

## Statement of Deficiencies

### 1501-A: Operations

Not Met

1501-A: A center shall operate within the licensed capacity, age range, hours of operation and other specific services designated on its license.

#### Finding:

1501-A Based on observations on 09/24/2018, S1 failed to operate within the licensed capacity as evidenced by specialist observed 20 children present at the center at 2:57 PM and the licensed capacity for the center is 15. Specialist advised S1 that 5 children would have to leave the center. At approximately 3:26 PM, the center was at licensed capacity upon the departure of five children.

S1 also failed to operate within the licensed hours of operation as the center hours are 6:00 AM to 11:00PM however specialist arrived to the center at 12:30 PM and no one was present. Specialist was approached by a woman who lives across the street from the center who informed LS that the center would be open at 2:00 PM. Specialist arrived back at the center at 2:00 PM and the center was open.

### 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 observations/record review on 09/24/2018, S1 failed to maintain a daily attendance record for all children to 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 and accurately reflect children on the center premises at any given time as evidenced by the daily attendance record dated 09/24/2018 indicate that 12 of 20 children were present on the premises were signed in.

### 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 09/24/2018, S1 failed to document the the date of admission for C1,C2,C3,C4,C5,C6, and C7.

### 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 on 09/24/2018, S1 failed to obtain written authorization signed and dated by the parent to secure emergency medical treatment for C1,C2,C3,C4,C5,and C7.

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### 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 record review/observation on 09/24/2018, child to staff ratios were not met at all times as evidenced by specialist observed 9 children in S2's classroom ages 1 to 4 years of age. The ratio for this classroom was 7:1. S1 corrected prior to specialist departure. Child to staff ratios were also not met on 09/24/2018 as evidenced by the daily attendance log for children dated 09/24/2018 indicate that C6 and C8 were signed in with only S3 present.

### 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), 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&C Based on observations on 09/24/2018 children were not supervised at all times as evidenced by specialist observed C1 was alone in the front room of the center without a staff present. O1 came to visit C1 in the front room of the center while S1 was present in the room. S1 left out the room and O1 left the center leaving C1 in the room alone. S2 called for C1 immediately after O1 left however C1 did not go to S2's room and S2 continued to supervise the children in her room.

### 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.

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.

#### Finding:

1723-A.-B. Based on record review on 09/24/2018, S1 failed to have fifty percent of staff members on the premises of a center and accessible to children with current certification in infant, child, and adult CPR. 1 of 3 staff on the premises had a current CPR certification. The center should have had 2 staff members on the premises with a current CPR certification to be in compliance. S1 was the only staff member with a current CPR Certification.

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### 1723-C.-D.: Pediatric First Aid

Not Met

1723-C.-D.:

- 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.
- D. Certification - A copy of the certification for each such staff member shall be on-site at all times and available for inspection by the Licensing Division.

#### Finding:

1723-C.-D. Based on record review on 09/24/2018, S1 failed to have at least fifty percent of staff members on the premises of a center and accessible to children with current certification in Pediatric First Aid. 1 of 3 staff on the premises had a current First aid certification. The center should have had 2 staff members on the premises with a current First Aid certification to be in compliance. S1 was the only staff member with a current First Aid certification.

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

Not Met

- A. All staff members who administer medication shall have medication administration training.
- B. Whether administering medication or not, each early learning center shall have at least two staff members trained in medication administration.
- C. Such training shall be completed every two years with an approved Child Care Health Consultant.
- D. A licensed practical nurse (LPN) or registered nurse (RN) with a valid nursing license shall be considered to have medication administration training.

#### Finding:

1725-A.-D. Based on record review on 09/24/2018, S1 failed to have at least two members trained in medication administration and such training shall be completed every two years with an approved Child Care Health Consultant whether the center administers medication or not.

### 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:

1921-A Based on record review on 09/24/2018, S1 failed to have an written multi-hazard emergency and evacuation plan to include:

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.

## Statement of Deficiencies

### 1921-C: Evacuation Pack

Not Met

1921-C: Evacuation Pack. The center shall have an evacuation pack, the location of which is known to all staff, that at a minimum shall contain:

1. a list of area emergency phone numbers;
2. a list of emergency contact information and emergency medical authorization for all enrolled children;
3. an emergency pick up form;
4. first aid supplies, hand sanitizer, wet wipes, and tissue;
5. diapers for children who are not toilet trained and plastic bags for diapers;
6. a battery powered flashlight and radio and batteries;
7. food for children under the age of 4, including infant food and formula; and
8. disposable cups and bottled water.

#### Finding:

1921-C Based on record review on 09/24/2018, S1 failed to have an evacuation pack to include a list of area emergency phone numbers, a list of emergency contact information and emergency medical authorization for all enrolled children and an emergency pick up form. This was not corrected prior to specialist departure.

### 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 Based on record review on 09/24/2018, S1 failed to conduct a Tornado drill in the month of March per licensing regulations. S1 did complete Tornado Drills in the month of April, May, and June at various times of the day.