

# Choose Safe Places

## What is Choose Safe Places?

The Wisconsin Department of Health Services (DHS) Choose Safe Places Program offers **FREE** consultation services to help voluntarily participating child care providers keep children safe from toxic chemicals and other hazards in the environment.

Choosing a safe place for your child care center is essential. There's more to consider than cost and classroom size!

## Why should I participate in Choose Safe Places?

The Wisconsin Department of Children and Families requires every licensed or certified child care program to comply with safety regulations. Some of these regulations reduce chemical exposure, like safe handling and storage of hazardous materials and required testing of private well water.

The DHS's Choose Safe Places Program builds on these protections. Choose Safe Places helps participating providers check for chemical contamination and other environmental hazards when they choose a new location.



## What can I expect from participation?

After you complete and submit a Property Checklist\* (see Page 2), Choose Safe Places will assess the location of your proposed child care center for potential environmental hazards. We will then send you a report with findings and recommendations. Providers can use this information to make healthier spaces for their children and staff. Some of the environmental hazards Choose Safe Places looks for include:

Children are more sensitive to the effects of harmful substances in the environment. That's why it's important to protect them!



Previous uses of the property that might have left behind harmful chemicals.



Lead in paint.



Movement of harmful chemicals onto the property from other properties.



Contaminants in drinking water.

**\*Legal Disclaimer:** Responses to the Property Checklist are provided as general guidance only and to increase overall safety awareness. This information is not intended to constitute legal or medical advice and you should use it at your own risk. DHS accepts no responsibility or liability for damages arising from use of this information. If a more thorough investigation of the property is warranted, the user should seek the advice of appropriate professionals. DHS does not make any warranty, express or implied; assume any legal liability for the accuracy, completeness, or usefulness of any information herein; represent that its use would not infringe privately owned rights; nor assume any liability with respect to the use of, or for damages resulting from the use of any information, method, or process disclosed in this publication.



Ready to participate? See Page 2! 

## I want to participate. Now what?

Simply complete the Property Checklist below and mail this form to:

DHS Choose Safe Places Program  
ATTN: Amanda Koch - Room 150  
1 West Wilson Street  
Madison, WI 53703

Questions about this program? Give us a call at 608-266-1120 or email us at [DHSEnvHealth@dhs.wi.gov](mailto:DHSEnvHealth@dhs.wi.gov).



You can also complete and submit the Property Checklist online by visiting [dhs.wisconsin.gov](https://dhs.wisconsin.gov) and searching "Choose Safe Places" or by emailing the completed form to [DHSEnvHealth@dhs.wi.gov](mailto:DHSEnvHealth@dhs.wi.gov).

# The Property Checklist

## 1 YOUR CONTACT INFORMATION Please write clearly!

Your name: \_\_\_\_\_ Your phone number: \_\_\_\_\_

Your email address: \_\_\_\_\_

Your mailing street address: \_\_\_\_\_

City: \_\_\_\_\_ State: WI Zip code: \_\_\_\_\_

## 2 INFORMATION ABOUT YOUR PROPOSED CHILD CARE CENTER

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: WI Zip code: \_\_\_\_\_

Will this center operate inside a home?  Yes  No

Will you rent or own the space for your center?  Rent  Own

Approximately how many children do you plan to serve? \_\_\_\_\_

Did this property ever have an environmental assessment?  Yes  No  Not sure

When was the building constructed?  1979 or before  1980-1986  1987-present  Not sure

What type of water system will supply the property?  Municipal/public  Private well  Not sure

How was the space used previously (e.g., dental office, bar, church, nail salon)? \_\_\_\_\_

## 3 DO YOU HAVE ANY ENVIRONMENTAL HEALTH QUESTIONS OR CONCERNS?

We will address your questions and concerns in your report or with a phone call.

\_\_\_\_\_  
\_\_\_\_\_

