

Statement of Deficiencies

1711-A-B-D-G: Child to Staff Ratio

Not Met

1711-A-B-D-G: A. Child to staff ratios are established to ensure the safety of all children.

B. Minimum child to staff ratios shall be met at all times.

1. There shall be a minimum of two staff members present at an early learning center when more than one child is present.
2. Only those staff members directly providing care, supervision or guidance to children shall be counted in the child to staff ratios.

D. Minimum Child to Staff Ratios for Type II and Type III centers:

Ages of Children	Ratio
Infants under 1 year	5:1
1 year	7:1
2 years	11:1
3 years	13:1
4 years	15:1
5 years	19:1
6 years and up	23:1

G. Mixed Age Groups - Minimum Child to Staff Ratios

1. An average of the child to staff ratios may be applied to mixed age groups of children ages 2, 3, 4 and 5
2. Child to staff ratios for children under age two are excluded from averaging.
3. When a mixed age group includes children younger than age two, the age of the youngest child determines the child to staff ratio for the group.
4. An average may be applied to a mixed age group consisting only of children ages 5 and older.

Finding:

1711-A-B-D-G Based on observations/interview(s)/record review:

Provider did not have at a minimum of 2 child care staff present at an early learning center when more than one child is present as one staff was supervising 2 children aged 3 years and 4 years old. S1 stated that S2 had to leave to tend to personal business. Staff attendance logs document that S2 left the facility at 8:53am on today.

1715-A.4: Criminal Background Check

Not Met

1715-A.4: Personnel files for each staff member shall be maintained at the center and shall include the following: documentation of a fingerprint based satisfactory criminal background check

Finding:

1715-A.4 Based on record review/interview(s): Documentation of a satisfactory fingerprint based criminal background check (CBC) was not available for 1 staff, prior to the individual(s) being present in the childcare facility (1703.A) Based on attendance logs, S3 worked in the center on 8/22/16 from 8:00am-10:30am and on 10/11/16 from 1:00pm-2:00pm and her CBC was completed 11/14/16.

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/interview(s):

Provider failed to have documentation of a completed state central registry disclosure form (SCR 1) prior to an individual being present in or providing services to the center on site and available for review at the center(1705.A). 1 staff, S3, failed to have documentation of the completed form. Staff was on the premises on 8/22/16, 10/11/16 and 12/20/16 as verified by staff attendance logs and the SCR1 form on file was completed 2/14/17.