

Statement of Deficiencies

1503.A.-C.: General Liability Insurance Policy

Not Met

1503.A.-C.: A. A center shall maintain in force at all times current commercial liability insurance for the operation of the center to ensure medical coverage for children in the event of accident or injury.

B. A center is responsible for payment of medical expenses of a child injured while in the center's care.

C. Documentation of commercial liability insurance shall consist of the insurance policy or current binder that includes the name of the early learning center, physical address of the center, name of the insurance company, policy number, period of coverage and explanation of the coverage.

Finding:

1503.A.-C. Based on record review/interview(s) at approximately 2:26 p.m., S1 failed to have required documentation of current commercial liability insurance for the operation of the center to ensure medical coverage for children in the event of accident or injury. S1 stated (via telephone) she was driving to the hospital with S2, who is 28 weeks pregnant because she was not feeling well. S1 and S2 are the only staff with access to the licensing binder that has the center's current commercial liability insurance in it. S1 stated S3 and S4 would not be able to locate the binder or help the Specialist during the licensing inspection. Specialist was unable to review current commercial liability insurance.

Corrective Action Plan: Effective 10/27/2021, S1 stated (via telephone) she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this deficiency again.

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 record review/observation/interview(s) at approximately 2:27 p.m., S1 failed to have documentation of a daily attendance record for children that included the time of arrival and departure of each child and the first and last name of the person to whom the child was released from 3/30/2021 to 10/27/2021. Specialist observed 45 children ages one-years-old to five-years-old on the premises. S1 stated (via telephone) children are signed in and out electronically using the Brightwheel App. S1 stated (via telephone) she was driving to the hospital with S2, who is 28 weeks pregnant because she was not feeling well. S1 and S2 are the only staff with access to the children's attendance on the Brightwheel App and she did not feel comfortable giving S3 and S4 access to it. Specialist was unable to review the children's attendance.

Corrective Action Plan: Effective 10/27/2021, S1 stated (via telephone) she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this deficiency again.

1507.B.: Daily Attendance Records - Staff and Owners

Not Met

1507.B.: A daily attendance record for all staff members and owners shall be maintained that shall:

1. include the first and last name of the staff member or owner and arrival and departure times;
2. accurately reflect the staff members and owners on the center premises at any given time; and
3. be used to document staff members and owners who leave and return to the center during the day

Finding:

1507.B. Based on record review/observation/interview(s) at approximately 2:28p.m., S1 failed to have documentation of a daily attendance record for S1, S2, S3, S4, and S5, to include the time of arrival and departure. Specialist observed S3 and S4 on the premises with 45 children ages one-years-old to five-years-old. S1 stated (via telephone) stated staff sign in and out electronically using the Brightwheel App. S1 stated (via telephone) she was driving to the hospital with S2, who is 28 weeks pregnant because she was not feeling well. S1 and S2 are the only staff with access to staff's attendance on the Brightwheel App and did she not feel comfortable giving S3 and S4 access. Specialist was unable to review staff's attendance.

Corrective Action Plan: Effective 10/27/2021, S1 stated (via telephone) she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this deficiency again.

1507.E.: Daily Attendance Records - Visitors

Not Met

1507.E.: A daily attendance record for all visitors to include the name, date of visit, arrival and departure times, and the purpose of the visit.

Finding:

1507.E. Based on record review/interview(s) at approximately 2:29 p.m., S1 failed to have documentation of a daily attendance record for Visitor's to

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include first and last name, date of visit, arrival and departure times, and purpose of the visit from 3/30/2021 to 10/27/2021. S1 stated (via telephone) she was driving to the hospital with S2, who is 28 weeks pregnant because she was not feeling well. S1 and S2 are the only staff with access to the visitor's attendance records. S1 stated S3 and S4 would not know where to locate the visitor's log. Specialist was unable to review visitor's attendance records.

Corrective Action Plan: Effective 10/27/2021, S1 stated (via telephone) she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this deficiency again.

1707.B.1.&2.: Required Staffing - Staff-in-Charge

Not Met

1707.B.1.&2.: Staff-in-Charge. When the director or director designee is not on the premises due to a temporary absence of less than 11 consecutive business days, or during nighttime care hours, there shall be an individual appointed as staff-in-charge.

1. The staff-in-charge shall be at least age 21.
2. The staff-in-charge shall have the authority to respond to emergencies, inspections, parental concerns, and have access to all required information.

Finding:

1707.B.1.&2. Based on record review/observation/interview(s) at approximately 2:30 p.m., S1 failed to have an appointed Staff-in-Charge present on the premises when the Director or director designee is not on the premises due to temporary absence, there was not an individual at least 21 years of age appointed as Staff-in-Charge who is given the authority to respond to emergencies, inspections/inspectors, and parental concerns and have access to all required information. S1 stated (via telephone) she and S2 were driving to the hospital because S2 is 28 weeks pregnant and was not feeling well. S5 is usually the Staff-in-Charge, but she left (time unknown) for a dental appointment. S5 returned to the center at approximately 3:39 p.m., but stated she was unable to locate any files for Specialist to review because she did not have access to them. S1 and S2 are the only staff with access to the center's files.

Corrective Action Plan: Effective 10/27/2021, S1 (via telephone) stated she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this deficiency again.

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 observation/record review at approximately 1:56 p.m., S1 failed to meet the required child to staff ratio for children present at the center. During the initial walk-through, Specialist observed S3 with ten children (one-years-old) with 1 staff and S4 with thirty-five children (two-years-old to five-years-old) with 1 staff. The required ratio for children ages one-years-old is 7 children to 1 staff. Another staff was needed in order for the child to staff ratio to be met. The required ratio for children of a mixed age group of two to five-years-old is fifteen children per 1 staff person. Another staff was needed in order for the ratio to be met. S1 stated (via telephone) she and S2 were present earlier, but left to go to the hospital (time unknown) due to S2 being 28 weeks pregnant and not feeling well.

Corrective Action Plan: Effective 10/27/2021, S1 stated (via telephone) she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this deficiency again.

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1711.H.: Rest Time - Minimum Child to Staff Ratio

Not Met

1711.H.: Rest Time - Minimum Child to Staff Ratios

1. Sufficient staffing needed to satisfy child to staff ratios shall be present on the premises during rest time and available to assist as needed.
2. Children ages one and older may be grouped together at rest time with one staff member in each room supervising the resting children.

Finding:

1711.H. Based on observations/interview(s) on return visit on 10/28/2021 at approximately 12:32 p.m., S1 failed to have the required staffing present in the building during rest time to satisfy child/staff ratio as evidenced by 42 children ages one to five-years-old were present with 2 staff. During the initial walk-through S2, was present with thirty-two children ages one to five-years-old during naptime and S4 was present with ten children ages two-years-old during naptime. S2 stated S1 and S5 left the premises (time unknown) for their lunch break. Child to staff rest time ratio was met and sufficient when S6 arrived at approximately 12:35 p.m., S5 arrived at approximately 12:54 p.m., and S1 arrived at approximately 12:57 p.m.

Corrective Action Plan: Effective 10/28/2021, S1 stated staff will go back to ordering their lunch and having it delivered to the center, so that there is enough staff on the premises at all times, so she is not cited for this deficiency again.

1715.A.1.&3.: Staff Records and Personnel Files

Not Met

1715.A.1.&3.: Staff Members. Personnel files for each staff member shall be maintained at the center and shall include the following:

1. an application or staff information form containing the following information:
 - a. name;
 - b. date of birth;
 - c. home address and phone number;
 - d. training,
 - e. work experience;
 - f. educational background;
 - g. hire date; and
 - h. first day onsite working with children;
3. Upon termination or resignation of employment, the last date of employment and reason for leaving;

Finding:

1715.A.1.&3. Based on record review/interview(s) at approximately 2:39 p.m., S1 failed to have an application/staff information form to include name, date of birth, home address and phone number, training, work experience, educational background, hire date, and the first day onsite working with children for S3 (date of hire unknown). S1 stated (via telephone) she was driving to the hospital with S2, who is 28 weeks pregnant because she was not feeling well. S1 and S2 are the only staff with access to staff records. S1 stated S3 and S4 would not be able to locate the staff records or help the Specialist during the licensing inspection. Specialist was unable to review staff records.

Corrective Action Plan: Effective 10/27/2021, S1 stated (via telephone) she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this deficiency again.

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:

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1719.A.&B. Based on record review/interview(s) at approximately 2:45 p.m., S1 failed to documentation that 1 of 5 staff, S3, received orientation within seven days of the first day present at the center and prior to having sole responsibility for any children. Additionally, S1 failed to have documentation that 1 of 5, S3 (date of hire unknown), received additional orientation within thirty days of date of hire. S1 stated (via telephone) she was driving to the hospital with S2, who is 28 weeks pregnant because she was not feeling well. S1 and S2 are the only staff with access to staff records that contain orientation forms. S1 stated S3 and S4 would not be able to locate staff records that contain new hire orientation forms for Specialist during the licensing inspection. Specialist was unable to review S3's orientation form.

Corrective Action Plan: Effective 10/27/2021, S1 stated (via telephone) she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this deficiency again.

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/observation/interview(s) at approximately 2:47 p.m., S1 failed to have a CCCBC-based determination of eligibility for child care purposes from the department on S3, prior to her being present at the center or performing services. Specialist observed S3 supervising 10 children ages one-years-old in the classroom. Specialist was unable to determine S3's date of hire or when she began working on the premises. S1 stated (via telephone) she was driving to the hospital with S2, who is 28 weeks pregnant because she was not feeling well. S1 and S2 are the only staff with access to staff records. S1 stated she spoke to O1 last week regarding S3's status. O1 told her the system can kick people out. She stated she could not remember what else O1 stated about S3's status. S3 was not showing up in the CCCBC system and Specialist could not determine if she had an eligible or provisional status. S3 was observed leaving the classroom at approximately 3:39 p.m. when S5 entered the classroom.

Corrective Action Plan: Effective 10/27/2021, S1 stated (via telephone) she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this 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/interview(s) at approximately 3:50 p.m., S1 failed to have document that the entire center and play yard is checked after the last child departs to ensure that no child is left unattended at the center from 3/30/2021 to 10/27/2021. S1 stated (via telephone) she was driving to the hospital with S2, who is 28 weeks pregnant because she was not feeling well. S1 and S2 are the only staff with access to the end-of-day records. S1 stated S3 and S4 would not be able to locate the end-of-day records or help the Specialist during the licensing inspection. Specialist was unable to review end-of-day records.

Corrective Action Plan: Effective 10/27/2021, S1 stated (via telephone) she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this deficiency again.

1915.A.: Health Services - Observation

Not Met

1915.A.: Observation. Upon arrival at the center, the physical condition of each child shall be observed for possible signs of illness, infections, bruises or injuries, and when something is observed, it shall be documented and such documentation shall include an explanation from the parent or child.

Finding:

1915.A. Based on record review/interview(s) at approximately 3:54 p.m., S1 failed to have documentation of observations, when something is observed, noted on children upon arrival to the center. Results including an explanation from parent and/or child were not documented from 3/30/2021 to 10/27/2021. S1 stated (via telephone) she was driving to the hospital with S2, who is 28 weeks pregnant because she was not feeling well. S1 and S2 are the only staff with access to the daily observation records. S1 stated S3 and S4 would not be able to locate the daily observation records or help the Specialist during the licensing inspection. Specialist was unable to review daily observation records.

Corrective Action Plan: Effective 10/27/2021, S1 stated (via telephone) she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this deficiency again.

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1915.B.&C.: Health Services - Parental Notification

Not Met

1915.B.&C.:

B. Reporting. Incidents, injuries, accidents, illnesses, and unusual behavior shall be documented and reported to the parent no later than when the child is released to the parent or authorized representative on the day of the occurrence.

C. Immediate Notification. The parent shall be immediately notified in the following circumstances:

1. blood not contained in an adhesive strip;
2. head or neck or eye injury;
3. human bite that breaks the skin;
4. animal bite;
5. impaled object;
6. broken or dislodged teeth;
7. allergic reaction skin changes (e.g. rash, spots, swelling, etc.);
8. unusual breathing;
9. symptoms of dehydration;
10. temperature reading over 101° oral, 102° rectal, or 100° axillary; or
11. injury or illness requiring professional medical attention.

Finding:

1915.B.&C. Based on record review/interview(s) at approximately 3:56 p.m., S1 failed to have documentation of incidents, injuries, accidents, illnesses, and unusual behaviors from 3/30/2021 to 10/27/2021. S1 stated (via telephone) she was driving to the hospital with S2, who is 28 weeks pregnant because she was not feeling well. S1 and S2 are the only staff with access to the incident, accident, illness, and unusual behavior records. S1 stated S3 and S4 would not be able to locate the incident, accident, illness, unusual behavior records or help the Specialist during the licensing inspection. Specialist was unable to review incident, accident, illness, and unusual behavior records.

Corrective Action Plan: Effective 10/27/2021, S1 stated (via telephone) she will assign a Staff-in-Charge who will have access to the center's records in case of any emergencies, when she or S2 have to leave the center's premises, so she is not cited for this deficiency again.