

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 Specialist's review of records/interview on 2/6/2020, at 2:00pm, S1 failed to be able to provide documentation of a current insurance policy for the center. S1 stated that the policy was renewed, however the policy forms had not yet been mailed to the center. S1 was able to get a Binder Page for the updated policy from her insurance agent, but it did not contain all of the required information.

Corrective Action Plan: S1 stated that she will have the updated insurance policy records available for Specialist to review at the next licensing visit.

1509.A.9.: Electronic Devices Policy

Not Met

1509.A.9.: Electronic Devices Policy that provides that all activities involving electronic devices, including but not limited to television, movies, games, videos, computers and hand held electronic devices, shall adhere to the following limitations:

a. electronic device activities for children under age two are prohibited; and

b. time allowed for electronic device activities for children ages two and above shall not exceed two hours per day, with the exception that television, DVD, or video viewing shall be limited to no more than one hour per day;

Finding:

1509.A.9. Based on Specialist's observations on 2/6/2020, at 10:45am, S1 did not follow the center's Electronic Devices Policy as an Electronic Device was used by children under age 2. During the walk-through, Specialist observed ten 1-year olds watching television while eating lunch. Specialist advised S1 that children under age 2 are not to engage in electronic device activities, including watching television.

Corrective Action Plan: S1 stated that on 2/6/2020, she will remind staff of the policy, and ensure that children under 2 do not participate in television activities.

1917.B.: Medication Authorization - Required Container/Packaging

Not Met

1917.B.: Required Container/Packaging

1. For prescription medication to be administered at the center, the center shall maintain the original pharmacy container with the complete pharmacy label.

2. For non-prescription medication to be administered, the center shall maintain the original bottle packing for the medicine or a printed document from the manufacturer's website, which shall include the drug name and strength and clear directions for use.

Finding:

1917.B. Based on Specialist's observations/interviews on 2/6/2020, at 12:15pm, the prescription medication to be administered for C1 at the center, an EpiPen, was not in the original pharmacy container with the complete pharmacy label. It lacked the following: original pharmacy package, with prescription label, indicating who the medication was prescribed to and how to administer the medication. S1 stated that she was unaware the original package needed to be maintained, as medication typically is not administered at the center.

Corrective Action Plan: S1 stated that she would obtain the original pharmacy package for the EpiPen belonging to C1 and keep it with the medication.

1917.I.: Medication - As Needed Authorization

Not Met

1917.I.: Authorization for "as needed" prescription and non-prescription medication shall be updated as necessary or at least every six months by the parent, and shall include circumstances for administering "as needed" medication and any applicable special instructions.

Finding:

1917.I. Based on Specialist's review of records/interview on 2/6/2020, at 12:15pm, authorization from the parent for prescription medication was not secured and maintained in C1's (one-year old) file, to include circumstances for administering as needed medication and any applicable special instructions, by the parents. S1 stated that prescription medication for C1 was dropped off at the center on 1/31/2020, however she was unaware that an As Needed Authorization form was needed as well.

Corrective Action Plan: S1 stated that she would contact C1's mother on 2/6/2020, to secure the missing form, and make sure it gets updated every 6 months as necessary.

Statement of Deficiencies

1917.K.: Emergency Medication Plan and Records

Not Met

1917.K.: Emergency Medications

1. Children who require emergency medications, such as an EpiPen or Benadryl, shall have a written plan of action that shall be updated as changes occur or at least every six months, and shall include:
 - a. method of administration;
 - b. symptoms that indicate the need for the medication;
 - c. actions to take once symptoms occur;
 - d. description of how to use the medication; and e. signature of parent and date of signature.
2. Medication administration records for emergency medication shall be maintained and include the following:
 - a. symptoms that indicated the need for the medication;
 - b. actions taken once symptoms occurred;
 - c. description of how medication was administered;
 - d. signature of administering staff member; and
 - e. phone contact with the parent after administering emergency medication.

Finding:

1917.K. Based on Specialist's review of records/interview on 2/6/2020, at 12:15pm, a child who requires emergency medications, such as an EpiPen or Benadryl, did not have a written plan of action. S1 failed to secure a written emergency plan of action for an EpiPen prescribed to C1, a one-year old. S1 stated that she was unaware she was required to obtain an emergency plan, as medication is not typically administered at the center.

Corrective Action Plan: S1 stated that on 2/6/2020, she would inform C1's mother that an Emergency Medical Plan was needed, and ensure that it was secured and maintained in C1's file.

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, spoonful of peanut butter, and chunks of meat larger than what can be swallowed whole.

Finding:

1919.D.2. Based on Specialist's observations/interview on 2/6/2020, at 10:40am, S1 allowed children under age 4 to eat whole pineapple chunks, which are implicated as potential a choking hazard. Specialist discussed the pineapple chunks being potential choking hazards for children under 4 with S1, who stated that she typically purchases pineapple tidbits, but her grocery order was changed this past week.

Corrective Action Plan: S1 stated that on 2/6/2020, she would discuss with S2, the cook, the importance of ensuring that foods that are choking hazards be cut into bite-sized pieces for children under age 4.