# Date - 02/04/2021 License # - 51172 Action Code - 5 - ANNUAL SURVEY

# Statement of Deficiencies

### 1503.A.-C.: General Liability Insurance Policy

Not Met

1503.A.-C.: A. A center shall maintain in force at all times current commercial liability insurance for the operation of the center to ensure medical coverage for children in the event of accident or injury.

- B. A center is responsible for payment of medical expenses of a child injured while in the center's care.
- C. Documentation of commercial liability insurance shall consist of the insurance policy or current binder that includes the name of the early learning center, physical address of the center, name of the insurance company, policy number, period of coverage and explanation of the coverage.

### Finding:

1503.A.-C.: Based on record review at 11:00am, S3 failed to have documentation of commercial liability insurance that includes the name of the early learning center, physical address of the center, name of the insurance company, policy number, period of coverage and explanation of the coverage. S3 made 2 calls to the insurance provider requesting documentation during the visit, however, the policy was new and still in underwriting. Last policy expired on 1/31/2021.

Corrective Action Plan: Effective 2/4/2021, S3 will ensure the center has documentation of the commercial liability insurance on file in the center for review upon request by the department.

# 1507.B.: Daily Attendance Records - Staff and Owners

**Not Met** 

1507.B.: A daily attendance record for all staff members and owners shall be maintained that shall:

- 1. include the first and last name of the staff member or owner and arrival and departure times;
- 2. accurately reflect the staff members and owners on the center premises at any given time; and
- 3. be used to document staff members and owners who leave and return to the center during the day

### Finding:

1507.B. Based on record review at 9:35am, the center's staff and owner's daily attendance record did not accurately reflect persons on the child care premises at any given time as evidenced by S2 was signed in for 7:28am, but was not present in the center when the specialist arrived at 9:30am. S2 returned to the center at 9:47am.

Corrective Action Plan: S3 stated she will ensure that the daily staff/owner attendance will be accurate and reflect the arrival/departure times on the premises at any given time during the day.

### 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
- 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.: Based on observation/record review at 9:30am, S3 failed to have at a minimum of 2 child care staff present at an early learning center when more than one child was present as S1 was supervising 9 children (C1, C2, C3, C4, C5, C6, C7, C8, and C9) ages 6 months to 5-years-old. S1 left the

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center at 9:40am. S2 advised she left the center at 9:20am and returned at 9:47am correcting the ratio.

After reviewing the children and staff attendance records, S3 failed to have 2 staff present when more than one child is present as S3 arrived at 7:14am and C2 arrived at 7:21am, C7 arrived at 7:18am, and C8 arrived at 7:18am. The next staff person, S2, did not arrive until 7:28am.

Corrective Action Plan: Effective 2/4/2021, S3 advised she will ensure that at least 2 staff persons are present when more than one child is present in the center.

## 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 of this Section or when being provided services by therapeutic professionals, as defined in §103), 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:

1713.A.&B.: Based on observation at 9:45am, children were not under supervision at all times as S1 left 8 children ages 6 months to 5-years-old (C2, C3, C4, C5, C6, C7, C8, and C9) alone in the classroom while she went into another room to retrieve a cup from a diaper bag. S1 could not see the children.

Corrective Action Plan: Effective 2/4/2021, S3 stated she will ensure that all children are supervised at all times in the center and on the playground.

## 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 at 10:00am, 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, had current certification in infant/child/adult CPR through training approved by the department. 0 of 1 staff had documentation of this certification. According to S2 she left the center at 9:20am, leaving S1 as the only staff on the premises until S2 arrived at 9:47am correcting the deficiency. S3 stated S1 has taken the training but she failed to provide verification of the training.

Corrective Action Plan: Effective 2/4/2021, S3 ensures she will have at least 50% of the staff on the premises trained in CPR. S3 made 2 calls to the provider to retrieve the certification during the inspection.

## 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 10:00am, 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, had current certification in pediatric first aid through training approved by the department. 0 of 1 staff had documentation of this certification. According to S2 she left the center at 9:20am, leaving S1 as the only staff on the premises until S2 arrived at 9:47am correcting the deficiency. S3 stated S1 has taken the training but she failed to provide verification of the training.

Corrective Action Plan: Effective 2/4/2021, S3 ensures she will have at least 50% of the staff on the premises trained in 1st Aid. S3 made 2 calls to the provider to retrieve the certification during the inspection.