

Statement of Deficiencies

1501.A.: Operations

Not Met

1501.A.: A center shall operate within the licensed capacity, age range, hours of operation and other specific services designated on its license.

Finding:

1501.A. Based on record review on 2/19/19, S1 did not notify the department prior to making changes that had an effect on the license as S1 failed to operate within the licensed capacity as LS observed the center's licensing capacity is 15. LS observed the following on the children daily attendance logs:

- 1/15/19: 18 children arrived from 7:18 am - 3:00 pm
- 1/16/19: 17 children arrived from 9:00 am - 3:00 pm
- 1/23/19: 16 children arrived from 7:18 am - 2:51 pm
- 1/24/19: 18 children arrived from 8:35 am - 3:02 pm

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. Based on record review/interview(s) on 2/19/19, the daily attendance log for children did not include the time of departure of each child and the name of the person to whom the child was released to as LS observed the following:
On 1/18/19, 7 out of 14 children failed to have departure times and 12 out of 14 failed to have the name of the person to whom the child was released to.

Based on interviews on 2/19/19, S1 lacked documentation of a daily attendance record for children that included the time of arrival and departure of each child and the first and last name of the person to whom the child was released as LS requested all daily attendance logs from 1/15/19 - 2/19/19. S1 provided all daily attendance logs except 1/29/19 - 1/31/19. S1 stated she was unable to locate this information for LS to review.

LS also observed S2 failed to ensure that C1 was signed in on today's daily attendance log as LS observed C1 was not signed in during the center visit.

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 interview(s) on 2/19/19, S1 did not maintain documentation of a daily attendance record for Staff and Owners, to include the time of arrival and departure as LS requested the staff and owner daily attendance from 1/15/19 - 2/19/19, S1 stated she was unable to locate this information for LS to review. S1 did provide S2's daily attendance for 2/18 and 2/19 during the center visit.

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 observation/interview(s) on 2/19/19, S1 did not 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 infant and child CPR through training approved by the department as S2 was observed as the only staff member present and failed to have infant and child CPR training. 0 of 1 staff had documentation of this certification. S1 stated S2 still did not have child CPR training.

Based on observation/interview(s) on 2/19/19, S1 provides care for children eight years and older and did not have documentation that at least one staff

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member on the premises, accessible to children, was currently certified in Adult CPR through training approved by the department as S2 was observed as the only staff member present and failed to have Adult CPR. 0 of 1 staff had documentation of this certification. S1 stated S2 still did not have Adult CPR.

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 observations/interview(s) on 2/19/19, S1 did not 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 as S2 was observed the only staff member present upon LS arrival to the center. 0 of 1 staff had documentation of this certification.

1901.C.: End-of-Day Check

Not Met

1901.C.: The entire center and play yard shall be checked after the last child departs to ensure that no child is left at the center and this check shall be documented. Documentation shall include date, time of visual check, and signature of the staff conducting the visual check.

Finding:

1901.C. Based on record review on 2/19/19, S1's end of day check did not include the date, time of visual check, signature of the staff conducting the visual check as LS observed S1 failed to ensure that the following was documented on the center's Visual Check form:

1/18/19, failed to include the time of the visual check.

1/23/19, failed to include the time of visual check and signature of staff conducting the visual check.

1/24/19 - 1/25/19, failed to include date, time of visual check, and signature of the staff conducting the visual check.

1/28/19 - 2/1/19, failed to include date, time of visual check, and signature of the staff conducting the visual check.

2/15/19, failed to include date, time of visual check, and signature of the staff conducting the visual check.

2/18/19, failed to include date, time of visual check, and signature of the staff conducting the visual check.

S1 stated that the center was in operation during the above dates.

1921.A.: Emergency Preparedness and Evacuation Planning

Not Met

1921.A.: Emergency and Evacuation Plan. The director shall consult with appropriate state and local authorities and shall establish and follow a written multi-hazard emergency and evacuation plan to protect children in the event of emergencies that at a minimum shall:

1. address any potential disaster related to the area in which the center is located;
2. include procedures for sheltering in place, lockdown and evacuation to a pre-determined site for potential threats to the safety, health and well-being of children in care;
3. include specific procedures for handling infants through two year olds, including food and formula;
4. include specific procedures for handling children with special needs, including the evacuation and transportation of children in wheelchairs;
5. include a system to account for all children;
6. include a system, and a back-up system, for contacting parents and authorized third party release caretakers;
7. include a system to reunite children and parents following an emergency;
8. include procedures for providing information about the emergency plan to parents at the time of enrollment and when changes occur;
9. be reviewed annually for accuracy and updated as changes occur; and
10. be reviewed with all staff at least once per year.
11. practice drills shall be conducted at least twice per year to include all children and shall be documented.

Finding:

1921.A. Based on record review on 2/19/19, S1 failed to have a written multi-hazard emergency and evacuation plan to include the following:

1. address any potential disaster related to the area in which the center is located;
2. include procedures for sheltering in place, lockdown;
3. include specific procedures for handling infants through two year olds;
4. include specific procedures for handling children with special needs, including the evacuation and transportation of children in wheelchairs;
5. include a system to account for all children;
6. include a system, and a back-up system, for contacting parents and authorized third party release caretakers;
7. include a system to reunite children and parents following an emergency;
8. include procedures for providing information about the emergency plan to parents at the time of enrollment and when changes occur;