

## Statement of Deficiencies

### 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/interview:

The center's staff and owner's daily attendance record did not accurately reflect persons on the child care premises at any given time.

- Upon arrival, Specialist observed S2 on premises. S2 was not signed in on the staff daily attendance log.
- S1, S3 and S4 were signed in on the staff daily attendance log, but were not on premises.

Corrective Action Plan: S1 stated, effective 06/18/2020, all staff will sign in on the log and she or the staff in charge will initial by staff's name.

### 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 Based on observation/record review/interview: The required child to staff ratio for children of the following ages: six months to seven-years-old was not met at all times.

- Upon arrival, S2 was observed alone on premises with 14 (two infants, 1 one-year-old, 3 two-year-old, 3 three-year old, 2 four-year-old, 1 five-year-old and 2 seven-year old) children. The required ratio for any group of children that includes infants is five children per one staff. Another staff was required to satisfy ratio for the remaining 9 remaining children ages two to seven. Also, a minimum of 2 child care staff were not present at the early learning center when more than one child is present as one staff, S2, was supervising 14 children ages infant to seven years of age. Ratio was corrected at 12:13pm when S3 returned on premises.

Corrective Action Plan: S1 stated, effective 06/18/2020, there will always be more than one staff on premises when more than one child is present. If there are only two staff on premises, no staff will be allowed to leave premises.

### 1713.J.: Rest Time Supervision

Not Met

1713.J.: 1. If two rooms share a common doorway, one staff member may supervise the resting children in both rooms.

2. If the view of the staff supervising the children is obstructed by an object such as a low shelving unit, children shall be checked by sight by staff circulating among the resting children.

#### Finding:

1713.J. Based on observations/interview(s): At naptime, children grouped together for sleeping were not within the sight of the naptime worker, S2. S2 was sitting in the "larger" area of the room near a table. S2 was not observed checking on two children by sight and/or circulating among all the resting children. Specialist observed one child was on a mat and one child in a crib located in the infant area of the center that is separated from the "larger" area of the room in by four foot high shelving that blocked S2's view of the two children that were in the infant area.

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Corrective Action Plan: S1 stated, effective 06/18/2020, staff will be required to walk around the center to make sure they can see each child as they sleep/rest.

### 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 interview(s)/record review:

There was no 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. Zero of two staff on premises had documentation of this certification.

Corrective Action Plan: S1 stated, effective 06/18/2020, she will ensure that at least one staff that has the certification by reviewing the staff's schedule. She will also have S2 and S3 complete the on-line NationalCPRFoundation.com course by 06/30/2020.

### 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 interview(s)/record review:

There was no 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. Zero of two staff on premises had documentation of this certification.

Corrective Action Plan: S1 stated, effective 06/18/2020, she will ensure that at least one staff that has the certification by reviewing the staff's schedule. She will also have S2 and S3 complete the on-line NationalCPRFoundation.com course by 06/30/2020.

### 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/interview(s):

There was no documentation that the entire center and play yard is checked after the last child departs to ensure that no child is left unattended at the center on 06/11/2020.

Corrective Action Plan: S1 stated, effective 06/18/2020, one staff will document that the end of day check has been completed and another staff will initial that the check has been completed by the first staff.

### 1915.A.: Health Services - Observation

**Not Met**

1915.A.: Observation. Upon arrival at the center, the physical condition of each child shall be observed for possible signs of illness, infections, bruises or injuries, and when something is observed, it shall be documented and such documentation shall include an explanation from the parent or child.

#### Finding:

1915.A. Based on record review/interview(s): There was no documentation that observations of when something is observed on children upon arrival at the center, was completed on 06/01/2020, 06/02/2020, 06/03/2020, 06/04/2020, 06/05/2020, 06/08/2020, 06/09/2020, 06/10/2020, 06/11/2020, 06/12/2020, 06/15/2020, 06/16/2020 and 06/17/2020 upon arrival to the center. Results including an explanation from parent and/or child were not documented.

Corrective Action Plan: S1 stated, effective 06/18/2020, all children will be checked upon arrival. If something is observed, it will be documented along with an explanation by the receiving staff. Documentation of observations will be checked by the director or staff in charge at the end of day.