Date - 10/07/2019 License # - 50220 Action Code - 25 - COMPLIANCE

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 at 2:07 pm, 4 of 5 children's records reviewed lacked the required information on the Child's Information Form as the following information was omitted:

C2's file failed to have the sex of the child and date of admission.

C3's file failed to have the sex of the child and date of admission.

C4's file failed to have the date of admission.

C5's file failed to have a date of admission and date of birth.

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 at 2:07 pm, 1 of 5 Children's records lacked a signed and dated parental authorization to secure emergency medical treatment as LS observed this information was documented on documented on C5's Child Information Form for LS to review.

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/observation at 2:10 pm, S1 did not have documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in infant and child CPR through training approved by the department as LS observed S1 and S2 were present upon LS arrival to the center. LS observed S1 was the only staff member with CPR training at that time. Once S3 arrived to the center at 2:10 pm, only 1 of 3 staff had documentation of this certification as LS observed S2's CPR training expired on 8/1/19 and S3's CPR training expired on 8/2/19, and had yet to be renewed.

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/observations at 2:10 pm, S1 did not have documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in Pediatric First Aid through training approved by the department as LS observed S1 and S2 were present upon LS arrival to the center. LS observed S1 was the only staff member with Pediatric First Aid training at that time. Once S3 arrived to the center at 2:10 pm, only 1 of 3 staff had documentation of this certification as LS observed S2 Pediatric First Aid expired on 8/1/19 and S3's Pediatric First Aid training expired on 8/2/19, and had yet to be renewed.

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Statement of Deficiencies

1807.C.: CCCBC-Based Determinations of Eligibility for Visitors and Contractors

Not Met

1807.C.: C. An early learning center shall obtain a CCCBC-based determination of eligibility for child care purposes from the department for each visitor or independent contractor of any kind, and shall have documentation of said determination available at all times for inspection upon request by the licensing division, unless the visitor or independent contractor, other than therapeutic professionals as defined in §103, will be accompanied at all times while at the center when children are present, by an adult staff member who is not being counted in child-to-staff ratios. The center shall have documentation of said determination of eligibility, or documentation of the accompanying staff member, available at all times for inspection upon request by the Licensing Division.

Finding:

1807.C. Based on record review/interview(s) at 2:27 pm, a CCCBC-based determination of eligibility for child care purposes from the department was not obtained for O1, prior to the person being present at the center or performing services as evidence by LS observing O1 was present at the center on 9/18/19 from 9:30 am - 11:20 am, with the purpose of observation, per the center's visitor log. S1 did not have documentation of the paid, adult staff member not otherwise counted in child to staff ratios who accompanied O1 at all times while on the center premises as S1 stated she thought O1 did not need a CCCBC to be on the premises. Although, LS observed S1 had a CCCBC for another observer that was present on 9/7/19, per the center's visitor log.

Documentation did not include language stating that O1 was accompanied by the staff member at all times while on the premises and a signature of the staff member as LS observed this information was not documented on the visitor log.

1901.A.1.-3.: Telephones and Emergency Numbers

Not Met

- 1901.A.1.-3.: Telephones and Emergency Numbers
- 1. A working phone capable of incoming and outgoing calls shall be readily available at the center at all times. Cellular phones are not acceptable for this purpose.
- 2. When a center has multiple buildings and a phone is not located in each building where children are present, the center shall establish and follow written procedures for securing emergency help. The written procedures shall be posted in each building.
- 3. Centers located in schools and churches shall have a phone within the licensed area.

Finding:

1901.A.1.-3. Based on observations/interview(s) at 1:34 pm, the center has multiple buildings and a phone is not located in each building, the center does not have an established written and posted procedures for securing emergency help as LS did not observe this information posted during the center walk through. LS asked S1 about the written procedure as LS previously provided S1 technical assistance in concerns to the information being readily available for review during the licensing visit on 6/27/19.

S1 stated she thought that if they could use cell phones for emergencies that a written plan was not needed. LS advised her that this was discussed during the previous visit and that a procedure was to be written and posted for LS to review. At 1:45 pm, S1 requested LS let her slide this time due to her failing to have the information readily available for review. S1 provided a written procedure and had S2 to post the information in both building at 1:57 pm.

1903.C.: Free of Hazards Not Met

1903.C.: Indoor and outdoor areas shall be free of hazards.

Finding:

1903.C. Based on observations at 1:40 pm, the outdoor area was not free of hazards as a stack of white wooden board with exposed nails were sitting on the deck area to the center's second building exit to the playground area. LS did not observe this hazard being corrected before LS left the center.

1903.E.5.: Outdoor - Enclosed Not Met

1903.E.5.: Outdoor play space shall be enclosed with a permanent fence or other permanent barrier in a manner that protects children from traffic hazards, prevents children from leaving the premises without proper supervision, and prevents contact with animals or unauthorized persons.

Finding:

1903.E.5. Based on observations at 1:39 pm, outdoor play space lacked enclosure with a permanent barrier in a manner that protects children from traffic hazards, prevents children from leaving the premises without proper supervision, and prevents contact with animals or unauthorized persons as LS observed the gate to the center's second playground area failed to have a latch or lock. LS observed the neighbors next to the center fence had a dog that was chained in the neighbor's back yard but could possibly be a hazard if the gate is not properly secured.

S1 did not correct the gate during the licensing visit. LS observed there was rain within the area and there were no children on the playground during the center visit.