

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 A.&B. Based on record review at 11:37am, S1 failed to have documentation that S5 (DOH 8/3/2021), 1 of 3 new staff, received orientation within seven days of the first day present at the center and prior to having sole responsibility for any children. S1 also failed to have documentation that S5 received additional orientation within thirty days of date of hire. S1 stated she completed the trainings with S5, however, forgot to document it on the orientation sheet. S1 will conduct additional training with S5, and will document it on the orientation sheet by the end of week.

Corrective Action Plan: Effective 10/7/2021, S1 stated she will create a new hire checklist, including orientation, that she will use for all new hires. The checklist will remind S1 to conduct and document when orientation is completed to ensure they are not cited the deficiency again.

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 11:16am, S1 failed to have documentation that the entire center and play yard was checked on 10/6/2021 after the last child departed to ensure that no child is left unattended at the center. S1 stated she conducted the visual check at 5:30pm, however, forgot to document it before leaving the building.

Corrective Action Plan: Effective 10/7/2021, S1 stated she will put a note by the closing sign out sheet to remind herself to conduct and document that the visual check is completed daily to ensure they are not cited the deficiency again.