

Statement of Deficiencies

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/observations:

The center's daily attendance record for children did not accurately reflect the children on the child care premises at any given time as 56 children were present and 51 children were signed in on the log.

1509-A.5: Complaint Policy

Not Met

1509-A.5: Complaint Policy

Parents shall be advised of the licensing authority of the Licensing Division along with the current telephone number and email address.

Parents shall also be advised that they may call or write the Licensing Division should they have significant, unresolved licensing complaints.

Finding:

1509-A.5 Based on record review:

Provider did not have a policy/procedure to advise Parents of the licensing authority of the Licensing Division along with the current telephone number and email address. Parents shall also be advised that they may call or write the Licensing Division should they have significant, unresolved licensing complaints. S1 corrected during the licensing visit.

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;

Finding:

1515.A.1 Based on record review/interview(s): Children's records reviewed did not contain a Child's Information Form for C1 and C2.

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/interview(s): Children's records lacked a signed and dated parental authorization to secure emergency medical treatment for C1 and C2.

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: Ratio was not met in the infant room at 12:39 pm as S2 was caring for 9 infants alone. S2, the second infant room staff, was still on premises on lunch. S3 was sent in the infant room to satisfy ratio. The required ratio for infants, children under the age of one, is 5 children per 1 staff person.

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 when children are sitting in a high chair. Specialist observed one of 14 high chairs used for the one year old children during lunch had the manufacturer's restraint device attached. The remaining 13 high chairs were used without a restraining device attached to the chair to ensure that the child in the chair was secured.

1907-E.2: Cribs Free of Toys and Other Soft or Loose Bedding

Not Met

1907-E.2: Cribs shall be free of toys and other soft or loose bedding, including comforters, blankets, sheets, bumper pads, pillows, stuffed animals and wedges when the child is in the crib.

Finding:

1907-E.2 Based on observations:

The center's cribs were not free of toys or other soft or loose bedding (including comforters, blankets, sheets, bumper pads, pillows, stuffed animals and wedges) while the child was in the crib. Specialist observed seven infants in cribs with loose blankets and one infant with a toy attached to a pacifier that was near the sleeping child in the crib.

1909-C: Infants - Positioning Devices

Not Met

1909-C: Infants shall not be placed in positioning devices, unless the center has written authorization from a physician to use a positioning device.

Finding:

1909-C Based on observations: Written authorization from a physician was not available for C2 to use a positioning device as observed by Specialist.

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1909-H: Infant - Placed Over Head or Face

Not Met

1909-H: Nothing shall be placed over the head or face of an infant.

Finding:

1909-H Based on observations:

An Infant's head/face was covered while sleeping in a crib as observed by Specialist.

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: The provider did not document observations, when something is observed, noted on children upon arrival to the center. Results including an explanation from parent and/or child were not documented.

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 B & C Based on record review: There was no documentation that a parent was notified of immediate notification when injuries that required immediate notification occurred to a child(ren). Documentation of incidents, injuries, accidents, illnesses, and unusual behavior did not have complete documentation of the following: being reported to the parent no later than when the child is released to the parent or authorized representative on the day of the occurrence, the date of the occurrence, the time of the occurrence.

1921-A: Emergency Preparedness and Evacuation Planning

Not Met

1921-A: Emergency and Evacuation Plan. The director shall consult with appropriate state and local authorities and shall establish and follow a written multi-hazard emergency and evacuation plan to protect children in the event of emergencies that at a minimum shall:

1. address any potential disaster related to the area in which the center is located;
2. include procedures for sheltering in place, lockdown and evacuation to a pre-determined site for potential threats to the safety, health and well-being of children in care;
3. include specific procedures for handling infants through two year olds;
4. include specific procedures for handling children with special needs, including the evacuation and transportation of children in wheelchairs;
5. include a system to account for all children;
6. include a system, and a back-up system, for contacting parents and authorized third party release caretakers;
7. include a system to reunite children and parents following an emergency;
8. include procedures for providing information about the emergency plan to parents at the time of enrollment and when changes occur;
9. be reviewed annually for accuracy and updated as changes occur; and
10. be reviewed with all staff at least once per year.
11. practice drills shall be conducted at least twice per year to include all children and shall be documented.

Finding:

Statement of Deficiencies

1921-A Based on record review: The provided written multi-hazard emergency and evacuation plan to protect children in the event of emergencies did not address the following: specific procedures for handling infants through two year olds, specific procedures for handling children with special needs, if any, including the evacuation and transportation of children in wheelchairs, and a pre-determined site for evacuation. The Provider did not have the following system in place for: to account for all children, a system, and a back-up system, for contacting parents and authorized third party release caretakers, a system to reunite children and parents following an emergency.
