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| **Group and School Age Program Staff Records Checklist** |
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|
| **Staff Full Name, Position, and Classroom** |   |   |   |   |   |   |   |   |
| **Human Resource and Personnel** |   |   |   |   |   |   |   |   |
| **Staff Information Form √** |   |   |   |   |   |   |   |   |
| **Application/Resume √** |   |   |   |   |   |   |   |   |
| **Documentation of Interview (date)** |   |   |   |   |   |   |   |   |
| **Verification of 2 References √ √**  |   |   |   |   |   |   |   |   |
| **Date of Birth** |   |   |   |   |   |   |   |   |
| **Date of Hire**  |   |   |   |   |   |   |   |   |
| **Date of Annual Staff Evaluation** |   |   |   |   |   |   |   |   |
| **BRC Status (Provisional/Suitable)** |   |   |   |   |   |   |   |   |
| **BRC Suitability Date** |   |   |   |   |   |   |   |   |
| **Physical (include date)** |   |   |   |   |   |   |   |   |
| **MMR (needs two)** |   |   |   |   |   |   |   |   |
| **Program Orientation (Include date)** |   |   |   |   |   |   |   |   |
| **Certifications and Licenses** |   |   |   |   |   |   |   |   |
| **EEC Certificate # (if applicable)** |   |   |   |   |   |   |   |   |
| **Qualifications per EEC hiring policies/protocols** |   |   |   |   |   |   |   |   |
| **EEC PQ Registry and Expiration Date** |   |   |   |   |   |   |   |   |
| **First Aid (date of expiration)** |   |   |   |   |   |   |   |   |
| **CPR (date of expiration)** |   |   |   |   |   |   |   |   |
| **7-D/School Bus Licenses(Include date of expiration)** |   |   |   |   |   |   |   |   |
| **Professional Development** |   |   |   |   |   |   |   |   |
| **"EEC Essentials" 12 Trainings Certificate** (Include Date) |   |   |   |   |   |   |   |   |
| **Number of ProfessionalDevelopment Hours** |   |   |   |   |   |   |   |   |
| **NOTES:** |   |   |   |   |   |   |   |   |
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| Program Name: |   | Completed By: |   |   |   | Date: |   |
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**STAFF RECORDS CHECKLIST INSTRUCTIONS**

These instructions are to assist you in completing the required staff records checklist. A copy of this checklist must be uploaded to LEAD along with your reopening package. (Please note: a blank space on the checklist will indicate that the information is not on file.)

**HUMAN RESOURCES AND PERSONNEL**

1. Name and Position: List the names of all teaching staff, cooks, transportation staff and administrators. Indicate the position in which the individual is employed (a staff person’s position may be different from their actual qualifications).

2. Staff Form: Indicate with a √ that a staff information form is on file at the Center.

3. Application / Resume: Indicate with a √ that an application or resume is on file.

4. Documentation of Employment Interview: Indicate the date of the employment interview for all staff.

5. Reference Checks: Indicate with √’s that two verbal reference checks have been documented in the file.

6. Date of Birth: Indicate the date of birth for all staff (this information is significant for MMR documentation).

7. Date of Hire: Indicate date of hire (this information is significant to determine training requirements).

8. Date of Program Orientation: Indicate the date the staff person completed their program orientation.

9. Date of Annual Staff Evaluation: Indicate the date the staff person was evaluated.

10. BRC Status: Indicate the status of the most recent FINGERPRINT review (Suitable or Provisional).

11. BRC Date: Indicate the date of the most recent BRC suitability determination.

12. Physical Date: Indicate the date of the most recent physical examination that is on file (update is required every two years).

13. MMR: Indicate with a √ if required MMR immunizations or evidence of immunity to mumps, measles, and rubella are on file. All educators born in or after 1957, regardless of country of birth must be able to document two doses of MMR or have serologic evidence (blood titer) of immunity to measles, mumps, and rubella. Those born before 1957 in the U.S. are considered to be immune. Those born before 1957 in countries other than the U.S. must be able to document one dose of MMR or have serologic evidence (blood titer) of immunity to measles, mumps, or rubella.

**CERTIFICATIONS AND LICENSES**

1. Qualifications/Certificate or Education/Verification of Experience: Large and Small Group and: Indicate staff person’s qualifications level (including OFC/OCCS/EEC certificate number if on file at the Center). If there is no certificate, please indicate that the person has met the EEC hiring requirements/ Qualification protocols

2. EEC PQ Registry: Indicate the expiration date noted on the staff person’s registry account.

3. First Aid Date: Indicate the expiration date noted on the most recent first aid certificate. Please note that certificate expiration dates may have been extended by the training entity.

4. CPR Date: Indicate the expiration date of the most recent CPR certificate. Please note that certificate expiration dates may have been extended by the training entity. CPR certificates no longer have to be renewed annually, but on the expiration date.

5. 7-D/School Bus Licenses: Indicate the expiration date of the D/School Bus Licenses. Please note the license expiration dates have been extended by the Registry of Motor Vehicles.

**PROFESSIONAL DEVELOPMENT**

1. “EEC Essentials” Trainings: Indicate date on which staff completed the 12 trainings. New staff hired as a part of the reopening process have until 9/30/2020 to complete the training. **Please note: The annual EEC Essentials *re-training* requirements are no longer applicable. Only the initial EEC Essentials training requirements apply.**

2. Number of Professional Development Hours: Indicate the date the training requirements below were completed. **Please note:** The Medication Administration and Safe Sleep renewal training requirements may not be met through the EEC Essentials Trainings. During the COVID-19 State of Emergency, online coursework offered through the American Academy of Pediatrics may be used to satisfy these requirements.

**Small Group and School Age Child Care [See 606 CMR 7.09(16)(c)]\***

Educators in small group and school age child care must complete 10 hours of professional development activities per year.

**Large Group and School Age Child Care [See 606 CMR 7.09(19)(b)]** **\***

1. Educators working fewer than 10 hours per week shall complete a minimum of 5 hours of professional development activities per year.

2. Educators working at least 10 but fewer than 20 hours per week shall complete a minimum of 12 hours of professional development activities per year.

3. Educators working 20 or more hours per week shall complete a minimum of 20 hours of professional development activities per year.

**\***At least one-third (1/3) of the required professional development must address diverse learners. Diverse learners are defined as, “Children who have special physical, emotional, behavioral, cognitive or linguistic needs or whose primary learning modality is visual, auditory, tactile or kinesthetic, who may require an adaptation in the environment, interaction or curriculum in order to succeed in their program.”

**Medication Administration [See 606 CMR 7.11(1)(b) 2]**

Each person who administers any medication, other than oral or topical medications and epinephrine auto-injectors, must be trained by a licensed health care practitioner and must demonstrate annually to the satisfaction of the trainer competency in the administration of such medications. An alternative method of training approved by the Massachusetts Department of Public Health (MDPH) can be substituted, with approval from MDPH.

**[EEC Infant Safe Sleep Policy]**

EEC requires that all group child care educators who work with infants renew their infant safe sleep training with each 2-year licensing cycle. This includes all staff that may provide coverage, even on an occasional basis, in an infant classroom.