

Statement of Deficiencies

1501.A.: Operations

Not Met

1501.A.: A center shall operate within the licensed capacity, age range, hours of operation and other specific services designated on its license.

Finding:

1501.A.: Based on record review on 1/14/19, S1 did not notify the Licensing Section prior to making changes that had an effect on the license as the provider failed to operate within the licensed capacity as LS observed the center's licensing capacity is 15. LS observed the following on the children daily attendance logs:

- 1/7/19: 16 children arriving from 9:29 am - 3:00 pm
- 1/8/19: 22 children arriving from 8:50 am - 2:58 pm
- 1/9/19: 18 children arriving from 7:00 am - 3:00 pm
- 1/10/19: 17 children arriving from 8:47 am - 3:00 pm
- 1/11/19: 19 children arriving from 8:25 am - 3:00 pm

1507.A.: Daily Attendance Records - Children

Not Met

1507.A.: A daily attendance record for children shall be maintained that shall:

1. include the child's first and last name, arrival and departure times, and first and last name of person or entity to whom the child is released;
2. accurately reflect children on the center premises at any given time; and
3. be used to sign in and out if a child leaves and returns to the center during the day.

Finding:

1507.A. Based on record review on 1/14/19, the daily attendance log for children did not include the time of departure of each child and the name of the person to whom the child was released as LS observed the following:

On 1/10/19, 10 out of 19 children failed to have a departure time and 15 out of the same 19 failed to have the name of the person to whom the child was released to.

On 1/11/19, 13 out of 17 children failed to have a departure time and 15 out of the same 17 failed to have the name of the person to whom the child was released to.

1515.A.1.: Child Records and Cumulative Files

Not Met

1515.A.1.: A cumulative file shall be maintained on each child that shall include the following records:

1. An information form signed and dated by the parent and updated as changes occur, that contains:
 - a. name of child, date of birth, sex, date of admission;
 - b. name of parents and the home address of both child and parents;
 - c. phone numbers where parents may be reached while child is in care;
 - d. name and phone number of person to contact in an emergency if parents cannot be located promptly;
 - e. name and telephone number of child's physician, if applicable;
 - f. name and telephone number of the child's dentist, if applicable;
 - g. any special concerns, including but not limited to allergies, chronic illnesses, and any special needs of the child, if applicable;

Finding:

1515.A.1.a. Based on record review on 1/14/19, 1 of 5 children's records reviewed lacked the required information on the Child's Information Form as the following information was omitted birth date as LS observed this information was omitted for C5.

Statement of Deficiencies

1711.A.&B.&D.&G.: Child to Staff Ratio

Not Met

1711.A.&B.&D.&G.: A. Child to staff ratios are established to ensure the safety of all children.

B. Minimum child to staff ratios shall be met at all times.

1. There shall be a minimum of two staff members present at an early learning center when more than one child is present.
2. Only those staff members directly providing care, supervision or guidance to children shall be counted in the child to staff ratios.

D. Minimum Child to Staff Ratios for Type II and Type III centers:

Ages of Children	Ratio
Infants under 1 year	5:1
1 year	7:1
2 years	11:1
3 years	13:1
4 years	15:1
5 years	19:1
6 years and up	23:1

G. Mixed Age Groups - Minimum Child to Staff Ratios

1. An average of the child to staff ratios may be applied to mixed age groups of children ages 2, 3, 4 and 5
2. Child to staff ratios for children under age two are excluded from averaging.
3. When a mixed age group includes children younger than age two, the age of the youngest child determines the child to staff ratio for the group.
4. An average may be applied to a mixed age group consisting only of children ages 5 and older.

Finding:

1711.B.1.:Based on observation on 1/14/19, S1 did not have at a minimum of 2 child care staff present at an early learning center when more than one child is present as S2 was supervising 5 children age 6 mths to 2 yrs old. LS arrived to the center at approximately 1:10 pm. LS observed S2 was the only staff member present at the center. LS informed S2 that parents were to be contacted as the center failed to have two staff members present. S2 stated she called the parents to pick up their children at approximately 1:57 pm. At 2:07 pm, S1 and S3 arrived to the center.

Based on record review on 1/14/19, LS observed 5 children signed in on the center's daily attendance log. LS observed the children were signed in at the following times:

C1 7:30 am, C2 7:30 am, C3 8:13 am, C4 8:13 am, and C5 8:44 am.

LS observed the center staff members were signed in at the following times: S2 9:02 am, S1 2:12 pm, and S3 2:03 pm.

Therefore according to the daily attendance logs child to staff ratio was not maintained and S2 was supervising children independently from 9:02 am to 2:03pm.

1713.A.&B.&C.: Supervision

Not Met

1713.A.&B.&C.:

A: Children shall be supervised at all times in the center, on the playground, on field trips, on non-vehicular excursions, and during all water activities and water play activities.

B: Children shall not be left alone in any room, (except the restroom as indicated in Subsection G), outdoors, or in vehicles, even momentarily, without staff present.

C: A staff person shall be assigned to supervise specific children whose names and whereabouts that staff person shall know and with whom the staff person shall be physically present. Staff shall be able to state how many children are in their care at all times.

Finding:

1717.B.: Based on observation on 1/14/19, children were not under supervision at all times as LS observed S2 leaving 4 children (ages 1 yr- 2yrs old) in a room alone where the children were napping, at 1:12 pm, for approximately 1 minute before walking back into the room. LS observed S2 leaving an infant in a high chair located in the entrance room to the center from 1:15 pm - 1:17 pm, before walking back into the room. At 1:33 pm, LS observed S2 leaving the room in order to answer the phone. LS observed S2 returning to the room approximately 15 seconds later.

Due to no additional staff members being present, S2 was observed leaving the room where children were located during the center visit until S1 and S3 arrived to the center.

Statement of Deficiencies

1723.A.&B.: CPR Certification

Not Met

1723.A.&B.: A. Infant and child CPR. Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in infant and child CPR through training approved by the department.

B. Adult CPR. Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in adult CPR through training approved by the department.

Finding:

1723.A.&B.: Based on record review on 1/14/19, S1 did not have documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in infant and child CPR through training approved by the department as S2 was observed as the only staff member present and failed to have infant and child CPR training. 0 of 1 staff had documentation of this certification.

Based on record review on 1/14/19, S1 provides care for children eight years and older and did not have documentation that at least one staff member on the premises, accessible to children, was currently certified in Adult CPR through training approved by the department as S2 was observed as the only staff member present and failed to have Adult CPR. 0 of 1 staff had documentation of this certification.

1723.C.: Pediatric First Aid

Not Met

1723.C.: Pediatric First Aid. Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in pediatric first aid through training approved by the department.

Finding:

1723.C. Based on record review on 1/14/19, S1 did not have documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in Pediatric First Aid through training approved by the department as S2 was the only staff member present and failed to have Pediatric First Aid 0 of 1 staff had documentation of this certification.

1901.C.: End-of-Day Check

Not Met

1901.C.: The entire center and play yard shall be checked after the last child departs to ensure that no child is left at the center and this check shall be documented. Documentation shall include date, time of visual check, and signature of the staff conducting the visual check.

Finding:

1901.C. Based on record review on 1/14/19, S1's end of day check did not include the time of visual check and signature of the staff conducting the visual check as LS observed there was no time of visual check and signature of the staff conducting the visual check for Thursday, 1/10/19 and Friday 1/11/19. S1 stated the center was in operation on both days.

1907.A.1.&2.: High Chairs

Not Met

1907.A.1.&2.:

1. The high chair manufacturer's restraint device shall be used when children are sitting in a high chair.
2. Children who are either too small or too large to be restrained using the manufacturer's restraint device shall not be placed in a high chair.

Finding:

1907.A.1.:Based on observation on 1/14/19, the high chair manufacturer's restraint device was not used when children are sitting in a high chair as LS observed at 1:30 pm, S2 placed a child in a high chair without restraints. LS observed the child sitting in the high chair for approximately 2 minutes until S2 returned and picked up the child.

1911.E.: Daily Reports for Infants

Not Met

1911.E.: Daily Reports for Infants. Written reports that include the liquid intake, food intake, disposition, bowel movements and eating and sleeping patterns shall be given to the parents of infants on a daily basis. Reports shall be kept current throughout the day.

Finding:

1911.E. Based on interview(s) on 1/14/19, S1 lacked a daily written report for 1 of 1 infants as S2 stated she did not complete this documentation for today.

Statement of Deficiencies

1921.A.: Emergency Preparedness and Evacuation Planning

Not Met

1921.A.: Emergency and Evacuation Plan. The director shall consult with appropriate state and local authorities and shall establish and follow a written multi-hazard emergency and evacuation plan to protect children in the event of emergencies that at a minimum shall:

1. address any potential disaster related to the area in which the center is located;
2. include procedures for sheltering in place, lockdown and evacuation to a pre-determined site for potential threats to the safety, health and well-being of children in care;
3. include specific procedures for handling infants through two year olds, including food and formula;
4. include specific procedures for handling children with special needs, including the evacuation and transportation of children in wheelchairs;
5. include a system to account for all children;
6. include a system, and a back-up system, for contacting parents and authorized third party release caretakers;
7. include a system to reunite children and parents following an emergency;
8. include procedures for providing information about the emergency plan to parents at the time of enrollment and when changes occur;
9. be reviewed annually for accuracy and updated as changes occur; and
10. be reviewed with all staff at least once per year.
11. practice drills shall be conducted at least twice per year to include all children and shall be documented.

Finding:

1921.A. Based on interview(s): 1921-A Based on record review on 09/24/2018, S1 failed to have an written multi-hazard emergency and evacuation plan to include:

1. address any potential disaster related to the area in which the center is located;
2. include procedures for sheltering in place, lockdown and evacuation to a pre-determined site for potential threats to the safety, health and wellbeing of children in care;
3. include specific procedures for handling infants through two year olds;
4. include specific procedures for handling children with special needs, including the evacuation and transportation of children in wheelchairs;
5. include a system to account for all children;
6. include a system, and a back-up system, for contacting parents and authorized third party release caretakers;
7. include a system to reunite children and parents following an emergency;
8. include procedures for providing information about the emergency plan to parents at the time of enrollment and when changes occur;
9. be reviewed annually for accuracy and updated as changes occur; and
10. be reviewed with all staff at least once per year.
11. practice drills shall be conducted at least twice per year to include all children and shall be documented.

S1 stated she has yet to complete this documentation for LS to review.