

Statement of Deficiencies

1715.A.2.: Photo Identification

Not Met

1715.A.2.: Personnel files for each staff member shall be maintained at the center and shall include the following:
2. copy of a state or federal government issued photo identification;

Finding:

1715.A.2.: Photo Identification: Based on record review at approximately 3:30 PM, the center failed to have a copy of S11's state or federal government issued photo identification available for review. S6 stated S11 is ill and out on sick leave so a photo identification was not submitted for review prior to the Specialist leaving the center.

Corrective Action Plan: S6 stated S11's photo identification will be in her file and ready for review no later 2/14/2020. The center staff will obtain a copy of photo identification cards prior to sending newly hired staff for CCCBC eligibility checks.

1717.B.: Student Trainees - Records

Not Met

1717.B.: Student Trainees. The following information shall be maintained for all student trainees:

1. an application or information form with the student's name, date of birth, address and telephone number, name of the educational center and course instructor, and a job description that includes duties to be performed.
2. a list of duties performed while present at the center; and
3. documentation of a CCCBC-based determination of eligibility for child care purposes from the department.

Finding:

1717.B.: Student Trainee: Based on record review at approximately 2:15 PM, center staff failed to have a Student trainee record that included an application or information form/the student's name, date of birth, address and telephone number, name of the educational center and course instructor, and a job description that includes duties to be performed for O1. While Specialist was completing the walk through of the center she noticed that O1 was assisting a teacher, S5, carry infants back to their classroom. Specialist requested O1's file and S6 and S7 was unable to locate it. O1 also failed to have a CCCBC on the center's roster on the Department's database as of 2/5/2020. O1 left the center premises at 2:30 PM.

Corrective Action Plan: S6 stated O1's student trainee records will be located or replaced and the completion of her CCCBC will take place by 2/14/2020. S6 also stated O1 will not return to the center until all documentation is submitted to the center.

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.A.&B.: Orientation Training: Based on record review at approximately 2:30 PM, center staff failed to have documentation that 1 of 11 staff, S11, received orientation within seven days of the first day present at the center and prior to having sole responsibility for any children. S6 stated that S11 was hired on 1/27/2020 and failed to have 7-day training on or by 2/3/2020. Corrections to the orientation training sheet could not be completed due to S11 not being trained on the 7 day topics as of yet.

Corrective Action: S6 stated the 7-day training will be completed for S11 by 2/10/2020.

1903.C.: Free of Hazards

Not Met

1903.C.: Indoor and outdoor areas shall be free of hazards.

Finding:

1903.C.: Free of Hazards: Based on observations on at approximately 3:00 PM, the outdoor area was not free of hazards as evidenced by the Specialist

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observed a board missing on the deck of the play yard. The same hazard was cited previously on 11/6/19 and has failed to be corrected.

Corrective Action: S6 stated she would contact the church's maintenance department to have the problem corrected by 2/28/2020.
