Statement of Deficiencies

1515-C: Confidentiality

1515-C: Confidentiality. The center shall maintain the confidentiality and security of all records of children. Center staff is prohibited from disclosing or knowingly permitting the disclosure of any information concerning the child or the family of the child, either directly or indirectly, to any unauthorized person.

Finding:

1515-C Based on interview(s) on 6/12/18, employees disclosed or knowingly permitted the disclosure of information concerning a child or his/her family, directly, or indirectly, to an unauthorized person as S1 stated that the medications that are to be administered to children, are located in a lock box in room 171 of the center. When parents drop off medications for center children, they complete the Medication Administration Form and place the medication in the lock box. S1 stated that all children medications are located in the lock box, therefore, parents have direct access to other children medications without parental authorization.

1713-E&F: Supervision Participation

1713-E&F:

E: While supervising a group of children, staff shall devote their time to supervising the children, meeting the needs of the children, and participating with them in their activities.

F: Staff duties that include cooking, housekeeping or administrative functions shall not interfere with the supervision of children.

Finding:

1713-E: Based on observation on 6/11/18, while supervising a group of children, childcare staff did not devote their time to supervision of the children as LS observe at approximately 12:50 pm, S10 was sitting in a chair reading a book that appeared to be a novel as the children were sleeping during nap-time.

1807-B.: CCCBC-Based Determinations of Eligibility for Volunteers and Staff

1807-B.: B. Volunteers and Staff. An early learning center shall obtain a CCCBC-based determination of eligibility for child care purposes from the department for each volunteer, staff member, or employee of any kind, and shall have documentation of said determination available at all times for inspection upon request by the Licensing Division.

Finding:

1807-B. Based on record review on 6/11/18, the center failed to obtain from the department a new CCCBC-based determination of eligibility for child care purposes for required person, prior to the person being present or performing services at the center when children are present as LS observed S19's CCCBC was issued on 5/10/18 but was hired on 5/8/18. Per center daily attendance log, S19 was signed in on 5/8/18 and 5/9/18 prior to being deemed eligible for child care purposes.

1807-C.: CCCBC-Based Determinations of Eligibility for Visitors and Contractors

1807-C.: C. An early learning center shall obtain a CCCBC-based determination of eligibility for child care purposes from the department for each visitor or independent contractor of any kind, and shall have documentation of said determination available at all times for inspection upon request by the licensing division, unless the visitor or independent contractor, other than therapeutic professionals as defined in §103, will be accompanied at all times while at the center when children are present, by an adult staff member who is not being counted in child-to-staff ratios. The center shall have documentation of the accompanying staff member, available at all times for inspection upon request by the Licensing Division.

Finding:

1807-C. Based on record review/observations on 6/11/18, a CCCBC- based determination of eligibility for child care purposes from the department was not obtained for O1, prior to the person being present at the center as evidence by: LS observing S13 signing in O1 on the center visitor log at 12:30 pm, which also stated S13 was the accompanying staff for O1 while on the center premises. S1 accompanied LS during the walk through of the center. Upon entering the gym area, LS observed S14 and S15 supervising 15 children (ages 5 yr to 12 yrs old). During this time, O1 was present in the gym area but S13 was not in the gym area. Approximately two minutes after S1 and LS entered the gym area, S13 entered and specified that O1 was her son (16 yrs old). Although the center did have documentation of the paid, adult staff member not otherwise counted in child to staff ratios (S13) to accompany O1 at all times while on the center premises, S13 failed to accompany O1 at all times during the center visit.

1911-I.-J.: Proper Lifting of a Child

1911-I.-J.: I. Staff members shall adhere to proper techniques for lifting a child.

J. Staff members shall not lift a child by one or both arms.

Not Met

Not Met

Not Met

Not Met

Statement of Deficiencies

Finding:

1911-I.-J. Based on observations on 6/11/18, staff did not lift a child using proper lifting techniques, as LS observed S11 supervising 4 children (ages 9 mths to 1 yr old). At approximately 12:53 pm, LS observed S11 lifting a child using both arms (upper arm between shoulder and elbow). LS observed the child was not injuried due to S11 using improper lift techniques. On 6/12/18, S1 provided LS an Employee Warning Notice in concerns to S11 receiving previous training as well as a written reprimand as a corrective action.

1917-B: Medication Authorization - Required Container/Packaging

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 observations/interview(s) on 6/11/18 and 6/12/18, the prescription medication to be administered at the center was not in the original pharmacy container with the complete pharmacy label as LS observed the Albuterol Sulfate medication provided to C1 on 5/9/18, 5/10/18, and 5/14/18 was kept in a plastic zip lock bag with C1's name written on it and was not in its original container to ensure that the medication is for individual use only. Per interviews, S2 provided C1's parent the plastic zip lock bag in order to keep minimal amounts of the medication on the center premises.

1917-H: Medication Administration Records

1917-H: Medication administration records shall be maintained for all children regardless of who administers the medication. Records shall include the following:

1. name of the child and medication name and dosage administered;

- 2. date and time medication administered;
- 3. documentation of telephone contact with parent prior to giving "as needed" medication;
- 4. signature of person administering medication or witnessing the child administering own medication;
- 5. signature of person completing the form; and

6. when a parent administers medication to his/her own child on center premises, the medication administration record shall be documented by either the parent or a staff member.

Finding:

1917-H Based on record review/interview(s) on 6/11/18 and 6/12/18, the medication administration records reviewed were incomplete as C1 was prescribed Albuterol Sulfate treatment due to being diagnosed with asthma. The medication administration record did not include the following: date, time, dosage, and person administering the medications as LS observed the Medication Authorization Form for C1 stated the Albuterol Sulfate treatments were to begin on 5/8/18, with 1 treatment every four hours by breathing machine. Per interviews and record review, center staff forgot to administer C1's medication on 5/8/18.

Not Met

Not Met