

# Health and Safety Checklist

Care Staff Name:

Client Name:

Client DOB:

- Care staff was instructed on emergency procedures (fire, inclement weather, etc.).
- Care staff was provided with emergency contact numbers (e.g. local emergency services, 911, trusted relatives, etc.).
- Care staff knows location of first aid kit.
- Care staff knows location of fire extinguishers.
- Care staff are required to be CPR/First Aid Certified  Yes  No

By checking the boxes above and signing below, I attest that I have trained the care staff in these areas.

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Parent/Guardian Signature

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Date