

## Statement of Deficiencies

### 1719.A.&B.: Orientation Training

Not Met

1719.A.&B.: A. Within seven calendar days of the first day present at the center, and prior to assuming sole responsibility for any children, each staff member shall receive orientation to the policies and practices of the center that at a minimum shall include:

1. child abuse identification and reporting;
2. emergency preparation;
3. licensing regulations; and
4. safe sleep practices.

B. Within 30 calendar days of date of hire, each staff member shall receive orientation to the additional policies and practices of the center that at a minimum shall include:

1. child development;
2. child guidance;
3. learning activities;
4. health and safety;
5. shaken baby prevention; and
6. CPR and first aid, as applicable.

#### Finding:

1719.B.: Orientation Training: Based on record review at 12:30 p.m., S1 failed to have documentation signed by the director that S11 received orientation within seven days of the first day present at the center and prior to having sole responsibility for any children. Additionally, there is no documentation that S11 received the additional orientation within thirty days of date of hire on 8/2/2021.

Corrective Action Plan: Effective 9/7/2021, S1 stated she will schedule an Outlook calendar reminder to conduct bi-weekly reviews of staff files, and update as needed, to ensure this deficiency is not re-cited.

### 1725.A.-C.: Medication Management Training

Not Met

1725.A.-C.: A. All staff members who administer medication shall have medication administration training.

B. Whether the center is administering medication or not, each early learning center shall have at least two staff members trained in medication administration and at least one on the premises. A staff member who is a licensed practical nurse (LPN) or registered nurse (RN) with a valid nursing license shall be considered to have medication administration training.

C. Such training shall be completed every two years with an approved child care health consultant.

#### Finding:

1725.A.&C.: Medication Management Training: Based on record review at 3:30 p.m., S4 administered medication to C3 (age one) and C6 (age one) and failed to have current documentation of training in medication administration completed with an approved Child Care Health Consultant. S4's training expired on 2/2021, and she administered an Albuterol nebulizer treatment to C1 seventeen times between 7/9/2021 and 8/5/2021, and C6 five times from 6/21/2021 to 6/24/2021. S4 completed a current training on 8/14/2021. S18 also administered a treatment to C1 on 7/20/2021, and failed to have a current training in medication administration. This deficiency was previously cited on 7/23/2020.

Corrective Action Plan: Effective 9/7/2021, S1 stated she will create a staff chart with a list of current certification expirations and it will be posted in the office area for quick review. Only staff listed with a current (non-expired) training will be allowed to administer medication, to ensure this deficiency is not re-cited.

### 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.: CCCBC-Based Determinations of Eligibility for Volunteers and Staff: Based on record review/interview at 1:30 p.m., S1 failed to obtain a CCCBC-based determination of eligibility for child care purposes from the department for S18 prior to her being present or performing services. S18's date of hire and first day logged on the center's electronic attendance log was 6/1/2021. The electronic log documented S18 was present in the center on 6/1/2021, 6/2/2021, 6/3/2021, and 6/4/2021. S18's date of CCCBC-based determination of eligibility is 6/7/2021. S18 stated she was hired to work in the summer/after-school camp, but worked in the center to provide breaks to other staff when needed. This deficiency was previously cited on 12/9/2020.

Corrective Action Plan: Effective 9/7/2021, S1 stated potential hires will not be given a new hire packet to complete prior to a request of CCCBC is completed. S1 will only hire staff once a CCCBC provisional or eligibility status is returned, to ensure this deficiency is not re-cited.

## ***Statement of Deficiencies***

### **1921.E.: Tornado Drills**

**Not Met**

1921.E.: Tornado drills shall be conducted at least once per month in the months of March, April, May, and June at various times of the day necessary to include all children and shall be documented.

#### **Finding:**

1921.E.: Tornado Drills: Based on record review at 3:45 p.m., S1 failed to have documentation of tornado drills that were conducted at least once per month during the months of March, April, and June 2021. Specialist observed a tornado drill was conducted on 5/17/2021.

Corrective Action Plan: Effective 9/7/2021 S1 stated she will create an Outlook calendar reminder with scheduled dates to conduct future drills no later than 9/30/2021, to ensure this deficiency is not re-cited.

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