setting are not accessible to children? | | |
| Are my children napping 30” apart from each other? | | |
| If I have cribs in my room, are they free of soft items? | | |
| Do I follow the diaper changing procedures? | | |
| Do I keep my hands on the child on the change table? | | |
| Is my room and the furniture in it safe and in good condition? | | |
| Is my room clean, with no obvious signs of dirt or litter? | | |
| Is the furniture in my room sturdy and safe? | | |
| Is my room set up so that it is safe for all? | | |
| Are my electrical outlets covered? | | |
| Are the outlets on extension cords or other extenders covered? | | |
| Is the kitchen locked or secured so that my children cannot enter? | | |
| If I have chemicals or cleaning supplies in my room, are they in a locked cupboard or out of reach of children? | | |
| Are the chemicals in my room used according to the directions? | | |
| Is my room free of tripping hazards? | | |
| Is the outdoor environment free of tripping hazards? | | |
| Are the fences around my work place free of holes and other openings? | | |
| Do the gates open and close, and latch properly? | | |
| Is the outdoor equipment safe? (i.e. no broken parts, etc.) | | |
| Are the fire exits clear and easy to access at all times? | | |
| If I have cribs, is the evacuation crib close to the exit door? | | |
| If I have cribs, is the evacuation crib free of items? (i.e. not used for storage) | | |
| Is the fire evacuation map at the eye level of the occupants? | | |
| Is the fire evacuation map near the exit door? | | |
| Do I inform the right person in writing, or following the procedures, when I notice something broken or needing fixing? | | |
| When I start work for the day, do I check the spaces the children will use for health and safety concerns? | | |
| Do I record my health and safety checks? | | |

| Think… | Yes | No |
|---|---|---|
| Do I know the staff-to-child ratio for my room? | | |
| Do I know the staff-to-child ratio for all ages in my setting? | | |
| Do I know what the space ratio is for early childhood? | | |
| Is my room within the requirement for space ratio? | | |
| Do I know what to do if someone wants to volunteer at my setting? | | |
| Are volunteers always with staff members at my setting? | | |
| Do I know where to access my setting's policies? | | |
| Does my daily schedule allow for time indoors and outdoors? | | |
| Does my daily schedule allow for time for the children to rest? | | |
| Do I wash my hands following the handwashing procedures? | | |
| Do I wash my hands at all the times I should? Do I know when I should wash my hands? | | |
| Do the children wash their hands following the handwashing procedures? | | |
| Do the children wash their hands when they should? Do I know when the children should wash their hands? | | |
| Does the handwashing area have running water, liquid soap and disposable paper towels? | | |
| Am I using the hand sanitizer according to the directions on the bottle? | | |
| Are only children above 2 years old using hand sanitizer? | | |
| When a child mouths a toy, or sneezes on a crayon, do I place it in a dirty toy bin and sanitize it before another child uses it? | | |
| Do I wash the tables and surfaces between each use? | | |
| Do I wash the tables and surfaces according to the DEH Guidelines? | | |
| Do I encourage the children and families to bring healthy snacks from home? | | |
| Is the food offered by the setting healthy? | | |
| Do I ensure that the children's blankets and soft items do not touch each other's when stored? | | |
| Do I store the mats or cots hygienically when not in use? | | |
| Are the children and adult bathrooms free of storage items (e.g. toys, resources)? | | |
| Do I clean/sanitize the potties between each use? | | |
| Do I hold babies under 6 months old semi-upright when feeding? (i.e. no bottles in cribs) | | |
| Do I hold children unable to drink independently semi-upright when feeding? | | |
| Are infants above 6 months old held or in an appropriate seat to be fed? | | |
| Do I remove bibs from children immediately after feeding? | | |

| Think… | Yes | No |
|---|---|---|
| Do I change the children's diapers regularly and when needed? | | |
| Can I reach all items for diapering at the change table? | | |
| If I use gloves for diapering, do I put them on and remove them properly? | | |
| Do I wash my hands before changing diapers? | | |
| Do I wash my hands after changing diapers? | | |
| Do I make sure the children wash hands after a diaper change? | | |
| Do I sanitize the change table between each use? | | |
| Is the change table free of all other items? (i.e. not used for storage) | | |

## Weekly

| Think… | Yes | No |
|---|---|---|
| Would my room be safe during an earthquake? Are the items in my room secured in the event of an earthquake? | | |
| If the soap dispensers are refilled, are they cleaned thoroughly before new soap is added to them? | | |
| Are the grass, garden and plants taken care of regularly? | | |
| Have I completed the risk assessment for my class field trip, or other relevant situations and activities? | | |
| Have I completed a risk assessment for the class pet? | | |
| Is my garbage bin for diapers covered with a hands-free lid? | | |
| Do I have a list of all the chemicals in my room? | | |
| Have I read the labels on the chemicals, cleaning supplies and substances in my room to ensure proper use? | | |
| Are the chemicals in my room labelled? | | |
| Do I know where to access safety sheets for chemicals and toxic items stored on site? | | |
| Are my nails short and unpolished? | | |

## Monthly

| Think… | Yes | No |
|---|---|---|
| Is the equipment appropriate for my children? (i.e. no dangling feet from chairs, appropriate table height for development, etc.) | | |
| Does my room have a space for quiet time where I can visually see the children? | | |

| Think… | Yes | No |
|---|---|---|
| If a child was to fall from equipment in the outdoors, is the ground cover soft to provide a cushion to the fall? | | |
| Is the outdoor equipment free of rust? | | |
| Are there basic supplies for first aid in my room? | | |
| Are the items in the first aid kit in date? | | |
| Are there regular fire drills at my setting? | | |
| Are there termly earthquake and earthquake-tsunami drills at my setting? | | |
| Have I reviewed the evacuation plans with my children? | | |
| Do I have the evacuation plan posted at the eye level of the occupants and near the exit door? | | |
| Are the toilets the children use appropriate for their age? Do their feet have a stable surface when using the toilet? | | |
| Are the children able to reach the sink, soap and paper towels independently when washing their hands? | | |

## Yearly & At First Time of Use

| Think… | Yes | No |
|---|---|---|
| If I have cribs, are they set up to the manufacturer's instructions? | | |
| Are the plants that the children have access to safe for children? | | |
| Is the outdoor area large enough to allow the children to play and move freely? | | |
| Does my room have direct natural light? | | |
| Have I seen the registration certificate posted where it can be seen by all? | | |
| Do I teach personal safety lessons to my children? | | |
| Are all required inspections from outside agencies current? | | |
| Have I attended the annual child protection refresher held by my setting? | | |
| Do I know where the muster points are? | | |
| Do I know what to do in case of emergency? | | |
| Does my work place have a volunteer policy? | | |
| Do I know what my setting's policies say? Do my actions reflect the policies? | | |
| Am I aware of, and working towards completing, the DEH Health and Safety for Early Childhood Professionals training by October 2027? | | |
| Am I aware of the current Child Protection Training requirements I must obtain? | | |

| Think… | Yes | No |
|---|---|---|
| Have I completed the Ministry-Approved International Child Protection Training, and do I have my certificate? | | |
| Have I completed the Child Safeguarding Workshop Online Module, and do I have my certificate? | | |
| Have I completed the Child Safeguarding Workshop Skills Development and Practice, and do I have my certificate? If not, have I signed up for the training? | | |
| Have I completed my First Aid/CPR training, and do I have my certificate? | | |

## Appendix J — Safe Environment Checklist

# DAILY SAFE ENVIRONMENT CHECKLIST

*Indoor & Outdoor Spaces — Weekly Log*

| | |
|---|---|
| **Room/Space:** _____ | **Week of:** _____ |
| **Lead Teacher:** _____ | **Programme:** _____ |

**Purpose:** Staff complete this checklist before children access a space each day, and continue to monitor throughout the day, to identify and address anything that could put a child at risk — so that incidents and accidents are prevented. Mark each box ✓ once checked. If an item cannot be marked ✓, see "Hazards Identified & Action Taken" below and do not allow children to use that area/item until resolved.

| Indoor Safety Checks | Mon | Tue | Wed | Thu | Fri |
|---|---|---|---|---|---|
| Indoor spaces are free of hazards — no broken furniture, toys, or equipment | | | | | |
| No sharp edges, splinters, or loose fittings on furniture or equipment | | | | | |
| Floors and walkways are clear of trip hazards, spills, and clutter | | | | | |
| Resources and materials are stored properly and safely (not blocking exits or pathways) | | | | | |
| Electrical outlets are covered; cords are not a trip or reach hazard | | | | | |
| Cleaning products, chemicals, and other unsafe items are stored out of children's reach | | | | | |
| Nothing unsafe has been left accessible to children (tools, hot beverages, small choking hazards, etc.) | | | | | |
| Fire exits are clear and accessible; evacuation plan is visible | | | | | |
| Room temperature, lighting, and noise levels are appropriate for the children | | | | | |

| Outdoor Safety Checks | Mon | Tue | Wed | Thu | Fri |
|---|---|---|---|---|---|
| Gates and fences are closed, latched, and in good repair, with no gaps a child could pass through or climb | | | | | |
| Outdoor equipment is free of rust, breakage, or sharp/protruding parts | | | | | |
| Ground cover/surfacing is intact to cushion falls under climbing equipment | | | | | |
| No standing water, harmful plants, litter, or animal waste in play areas | | | | | |
| Outdoor toys and resources are in good repair and stored properly when not in use | | | | | |

| Outdoor Safety Checks | Mon | Tue | Wed | Thu | Fri |
|---|---|---|---|---|---|
| Shade structures, fencing, and outdoor furniture are secure and stable | | | | | |
| Pathways are clear and free of tripping hazards | | | | | |

## Hazards Identified & Action Taken

*Log any item that could not be immediately resolved. Restrict access to the area/item until it is fixed, and follow up until 'Resolved' is marked Y.*

| Date | Hazard / Issue Identified | Action Taken | Reported To | Resolved? |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

## Daily Sign-Off

| Day | Staff Signature (AM check) | Staff Signature (PM check) |
|---|---|---|
| **Mon** | | |
| **Tue** | | |
| **Wed** | | |
| **Thu** | | |
| **Fri** | | |

*Completed checklists are kept on file and form part of Montessori School of Cayman's Environment, Health & Safety records (see Health Policy, Section 8).*

## Appendix K — Acknowledgement of Health Policy

Name: ……..

Role: ……..

Date: ……..

**I declare that:**

1. I have read and understood Montessori School of Cayman's Health Policy, including the hand hygiene and diaper changing procedures.
2. I understand that I have a duty of care to keep all children healthy and safe while in my care.
3. I understand that I must inform parents/caregivers and complete an 'Accident, Incident and Illness Report' via Transparent Classroom when necessary, as soon as possible after the incident, and that a copy is shared with parents, requires their signature, and is saved on the child's profile.
4. I understand that I must receive the 'Medication Form' via email and complete a 'Medicine Record of Administration' if asked to administer medication to a student during the school day, and that these forms must be completed and signed by both staff and parent/guardian before giving any student a dose of medicine.
5. I understand that I am expected to follow the handwashing and diaper changing procedures set out in this policy at all required times.

Signed ……

Date ……..