

Statement of Deficiencies

713.A: Office of Public Health, State Fire, City Fire, Office of Early Childhood approval

Not Met

713.A: Current approvals by the Office of Public Health, Office of State Fire Marshal, City Fire (if applicable), Office of Early Childhood and the Licensing Division shall be required before the expiration of an existing license.

Finding:

713.A Based on record review: The Provider lacked documentation of a current annual inspection and approval from Office of Public Health. The date of the last approval is 02/03/2016.

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:

A computer sign in/out procedure is used and the record did not accurately reflect the time of departure of each child and the name of the person to whom the child was released for 15 of 15 children from 02/01/2017 to 03/06/2017.

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 2 and above shall not exceed 2 hours per day.

Finding:

1509-A.9 Based on observations: The center did not follow the Electronic Devices Policy as a television was observed to be used by a child under age 2. On 03/08/2017, during the night time visit, specialist observed S6 allow C6 to be in the same classroom where C2 and C5 were watching television.

1715-A.5: State Central Registry

Not Met

1715-A.5: Personnel files for each staff member shall be maintained at the center and shall include the following: documentation of a current, completed state central registry disclosure form indicating no justified (valid) finding of abuse or neglect by the DCFS, or a current determination from the DCFS indicating that the individual does not pose a risk to children.

Finding:

1715-A.5 Based on record review: Provider failed to have documentation of a completed state central registry disclosure form (SCR 1) on site and available for review at the center prior to a previously completed form expiring (1705.B). 2 of 6 staff, S2 (expired 2/24/2016) and S4 (expired 3/2/2016) failed to have documentation of the completed form. S2 and S4 completed a new form effective 3/7/2017 during licensing visit.

1719-A.-B.: Orientation Training

Not Met

1719-A.-B.: Within seven calendar days of date of hire, 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,

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;

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Finding:

1719-A.-B. Based on record review: Provider lacked documentation, due to using an old orientation form, that 2 of 6 staff, S2 and S4, received orientation within seven days of date of hire to include the following topics: safe sleep. Provider lacked documentation, due to using an old orientation form, that 2 of 6 staff, S2 and S4, received additional orientation within thirty days of date of hire to include the following topics: child development; child guidance; learning activities; health and safety; shaken baby prevention.

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.

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.

Finding:

1723-A.&B.: Based on record review, observation, and interview: The Provider 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. During the night visit on 03/08/2017, although 1 of 2, staff had documentation of this certification, S6 was observed to be the only caregiver at the day care center from 9:15pm to 9:39pm. S6 stated she allowed S4 to go home for the evening approximately 35 minutes before the specialist entered the day care center for the licensing visit. S6 does not have current certification in infant and child CPR. When S4 returned to the center at 9:39pm, her certification in Infant and child CPR corrected the requirement of the center having at least 50% of all staff on the premises and accessible to the children with current certification.

1723-C.-D.: Pediatric First Aid

Not Met

1723-C.-D.:

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.

D. Certification - A copy of the certification for each such staff member shall be on-site at all times and available for inspection by the Licensing Division.

Finding:

1723-C.-D. Based on record review, observation, and interview: After July 1, 2016 - The center 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. During the night visit on 03/08/2017, although 1 of 2, staff had documentation of this certification, S6 was observed to be the only caregiver at the day care center from 9:15pm to 9:39pm. S6 stated she allowed S4 to go home for the evening approximately 35 minutes before the specialist entered the day care center for the licensing visit. S6 does not have current certification in Pediatric First Aid. When S4 returned to the center at 9:39pm, her certification in Pediatric First Aid corrected the requirement of the center having at least 50% of all staff on the premises and accessible to the children with current certification.

1905-B.2&.3: NTC - Staff to Child Ratio

Not Met

1905-B.2&.3: 2. In addition to meeting all required staff to child ratios in §1711, there shall always be a minimum of two staff members present;
3. Staff counted for purposes of meeting child to staff ratio shall be awake;

Finding:

1905-B.2&.3: 2. Based on observation and interview: The Center did not have a minimum of two staff present. Specialist observed S6 to be the sole caregiver for three children aged infant to four years old during the night care visit on 03/08/2017 from 9:15pm to 9:39pm. S6 stated she allowed S4 to go home for the evening approximately 35 minutes before the specialist entered the day care center for the licensing visit. S6 called and requested S4 to return to the center. When S4 returned to the center at 9:39pm, her presence corrected the requirement of the center always having a minimum of two staff members present.

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1907-A.1-2: High Chairs

Not Met

1907-A.1-2:

1. The high chair manufacturer's restraint device shall be used when children are sitting in a high chair.
2. Children who are either too small or too large to be restrained using the manufacturer's restraint device shall not be placed in a high chair.

Finding:

1907-A.1-2 Based on observations: The high chair manufacturer's restraint device was not used for 2 of 2 children when they were observed sitting in a high chair during lunch time.

1911-E: Daily Reports for Infants

Not Met

1911-E: Daily Reports for Infants. Written reports that include the liquid intake, food intake, disposition, bowel movements and eating and sleeping patterns shall be given to the parents of infants on a daily basis. Reports shall be kept current throughout the day.

Finding:

1911-E Based on interview: The center lacked a daily written report for 1 of 1 infants. During the night visit on 03/08/2017, S6 and S4 stated they failed to complete a written report that includes the liquid intake, food intake, disposition, bowel movements and eating and sleeping patterns for C6.

1911-K: Hand Washing

Not Met

1911-K: Staff and children shall wash their hands using soap at least at the following times: upon arrival at the center, before preparing or serving meals, before giving medication, after playing in water used by more than one person, after toileting, after helping a child use a toilet or changing diapers, after wiping noses or cleaning wounds, after handling pets and other animals, after playing in sandboxes, before eating meals or snacks, upon coming in from outdoors, after cleaning or handling garbage and anytime hands become soiled with body fluids, such as urine, saliva, blood or nasal discharge.

Finding:

1911-K Based on observations: During the night visits on 03/08/2017, Staff did not wash their hand with soap as needed. Licensing Special observed S6 fail to wash their hands after changing the diaper of an infant.