

## 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/interview/observations on 06/29/2020 at approximately 3:19 PM, S2 failed to maintain a daily attendance record that accurately reflects the staff members and owners in the center premises at any given time and can be used to document staff members and owners who leave and return to the center during the day. Per the center's daily attendance log dated 06/29/2020, S2 was not signed in or out upon Specialist's arrival at 2:30 PM. S10 was signed in at 1:55 PM; however, she was not on the premise. Per S2's statement, she is salary and was not aware that she had to clock in and out when arriving and departing. S2 also stated that S10 was mistakenly signed in and had not been to the center at any time that day. S2 clocked herself in and deleted S10's attendance record from the attendance log.

On 07/28/2020 at approximately 3:15 PM, S2 failed to maintain a daily attendance record that accurately reflects the staff members and owners in the center premises at any given time and can be used to document staff members and owners who leave and return to the center during the day. Per the center's daily attendance log dated 07/28/2020, specialist observed S12 arrive at the center at 2:50 PM; however, she failed to sign in and out upon her arrival and departure. Per S2's statement, S12 went to the grocery store to buy things for the center and she was not aware that S12 needed to sign in and out upon her arrival and departure.

Corrective Action Plan: Effective 07/28/2020, S2, Staff in Charge, S2 stated that she would provide a paper sign in and out log for staff to ensure that all staff sign in and out upon arrival and departure.

### 1509.A.8.a.&b.: Behavior Management Policy

Not Met

1509.A.8.a.&b.: Behavior Management Policy

Each center shall develop and implement a written behavior management policy describing the methods of behavior guidance and management that shall be used at the center.

The behavior management policy shall prohibit children from being subject to any of the following:

- i. physical or corporal punishment which includes but is not limited to yelling, slapping, spanking, yanking, shaking, pinching, exposure to extreme temperatures or other measures producing physical pain, putting anything in the mouth of a child, requiring a child to exercise, or placing a child in an uncomfortable position.
- ii. verbal abuse, which includes but is not limited to using offensive or profane language, telling a child to "shut up", or making derogatory remarks about children or family members of children in the presence of children;
- iii. the threat of a prohibited action even if there is no intent to follow through with the threat;
- iv. being disciplined by another child;
- v. being bullied by another child;
- vi. being deprived of food or beverages;
- vii. being restrained by devices such as high chairs or feeding tables for disciplinary purposes; and
- viii. having active play time withheld for disciplinary purposes, except timeout may be used during active play time for an infraction incurred during the playtime.

#### Finding:

1509.A.8.a.&b: Based on interview/observations/record review on 06/29/2020 at approximately 3:30 PM, although there was a behavior management policy, S11 failed to ensure that the policy was followed as she yanked C1 by her right arm and shoved her into the classroom corner. Per observation of the center's camera on 06/29/2020, S11 was seen yanking C1 by her right arm and shoving her at 3:04 PM on 02/11/2020.

Corrective Action Plan: Effective 07/28/2020, S2, staff in charge, stated that she will continue to ensure all staff are trained in behavior management and conduct ongoing staff trainings.

## Statement of Deficiencies

### 1515.A.1.: Child Records and Cumulative Files

Not Met

1515.A.1.: A cumulative file shall be maintained on each child that shall include the following records:

1. An information form signed and dated by the parent and updated as changes occur, that contains:
  - a. name of child, date of birth, sex, date of admission;
  - b. name of parents and the home address of both child and parents;
  - c. phone numbers where parents may be reached while child is in care;
  - d. name and phone number of person to contact in an emergency if parents cannot be located promptly;
  - e. name and telephone number of child's physician, if applicable;
  - f. name and telephone number of the child's dentist, if applicable;
  - g. any special concerns, including but not limited to allergies, chronic illnesses, and any special needs of the child, if applicable;
  - h. any special dietary needs, restrictions or food allergies or intolerances, if applicable. See Paragraph 4;

#### Finding:

1515.A.1. Based on record review/interview on 07/28/2020 at approximately 3:15 PM, S2 failed to have a cumulative file for C1, age four years old, that shall include an information form signed and dated by the parent and updated as changes occur, that contains: name of child, date of birth, sex, date of admission; name of parents and the home address of both child and parents; phone numbers where parents may be reached while child is in care name and phone number of person to contact in an emergency if parents cannot be located promptly; name and telephone number of child's physician, if applicable; name and telephone number of the child's dentist, if applicable; any special concerns, including but not limited to allergies, chronic illnesses, and any special needs of the child, if applicable; and any special dietary needs, restrictions or food allergies or intolerances. Specialist requested the file on 06/29/2020 in which S2 could not find prior to specialist departure. Specialist requested C1's file again on 07/28/2020 at 3:15 PM. After searching for the file along with S13, S2 stated at 5:00 PM that she thought the file was located in the desk where the specialist was located. S2 did not find the file prior to specialist departure. Per S2's statement, the file had been moved from its original location due to being reviewed in an investigation involving Child Welfare.

Corrective Action Plan: S2, Staff in Charge, stated that she will ensure all files are kept in a place in their original place.

### 1515.A.2.: Emergency Medical Treatment

Not Met

1515.A.2.: Written authorization signed and dated by the parent to secure emergency medical treatment;

#### Finding:

1515.A.2. Based on record review/interviews on 07/28/2020 at approximately 3:15 PM, S2 failed to have written authorization signed and dated by the parent to secure emergency medical treatment for C1, age four years old, available for specialist to review during the licensing inspection. Specialist requested the file on 06/29/2020 in which S2 could not find prior to specialist departure. Specialist requested C1's file again on 07/28/2020 at 3:15 PM. After searching for the file along with S13, S2 stated at 5:00 PM that she thought the file was located in the desk where the specialist was located. S2 did not find the file prior to specialist departure. Per S2's statement, the file had been moved from its original location due to being reviewed in an investigation involving Child Welfare.

Corrective Action Plan: S2, Staff in Charge, stated that she will ensure all files are kept in a place in their original place.

### 1515.A.3.: Releasing of Children

Not Met

1515.A.3.: Written authorization signed and dated by the parent noting the first and last names of individuals to whom the child may be released other than the parents, including any other early learning centers, transportation services, and any person or persons who may remove the child from the center.

- a. The parent may further authorize additional individuals via a text message, fax or email to the center in unplanned situations and follow it with a written authorization.
- b. A child shall never be released to anyone unless authorized in writing by the parent.
- c. Any additions and deletions to the list of authorized individuals shall be signed and dated by the parent.
- d. The center shall verify the identity of the authorized person prior to releasing the child.

#### Finding:

1515.A.3. Based on record review/interview at approximately 07/28/2020 at 3:30 PM, S2 failed to have written authorization signed and dated by the parent for C1, age 4 years old, noting the first and last names of individuals to whom the child may be released other than the parents, including any other early learning centers, transportation services, and any person or persons who may remove the child from the center. Specialist requested the file on 06/29/2020 in which S2 could not find prior to specialist departure. Specialist requested C1's file again on 07/29/2020 at 3:15 PM. After searching for the file along with with S13, S2 stated at 5:00 PM that she thought the file was located in the desk where the specialist was located. S2 did not find the file prior to specialist departure. Per S2's statement, the file had been moved from its original location due to being reviewed in an investigation involving Child Welfare.

## Statement of Deficiencies

Corrective Action Plan: S2, Staff in Charge, stated that she will ensure all files are kept in a place in their original place.

### 1707.A.1.&2.: Required Staffing - Director or Director Designee

Not Met

1707.A.1.&2.: Director or Director Designee. Each center shall have a qualified director or qualified director designee.

1. The director or director designee shall be an on-site, full-time staff person at the center during the daytime hours of operation (prior to 9 p.m.). When the director is not an on-site full-time employee at the licensed location, there shall be a qualified director designee who is an on-site full-time employee at the licensed location.

2. The director or director designee shall be responsible for planning, managing, and controlling the center's daily activities, as well as responding to parental concerns and ensuring that minimum licensing requirements are met.

#### Finding:

1707.A.1 & 2: Based on interview/record review on 06/29/2020 at approximately 3:30 PM, S10 failed to be an on-site full-time staff person during the daytime hours of operation (prior to 9 p.m.) who is responsible for planning, managing, and controlling the center's daily activities, as well as responding to parental concerns and ensuring that minimum licensing requirements are met. Per S10's time statement dated 05/29/2020 to 06/29/2020, she worked a total of 39.30 hours the entire time period. S10 worked 7.02 hours the week of 06/01/2020-06/05/2020, 18.72 hours the week of 06/08/2020-06/12/2020, 6.68 hours the week of 06/15/2020-06/19/2020, and 6.88 hours the week of 06/22/2020-06/26/2020. Per S2's statement, S10 has been working in two other centers due to those centers being short of staff.

On 07/28/2020, specialist reviewed S10's daily attendance log dated 06/30/2020- 07/28/2020 and observed that S10 has only worked 90.71 hours in the past month. S10 worked 24.13 hours the week of 06/29/2020 -07/03/2020, 10.29 hours the week of 07/06/2020- 07/10/2020, 39.85 hours the week of 07/13/2020-07/17/2020, and 16.34 hours the week of 07/20/2020 - 07/24/2020. Per S2's statement, S10 has been working in two other centers due to those centers being short of staff. S10 would need to work 35 hours a week in order to be considered a full time director.

Corrective Action Plan: Effective 7/28/2020, S13, stated that he will tell S10 to come to the center more and S2 will ensure that she is clocked in while present at the center.

### 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 observations/record review/interview on 07/28/2020 at approximately 2:50 PM, S2 failed to ensure child to staff ratios are met at all times. Upon specialist's arrival to the center on 07/28/2020 at 2:45 PM, S2 admitted that almost all of the classrooms were out of ratio due to three teachers calling in. S1's class had six infants ages 6 months- 10 months and should not have exceeded five children. S7's class had twelve children ages 2 years old and should not have exceeded eleven children. Specialist's review of the center's daily attendance log dated 07/28/2020 indicates that S1 was present in the center at 6:38 AM alone with seven children ages 9 months - 8 years old. S12, a second staff, did not arrive until 7:06 AM. C4 is nine months old, C5 is one year old, C6 is one year old, C7 is two years old, C8 is two years old, C9 is four years old, and C10 is eight years old.

Corrective Action Plan: Effective 7/28/2020, S2, Staff in Charge, stated that she is planning is to hire three new staff within a week and will have more staff available.

## Statement of Deficiencies

### 1713.A.&B.&C.: Supervision

Not Met

1713.A.&B.&C.: A: Children shall be supervised at all times in the center, on the playground, on field trips, on non-vehicular excursions, and during all water activities and water play activities.

B: Children shall not be left alone in any room, (except the restroom as indicated in Subsection G of this Section or when being provided services by therapeutic professionals, as defined in §103), outdoors, or in vehicles, even momentarily, without staff present.

C: A staff person shall be assigned to supervise specific children whose names and whereabouts that staff person shall know and with whom the staff person shall be physically present. Staff shall be able to state how many children are in their care at all times.

#### Finding:

1713.A & B.: Based on observations/interviews on 06/29/2020 at approximately 3:25 PM, S5 failed to supervise children at all times while in the center and ensure that they are not left alone in any room, even momentarily, without staff present. Specialist observed S5 enter the office area at 3:25 PM to ask S1 a question. Specialist entered the room with S5 at approximately 3:27 PM and observed 5 infants, 5 to 9 months old, had been left in the room alone. Per S5's statement, she only left the infants alone to ask S1 a question about feeding. Specialist advised S5 that she could not leave the infants alone at any time for any reason.

Corrective Action Plan: Effective 07/28/2020, S2, Staff in Charge, stated that S5 is no longer employed at the center and all staff have reviewed the supervision policy to ensure it does not happen again.

### 1901.P.: Staff Personal Belongings

Not Met

1901.P.: The personal belongings of center staff members shall be inaccessible to children.

#### Finding:

1901.P. Based on observations on 07/28/2020 at approximately 3:00 PM, S6 failed to ensure personal belongings were inaccessible to children. Specialist observed S6's personal wallet and a Monster energy drink were located on a shelf and her cell phone was located in a chair and all were accessible to children.

Corrective Action Plan: Effective 07/28/2020, S2, Staff in Charge, stated that she will have a staff meeting on 07/29/2020 to address this issue with staff.

### 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.A. Based on record review/interview on 06/29/2020 at approximately 4:00 PM, S6 failed make immediate notification to parents when a child received a head or neck or eye injury per the center's incident/injury/accident/illness/behavior report dated 05/21/2020 and 06/15/2020. C2 received an injury to her mouth which caused bleeding and swelling on 05/21/2020 at 3:30 PM and her parent was not notified until 5:08 PM. C2 received a bite on her right eye that caused a bruise on 06/15/2020 at 9:50 AM and her parent was not notified until 5:34 PM. C3 was hit in the eye by a rock on 06/15/2020 at 3:25 PM and there is no documentation of when the parent was notified.

Corrective Action Plan: Effective 07/28/2020, S2, Staff in Charge, stated that she will document the time of notification to parent immediately after being informed about the injury.