

**Georgia Asthma Control Program
Asthma-Friendly Childcare Center Recognition Signature Form**

To complete this form, the center administrator's signature is required on all items. Please FAX or Scan and Email completed form to 404-657-4338 or dph-asthmaprogram@dph.ga.gov.

Center Name:		County:	
Address:		City:	Zip:
Phone:	Fax:	Number of Children:	Number of Staff:

Recognition Level	Recognition Requirement	Signature of Person Certifying Completion	Date Completed
BRONZE	1. Asthma Leadership Team: Childcare center/ Head Start has a small team to assess, improve, and monitor asthma management activities. Team must include Center Director	(Administrator's Signature)	
	2. Staff Training: 60% of staff <i>and</i> at least one administrator received a certificate of completion for the Foundations of Asthma Management course (Covers asthma basics and practices for operating an asthma-friendly childcare center) <i>Total number of staff</i> _____ <i>Number that participated</i> _____	(Administrator's Signature)	
	3. Asthma Action Plans and Parent Communication: At least 70% of children with asthma at the center have an Asthma Action Plan on-file. <i>Number with Asthma</i> _____ <i>Number with Asthma Action Plan</i> _____	(Administrator's Signature)	
	4. Childcare providers use daily communication tools to communicate asthma symptoms with parents as needed.	(Administrator's Signature)	
	5. Staff Awareness: The following posters are displayed at center. 1. Steps to follow for an Asthma Episode in a Childcare Center 2. Common Asthma Triggers 3. Top Ten Actions to Reduce Asthma Triggers	(Administrator's Signature)	
SILVER	6. Additional Education: Asthma Leadership team has received a certificate of completion for the Understanding Medications and Devices course (Cover recognition of asthma medications and proper use of asthma spacers, metered dose inhalers, nebulizers and other devices). <i>Number on Asthma Leadership Team that participated:</i> _____ <i>out of</i> _____ (total # on team)	(Administrator's Signature)	
	7. Environmental Monitoring: Center staff completed the Environmental Triggers Assessment, with at least 80% of items checked "O.K.". [Submit original copy with this form]	(Administrator's Signature)	
	8. Additional Staff Training: At least 80% staff at the center received a certificate of completion for the Foundations of Asthma Management course (Covers asthma basics and practices for operating an asthma-friendly childcare center) <i>Total number of staff</i> _____ <i>Number that participated</i> _____	(Administrator's Signature)	
	9. Parent training: Educational opportunities offered to parents on asthma awareness and management.	(Administrator's Signature)	
GOLD	10. Air Quality Plan and Practices: Contingency plans have been documented to address days when air quality is poor. [Submit a copy of protocol]	(Administrator's Signature)	
	11. Air Quality communication: Center staff receives alerts about local air quality (ie. Aimow.gov) and has a documented protocol (ie. Air Quality Flag Program) to communicate air quality throughout the center. [Submit summary of communication plan]	(Administrator's Signature)	
	12. Additional actions: Center has taken have been taken to improve indoor air quality. [Submit description of actions taken]	(Administrator's Signature)	
	13. Additional Education: Asthma Leadership team has received a certificate of completion for the Creating an Asthma Friendly Environment course (Cover recognition of asthma medications and proper use of asthma spacers, metered dose inhalers, nebulizers and other devices). <i>Number on Asthma Leadership Team that participated:</i> _____ <i>out of</i> _____ (total # on team)		
PLATINUM	14. Asthma Policy / Procedure: Center adopted policies or procedures incorporating annual requirements for all items listed above (at minimum). 15. Additional Policies: Center has adopted comprehensive Asthma Friendly Childcare Center Policies. [Submit a copy of your center's policy and practices document with this form]	(Administrator's Signature)	

