

Statement of Deficiencies

713.A.: Office of Public Health, State Fire, City Fire Approval

Not Met

713.A.: Annual licensing inspections by the department, current approvals by the Office of Public Health, Office of State Fire Marshal, and city fire (if applicable), and academic approval by the department (if type III center) shall be required before the expiration of an existing license. However, if a center has documentation establishing that the center requested an inspection by the Office of Public Health or the Office of State Fire Marshal prior to the expiration of the existing license, these approvals may be submitted to the department within 90 calendar days of the date of the license renewal.

Finding:

713.A. Based on record review at 10:22am, S1 failed to have a current annual inspection and approval from the Office of Public Health and City Fire. S1 provided documentation that an annual inspection from Office of Public Health was conducted on 1/30/2020, however did not receive an approval. S1 stated City Fire has not conducted an annual inspection, and the date of the last approval expired on 2/28/2020. The Specialist observed S1 contact City Fire during the visit, and was told that someone would come out this afternoon.

Corrective Action Plan: Effective 3/5/2020, S1 stated she will contact Office of Public Health and City Fire, at least one month prior to the expiration of the inspection, to ensure the center has a current annual inspection at all times.

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/observations at 9:47am, S1 failed to have a staff and owner's daily attendance record that accurately reflect persons on the child care premises at any given time, as 16 staff were present and 14 staff were signed in. There was no documentation of the arrival time for S8 and S11. S8 stated she arrived at 7:00am, and S11 stated she arrived at 8:00am. This was corrected during the visit.

Corrective Action Plan: Effective 3/5/2020, S1 stated she will post a red or yellow sign near the entrance today, to remind staff to sign in at arrival. S1 also stated she will have S16 or S17 remind staff on a daily basis as well.

1507.E.: Daily Attendance Records - Visitors

Not Met

1507.E.: A daily attendance record for all visitors to include the name, date of visit, arrival and departure times, and the purpose of the visit.

Finding:

1507.E. Based on record review at 1:04pm, S1 failed to have a daily attendance record for all visitors that include the departure times, and the purpose of the visit for the following:

- There is no departure time for O1 on 1/17/2020.
- There is no departure time for O2 on 1/24/2020 and 2/13/2020.
- There is no departure time for O3, O4, and O5 for 1/27/2020.
- There is no departure time for O6 on 2/10/2020.
- There is no departure time for O7 on 2/12/2020.
- There is no departure time for O8 on 2/19/2020.

S1 stated she or S14 normally remain with visitors, and have them sign in and out.

Corrective Action Plan: Effective 3/5/2020, S1 stated she and S14 will verbally remind all visitors to make sure to sign in and out, in an effort to ensure the attendance record is accurate.

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 at 9:48am, S1 failed to have an end-of-day check that included the time of visual check, and signature of the staff conducting the visual check for the following:

- There is no documentation of the time the visual check was conducted on 2/21/2020, 2/12/2020, and 1/14/2020.
- There is no documentation of the time the visual check was conducted, and no signature of the staff conducting the visual check on 1/10/2020.

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Corrective Action Plan: Effective 3/5/2020, S1 stated she will create a closing checklist, that includes the end-of-day check, to remind the closing staff member to conduct and document the visual check daily.

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;
5. 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.C. Based on record review at 10:43am, S1 failed to have documentation of immediate notification to the parent when the following occurred to a child:

- On 2/20/2020, a head injury occurred at 10:50am, and there is no documentation of the time the parent was notified.

S1 stated she remembered the incident, and that the parent was notified timely, however there was no documentation of the notification.

Corrective Action Plan: Effective 3/5/2020, S1 stated she will have a staff meeting today to remind staff to properly document all incidents that occur, including the time of parental notification.