

Statement of Deficiencies

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;
 - h. any special dietary needs, restrictions or food allergies or intolerances, if applicable. See Paragraph 4;

Finding:

1515.A.1. Based on record review at 10:30 am, 1 of 10 children's record reviewed did not contain a Child's Information Form as evidenced by C7's record only contained a birth certificate and a copy of her social security card.

Corrective Action Plan: S3 stated that she will review all children's records to make sure they have the needed documentation.

1719.A.&B.: Orientation Training

Not Met

1719.A.&B.: A. Within seven calendar days of the first day present at the center, and prior to assuming sole responsibility for any children, each staff member shall receive orientation to the policies and practices of the center that at a minimum shall include:

1. child abuse identification and reporting;
2. emergency preparation;
3. licensing regulations; and
4. safe sleep practices.

B. Within 30 calendar days of date of hire, each staff member shall receive orientation to the additional policies and practices of the center that at a minimum shall include:

1. child development;
2. child guidance;
3. learning activities;
4. health and safety;
5. shaken baby prevention; and
6. CPR and first aid, as applicable.

Finding:

1719.B1,4-5.: Based on record review at 11:00am, S3 failed to have documentation that 2 of 5 staff completed orientation training. S5 failed to have an orientation form at all. S4 failed to receive additional orientation for child development, health & safety, and shaken baby prevention within thirty days of date of hire 12/12/19. S3 completed the orientation with S4 during the visit as S4 arrived at 11:30am. S5 did not come in during the inspection.

Corrective Action Plan: S3 stated that she will review staff files to make sure that all information is completed accurately and timely.

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 at 11:30am, S3 failed to 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. S1, S2, and S3 took a 1st aid training course on 12/18/19 with NationalCPRFoundation, however the course is not an approved course with an approved trainer. S1, S2, and S3's 1st aid expired on 12/13/19.

Corrective Action Plan: S1 stated that she will review the approved trainer list and get a class scheduled as soon as possible.