Date - 08/18/2020 License # - 51334 Action Code - 25 - COMPLIANCE

## 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.B. Children were not under supervision at all times on 8/18/2020.

- Based on observations at 2:16pm, three children (C1 C3), ages two-years-old to three-years-old, where left unsupervised in the two-year-old classroom by S4 during nap time. At 2:16pm, the Specialist observed S4 near the front entrance. During the walk-through of the two-year-old classroom at 2:19pm, S4 stated she left the classroom to bring a child to the front, and was only gone a few minutes. S1 stated they were short staffed today, and would normally have a floater to assist with meeting ratio.
- Based on observations at approximately 2:20pm, the Specialist observed two children (C4 & C5), ages 8-years-old and 12-years-old, unsupervised in the dramatic play classroom. S1 stated the children are normally in the front supervised, but he let them go to the classroom while he spoke with the staff. S1 stated the children were in the classroom for about five minutes. Supervision was met at 2:21pm, when S1 instructed the children to go to S4's classroom.

Corrective Action Plan: Effective 8/18/2020, S1 stated he will merge classrooms together, while meeting ratio, to ensure no child is left in a classroom unattended.

### 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. Based on record review at 3:20pm, S1 failed to have documentation that at least fifty percent or four staff on the premises and accessible to children, have current certification in infant and child CPR through training approved by the department. 1 of 4 staff present, S3, have current certification. S1 stated he also has CPR training, however it is not by an approved trainer. S1 stated he has made several attempts to schedule trainings previously, but has been unsuccessful.

Corrective Action Plan: Effective 8/18/2020, S1 stated he will work to get staff trained to get CPR as soon as possible. S1 also stated he will periodically check staff training dates in the future to ensure they do not expire.

## 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 record review at 3:20pm, S1 failed to have documentation that at least fifty percent or four staff on the premises and accessible to children, have current certification in Pediatric First Aid through training approved by the department. 1 of 4 staff present, S3, have current certification. S1 stated he also has Pediatric First Aid training, however it is not by an approved trainer. S1 stated he has made several attempts to schedule trainings previously, but has been unsuccessful.

Corrective Action Plan: Effective 8/18/2020, S1 stated he will work to get staff trained to get Pediatric First Aid as soon as possible. S1 also stated he will periodically check staff training dates in the future to ensure they do not expire.

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

**Not Met** 

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/observations at 2:49pm, S1 failed to have a CCCBC-based determination of eligibility for child care purposes from the

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# Statement of Deficiencies

department for each staff member, S3, prior to the person being present at the center or performing services. S3 was observed on premises during the Licensing inspection, however did not have a current CCCBC-based determination of eligibility on file. S3's date of hire is 8/7/2020. S1 stated S5 told him that S4 could work while the CCCBC was still in pending status. S3 was observed leaving the premises at 3:20pm.

S1 was informed that all new hires must have a CCCBC-based determination of eligibility prior to working in the center. S3 can not work in the center until she has the required CCCBC status.

Corrective Action Plan: Effective 8/18/2020, S1 stated he will not allow anyone to work in the center without a current CCCBC status.

#### 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 at 3:09pm, S1 failed to have documentation that the end of day check was conducted on 8/17/2020 to ensure no child is left at the center. S1 stated he did the check at 6:00pm, but forgot to document it.

Corrective Action Plan: Effective 8/18/2020, S1 stated he will be sure to document that the visual check has been completed daily.