



New York City Department of Education
Division of Early Childhood Education
Program Readiness Self-Checklist for 3-K & Pre-K
(as of 7/28/2020)

Please note all content in this document can be amended, edited or supplemented at any time.

Note: This program readiness self-checklist applies to all early childhood programs contracted by the NYC Department of Education (DOE) that provide 3-K and pre-K services during the DOE school year.
Recommendation: Complete this program readiness self-checklist before your readiness check conversation with a DECE staff member.

GENERAL REOPENING PLANS

Yes	No	<p>1. Has the program reviewed and trained their staff in all applicable guidance?</p> <ul style="list-style-type: none">• NYS June 2020 Guidance, complete an affirmation online• DOHMH Reopening NYC: Checklist for Child Care Program Guidelines• Fall 2020 Guidance for 3K and Pre-K Programs• Fall 2020 Staffing Readiness Planning Tool
Yes	No	<p>2. Has the program distributed the Family Schedule Needs Survey to assess the needs and preferences of their enrolled families?</p>
Yes	No	<p>3. Does the program expect to provide some level of “in-person learning” in September?</p> <ul style="list-style-type: none">• If No, your program must request an exemption from DOE at EarlyChildhoodPolicy@schools.nyc.gov.
		<p>4. Which learning model(s) does the program plan to use to serve children and families in the fall ? (Please check all that apply)</p> <p>Full-time in-person learning</p> <p>Full-time remote learning</p> <p>Blended Learning</p>
Yes	No	<p>5. Has the program carefully reviewed and completed the Fall 2020 Staffing Readiness Planning Tool and submitted the accompanying survey?</p> <ul style="list-style-type: none">• Priority deadline of Friday, July 31: We encourage you to submit your completed survey as quickly as possible, especially if you are interested in providing additional slots in Fall 2020. We will review survey results and reach out to interested programs on a rolling basis.• Final deadline of Friday, August 7 <p>If No</p> <ul style="list-style-type: none">• Explain

STAFF & VACANCIES

Yes	No	<p>6. Has the program confirmed they will have enough qualified instructional staff (education director, lead teachers, assistant teachers, aides) for their planned learning models?</p> <p>If Yes</p> <ul style="list-style-type: none"> • If the program is providing any full-time remote learning services, ensure that the program has identified a remote learning coordinator. This person should be qualified to serve as a lead teacher (e.g., certified, or has a bachelor's degree and is on a study plan for certification). <p>If No</p> <ul style="list-style-type: none"> • How many vacancies does the program need to fill? This should not include staff who have received medical accommodations to work remotely; these staff should remain on the program's payroll and DOE budget, and should be assigned remote learning responsibilities. • Does the program need assistance filling instructional staff vacancies? [If so, please email Teacher Recruitment & Quality (TRQ) teachnycprek@schools.nyc.gov or call 718-935-4627]
Yes	No	<p>7. Has the program confirmed they will have enough administrative staff (clerical staff, food service staff, custodial staff) for their planned learning models?</p> <p>If No</p> <ul style="list-style-type: none"> • What vacancies does the program still need to fill?
Yes	No	<p>8. Has the program identified <u>custodial or other staff</u> to clean and disinfect throughout the day and maintain a cleaning and disinfection log on site?</p>
Yes	No	<p>9. Does the program plan to have a nurse on-site?</p> <p>If No</p> <ul style="list-style-type: none"> • Is there at least one staff member certified in first aid & CPR on site? • Has the program identified a site safety monitor to oversee daily staff and child health checks and track all people entering the facility?
Yes	No	<p>10. Does the program plan to have a mental health professional (social worker, psychologist, therapist, counselor, etc.) on site?</p>
Yes	No	<p>11. Have all your existing staff been fingerprinted and cleared through PETS, DOI or IdentoGO?</p> <p>If No</p> <ul style="list-style-type: none"> • Explain

STAFF & VACANCIES - Cont.

Yes	No	12. Does the program have cleared substitutes available to support expected or unexpected absences, and maintain adequate staff coverage for in-person services?
Yes	No	13. Has the program posted this Staff Self-Care Checklist in all classrooms, and shared the THRIVENYC checklist with all staff members to support them in their self-care during this potentially stressful time of reopening?

BUILDING

Yes	No	<p><u>General</u></p> <p>14. Does the program have exclusive use of your facility?</p> <p>If No</p> <ul style="list-style-type: none"> • Has the program ensured that anyone sharing the space will adhere to State and City health and safety requirements?
Yes	No	<p><u>Major Hazards</u></p> <p>15. Are there any major health and safety hazards on the interior or exterior of the site, including peeling paint and mold? (Includes classrooms, restrooms, administrative offices, kitchen/food service area, multi-purpose room, outdoor play space, if applicable)</p> <p>If Yes</p> <ul style="list-style-type: none"> • Where did you see the issue, how serious is it, and what is your plan to address it?
Yes	No	<p><u>Construction</u></p> <p>16. Is there any construction work on site?</p> <p>If Yes</p> <ul style="list-style-type: none"> • What work is taking place? • What is the anticipated completion date? <p><u>Floor(s)</u></p> <p>17. On what floor(s) are the classrooms located (including DOE and non-DOE classrooms)? Check all that apply.</p> <p>First Floor</p> <p>Second Floor</p> <p>Third Floor</p> <p>Fourth Floor</p> <p>Basement (an enclosed space that is up to 1 story below ground level)</p> <p>Cellar (an enclosed space that is more than 1 story below ground level)</p> <p>Basement or Cellar (unable to determine if more than 1 story below ground level)</p> <p>Other</p>

BUILDING - Cont.

		<p>18. What floor(s) does the provider occupy for non-classroom uses, including administrative offices and kitchen)? Check all that apply.</p> <p>First Floor Second Floor Third Floor Fourth Floor Basement (an enclosed space that is up to 1 story below ground level) Cellar (an enclosed space that is more than 1 story below ground level) Basement or Cellar (unable to determine if more than 1 story below ground level) Other</p>
Yes	No	<p><u>Elevator(s)</u></p> <p>19. Is there an elevator(s) used for daily (early childhood) operations (i.e. that teachers and children use)?</p> <p>If Yes</p> <ul style="list-style-type: none">• Does the elevator device have a door lock monitoring system?
Yes	No	<p><u>Entrances & Exits</u></p> <p>20. Are all means of egress (entrances/exits) unlocked and unblocked - i.e., "openable" from the inside without a key at all times?</p>
Yes	No	<p><u>Fire Alarm System</u></p> <p>21. Does the program have a fire alarm system?</p> <p>If No</p> <ul style="list-style-type: none">• Explain <p>If Yes</p> <ul style="list-style-type: none">• What type of fire alarm system? (check one) Pull Station Central Monitoring System Other: _____• If the program has a central monitoring system, is the system in working condition?
Yes	No	<p><u>Windows</u></p> <p>22. Are all windows above the first floor that are accessible to children, other than those identified for emergency evacuation, protected by permanent barriers or restrictive locking devices that prevent a window from opening fully?</p>
Yes	No	<p><u>Plumbing</u></p> <p>23. Has the program periodically flushed water taps over the last few months?</p> <p>If No</p> <ul style="list-style-type: none">• Programs are reminded to flush all faucets for at least 10 minutes prior to reopening (5 to 10 days prior to resuming any child care).

HEALTH & SAFETY

Yes	No	<u>Cleaning and Health Supplies</u> 24. Do you have sufficient supplies for cleaning and disinfection? Note: Use EPA-registered sanitizers and disinfectants effective against COVID-19.
Yes	No	25. Do you have sufficient health and protective equipment on site (e.g., face coverings for all staff, thermometer, gloves)?
Yes	No	<u>Toxic Materials</u> 26. Are there any toxic or poisonous materials or materials labeled “keep out reach of children” (e.g., cleaning materials, bleach, detergents, matches, lighters, medicines) that are not stored in their original containers and are currently unlocked/accessible to children?
Yes	No	<u>Sinks</u> 27. Is there a sink or washing station in each classroom? If No, <ul style="list-style-type: none">• How many DOE-funded (including EarlyLearn) classrooms do not currently have a sink or washing stations inside the classroom?
Yes	No	<u>Safety Plans</u> 28. Does your program have a site-specific revised (written) health & safety plan reflecting existing Article 47 and new COVID-19 requirements?
Yes	No	29. Has your program completed and posted the NYS Business Reopening Safety Plan Template (in addition to the safety plan referenced above)?
Yes	No	<u>Isolation Space</u> 30. Has your program identified an isolation space for any individuals who develop symptoms of illness during the day? If Yes <ul style="list-style-type: none">• Did the program identify who the escort will be?
Yes	No	<u>Vaccination and Medical Requirements</u> 31. Has the program ensured all children have the following before resuming in-person learning? Current Emergency Contact Card Current medical form (within 12 months of the date of re-entry) Proof of completed immunizations, based on the age; Children must meet at least the provisional vaccination requirements (1 dose from each series) to begin on-site services, and continue to obtain vaccinations based on the “catch-up” schedule Written consent for staff to act and obtain appropriate health care in the event of an emergency.

GROSS MOTOR / OUTDOOR PLAY

Yes	No	38. Does the program have plans to provide children with opportunities for gross motor activities? If Yes <ul style="list-style-type: none">Describe (e.g., exclusive outdoor play area, large indoor play area, etc.).
Yes	No	39. Does the program have an outdoor play space on the roof? If Yes <ul style="list-style-type: none">Is there a fence of at least 10 feet tall with a 45 degree angular top?

KITCHEN / FOOD

Yes	No	40. Has the program discarded perishable food from the Kitchen Area, and reviewed the expiration dates of all stocked items?
Yes	No	41. What is the program's plan for providing individual meals (non-family style)? (Check one) Plan to purchase vended meals/snacks Plan to prepare meals/snacks on site Do not know / Do not have a plan
Yes	No	42. Does the food service prep area have the equipment it needs to support its meal plan (e.g., refrigerator, sink)?
Yes	No	43. Is there at least one staff member certified in food protection that will oversee food service onsite? If No <ul style="list-style-type: none">Is there a plan for a staff member to obtain a food protection certification before reopening?

TECHNOLOGY

Yes	No	<u>On-site Tech</u> 44. Does the program have a working administrative (i.e., not for child use) computer with internet and access to PreKIDS/WES?
Yes	No	45. Is the phone system operational (with voicemail)?
Yes	No	46. Does the program have access to a working printer (including any working multi-functional devices that can be used for printing) that staff members can use daily?

TECHNOLOGY - Cont.

Yes	No	<u>Remote Tech</u>									
		47. Does all your instructional staff have a computer device in which they can use to work remotely?									
Yes	No	48. Do all your instructional staff have internet access in their homes (or will they have internet access) so they can work remotely?									
Yes	No	49. Do all of your enrolled children and families have a device which they can use to learn remotely?									
Yes	No	50. Do all of your enrolled children and families have internet access in their homes (or will they have internet access) so they can learn remotely?									
Yes	No	51. What video-conferencing platform(s) does your program plan to use to connect with children in your program? (Check all that apply)									
		<table> <tr> <td>Zoom</td> <td>Class Dojo</td> <td>Other:</td> </tr> <tr> <td>Google Meets</td> <td>FaceTime</td> <td></td> </tr> <tr> <td>Seesaw</td> <td>WhatsApp</td> <td></td> </tr> </table>	Zoom	Class Dojo	Other:	Google Meets	FaceTime		Seesaw	WhatsApp	
Zoom	Class Dojo	Other:									
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Seesaw	WhatsApp										

OTHER

Yes	No	52. Are there any other critical issues that you or the program would like to note that could impact reopening?
		<p>If Yes</p> <ul style="list-style-type: none"> Explain
Yes	No	53. What kind of additional supports do you anticipate your program needing when in-person services resume? (Check all that apply)
		Implementation of health and safety practices related to COVID-19 Scheduling and staffing related to learning models Trauma-informed care training, resources, and support Communication to families (including communication in other languages) Supports for families of children with special needs Technology resources and supports for staff and families Other:
Yes	No	54. Has your program engaged families with Ready4K - a free, family engagement curriculum resource offered by DECE to programs and families? [For more details: visit the Early Childhood: Learn at Home page or email nyc@ready4k.com].

Program Readiness Self-Check Completion

Completed by: _____ Date: _____

Role: _____

For any questions, please contact: PreKWalks@schools.nyc.gov