Date - 02/03/2021 License # - 15315 Action Code - 25 - COMPLIANCE

Statement of Deficiencies

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.: Daily Attendance Records - Children: Based on record review/observations: On 2/3/2021 at 12:45pm, Specialist observed the center's daily attendance record for children did not accurately reflect the children on the child care premises at any given time as, 110 children were present and 106 children were signed in on the log. The log for S4's class included 11 of 14 children present, and S10's class included 13 of 14 children present. Corrected during Licensing inspection.

Based on record review/observations: On return visit on 2/4/2021 at 12:30pm, Specialist observed the center's daily attendance record for children did not accurately reflect the children on the child care premises at any given time as, 109 children were present and 105 children were signed in on the log. Corrected during Licensing inspection. Technical assistance was provided during a previous visit on 8/7/2020.

Corrective Action Plan: Effective 2/4/2021, S1 stated an attendance review will be conducted by 10:00am, to ensure all children present are signed in on the log. This will ensure this deficiency is not recited.

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

Not Met

1711.A.&B.&F.&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.
- F. Minimum Child to Staff Ratios for Type I centers:

Ages of Children	Ratio
Infants under 1 year	6:1
1 year	8:1
2 years	12:1
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.A.&B.&F.&G: Child to Staff Ratio: Based on observations: On 2/3/2021 at t 11:05am, S3 and S4 failed to meet the required child to staff ratio for children of the following ages: 27 children ages 3 to 4 with 1 staff. The required ratio for children of this age is 14 children per 1 staff person. Specialist observed S3 exit her classroom with 27 children, and walked to the eating tables. S4 was observed standing outside of the classroom and stated she was speaking with another staff person. Both teachers were needed inside of the classroom to meet ratio. Corrected during Licensing inspection.

Based on observations: On return visit on 2/4/2021 at 10:44am, Specialist observed 79 children ages 3 to 5 on the play yard with four staff, S3, S4, S9, and S20, before S10 and S12 arrived on the play yard at 10:50am. The required to ratio of this age group is 15 children per 1 staff person. 1 additional staff person was needed to meet ratio at all times. There were additional staff available on the premises to help meet ratio. Corrected during Licensing inspection.

Corrective Action Plan: Effective 2/4/2021, S1 stated she will conduct a meeting with all staff to review child-to-staff ratios on or before 2/12/2021 to ensure this deficiency is not recited.

Date - 02/03/2021 License # - 15315 Action Code - 25 - COMPLIANCE

Statement of Deficiencies

1915.B.&C.: Health Services - Parental Notification

Not Met

1915.B.&C.:

- B. Reporting. Incidents, injuries, accidents, illnesses, and unusual behavior shall be documented and reported to the parent no later than when the child is released to the parent or authorized representative on the day of the occurrence.
- C. Immediate Notification. The parent shall be immediately notified in the following circumstances:
- 1. blood not contained in an adhesive strip;
- 2. head or neck or eye injury;
- 3. human bite that breaks the skin;
- 4. animal bite:
- impaled object;
- 6. broken or dislodged teeth;
- 7. allergic reaction skin changes (e.g. rash, spots, swelling, etc.);
- 8. unusual breathing;
- 9. symptoms of dehydration;
- 10. temperature reading over 101° oral, 102° rectal, or 100° axillary; or
- 11. injury or illness requiring professional medical attention.

Finding:

1915.B.&C: Health Services - Parental Notification: Based on record review: At 3:30pm, Specialist reviewed records from 1/6/2021 to 2/2/2021, and observed S1 did not have documentation of immediate notification to the parent when the following occurred to a child:

- -- On 1/29/2021 at 10:45am, a child was bit in the eye by another child, and the parent was notified at 12:45pm;
- -- On 1/12/2021 at 3:10pm, a child was scratched on his cheek by a friend, and there is no documentation the parent was notified; and
- -- On 1/6/2021 at 10:50am, a child slid down a slide fast on her belly and hit her face, and the parent was notified at 12:15pm.

Additionally on 2/2/2021 at 4:10pm, a child's thumb was in the crease of the door when it was opened, and there is no documented details as to whether an injury was sustained or documentation that the incident was reported to the parent no later than when the child was released to the parent or authorized representative on the day of the occurrence.

Corrective Action Plan: Effective 2/4/2021, S1 stated he will he will conduct a meeting with all staff to review proper documentation of incident reports no later than 2/12/2021 to ensure this deficiency is not recited.

1919.D.2.: Food Service and Nutrition - Choking Hazards

Not Met

1919.D.2.: Children under age 4 shall not have foods that are implicated in choking incidents. Examples of these foods include but are not limited to: whole hot dogs, hot dogs sliced in rounds, raw carrot rounds, whole grapes, hard candy, nuts, seeds, raw peas, hard pretzels, chips, peanuts, popcorn, marshmallows, spoonsful of peanut butter, and chunks of meat larger than what can be swallowed whole.

Finding:

1919.D.2.: Food Service and Nutrition - Choking Hazards: Based on observations: Whole hot dogs are implicated in choking incidents, and are not allowed for children under age 4. At 11:05am, Specialist observed whole hot dogs being served to 25 three-year-old children. S2 stated she thought children ages 3 and older could be served whole hot dogs. S3 corrected by slicing the hot dogs lengthwise. Technical Assistance was provided during previous visit conducted on 6/10/2020.

Corrective Action Plan: Effective 2/4/2021, S1 stated he will review foods that are implicated in choking hazards with staff on or before 2/12/2021, to ensure this deficiency is not recited.

2103.D.: Vehicle Staff Not Met

2103.D.: Vehicle Staff

- 1. When transporting children under age 4, the driver and one staff person shall be in each contracted or center provided vehicle at all times.
- 2. When transporting children age 4 and older, the driver plus one staff member shall be in each contracted or center provided vehicle at all times, unless the vehicle has a communication device which allows the driver to contact emergency personnel, in which case only the driver is needed.
- 3. At least one staff member in the vehicle and accessible to children shall have current certification in infant and child CPR.

Finding:

2103.D.: Vehicle Staff: Based on record review: At 4:45pm, there was no documentation that at least one staff member in the vehicle and accessible to children had current certification in infant and child CPR. Specialist observed documentation from 9/7/2020 to 1/29/2021, that S14 and S16 documented they provided transportation in the center's van, and did not have a current certification in infant and child CPR. S14 transported the children on the following dates: 10/7/2020, 10/28/2020-10/29/2020, 11/30/2020, and 12/3/2020. S16 transported the children on the following dates: 9/14/2020,

Date - 02/03/2021 License # - 15315 Action Code - 25 - COMPLIANCE

Statement of Deficiencies

10/15/2020, 10/19/2020-10/27/2020, 10/30/2020-11/9/2020, 11/12/2020-11/24/2020, 12/1/2020-12/2/2020, 12/4/2020-12/10/2020, 12/14/2020-12/21/2020, 1/4/2021-1/15/2021, and 1/19/2021-1/29/2021.

Corrective Action Plan: Effective 2/4/2021, S1 stated he will have all staff, prior to transporting children, complete the online training with NationalCPRFoundation to become certified in infant and child CPR, to ensure this deficiency is not recited.

2103.F.: Passenger Transportation Log

Not Met

2103.F.: Passenger Log

- A current passenger log for each trip shall be used to track children and staff during transportation.
- 2. The log shall be maintained on file at the center and a copy shall be provided to the driver or monitor.
- 3. The following shall be recorded in the passenger log:
- a. date the transportation is provided;
- b. name of the child;
- c. name of driver and staff members;
- d. pick up and drop off locations;
- e. time child was placed on the vehicle;
- f. time child was released and name of the person or entity to whom child was released; and
- g. signature of staff person completing the log.

Finding:

2103.F.: Passenger Transportation Log: Based on record review: At 4:45pm, Specialist observed the transportation log failed to include the following:

- -- the time the children were placed on the vehicle;
- -- the time the children were released from the vehicle; and
- -- the name of the driver and person completing the log on 2/1/2021 and 2/2/2021. S1 stated children were transported on these dates.

Corrective Action Plan: Effective 2/4/2021, S1 stated he, S2 or Staff-in-Charge will review all bus logs for completion after the vehicle returns from the afternoon route, to ensure this deficiency is not recited.

2107.C.: Daily Transportation Visual Vehicle Check

Not Met

2107.C.: For daily transportation services, the vehicle shall have a visual passenger check made at the completion of each trip or route, prior to the staff member exiting the vehicle.

Finding:

2107.C.: Daily Transportation Visual Vehicle Check: Based on record review: At 4:45pm, Specialist observed S1 failed to document that a visual passenger check was completed on 2/1/2021 and 2/2/2021. S1 stated children were transported on these dates.

Corrective Action Plan: Effective 2/4/2021, S1 stated he, S2 or Staff-in-Charge will review all bus logs for completion after the vehicle returns from the afternoon route, to ensure this deficiency is not recited.