

## 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:

- 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 interview(s): S1 failed to have a children's record for review for C1. S1 stated she had a record for C1; however, she is unable to locate it.

Corrective Action Plan: Effective 11/10/2020, S1 stated she will re-organize her children's records as soon as possible to ensure they are all easily accessible to ensure this deficiency is not cited 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 observations and interviews at 9:45 AM on 11/10/2020, S1 failed to meet the required child to staff ratio for children of the following ages: 8 children ages one and two-years-old (3 one-year-olds and 5 two-year-olds) with 1 staff. The required ratio for children of this age is 7 children per 1 staff person. S1 stated S2 is usually assigned to this classroom; however, she moved her to assist S1 while teaching a lesson to the three-year-old class as she needed assistance.

Corrective Action Plan: Effective 11/10/2020, S1 stated she will not move a staff from another classroom to assist her if it will cause the center to be out of ratio to ensure this deficiency is not cited again.

### 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 of this Section or when being provided services by therapeutic professionals, as defined in §103), 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:

## Statement of Deficiencies

1713.A&B&C: Based on observations and interviews at 11:00 AM on 11/10/2020, children failed to be under supervision at all times as Specialist observed a male child, age three-years-old, exit the center through the play yard exit without S1's knowledge. The child ran around on the play yard as Specialist reported the incident to S1. S1 initially did not realize a child was missing until about 2 minutes later when Specialist pointed the child out, standing outside near the play yard exit.

Corrective Action Plan: Effective 11/10/2020, S1 stated she will add a child proof door knob to the door as soon as possible to ensure this deficiency is not cited 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&: Based on interviews and observations on 11/20/2020, at 11:00 AM, 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, first day on-site working with children for S3. S1 stated she knows they have the document; however, it is not currently available as it may be at S4's home.

Corrective Action Plan: Effective 11/10/2020, S1 stated she will ensure that required documents remain in the center to ensure this is not cited again.

### 1715.A.2.: Photo Identification

Not Met

1715.A.2.: Personnel files for each staff member shall be maintained at the center and shall include the following:

2. copy of a state or federal government issued photo identification;

#### Finding:

1715.A.2. Based on interview(s) and observations: S1 failed to have a copy of S3's state or federal government issued photo identification available for review.

Corrective Action Plan: Effective 11/10/2020, S1 stated she will ensure she obtains this document when staff are hired to ensure this is not cited 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:

1719.A: Based on observations, interview and record review: S1 lacked documentation that S3 received orientation within seven days of the first day present at the center and prior to having sole responsibility for any children. S3's hire date was 10/12/2020. S1 stated she knows they have the document; however, it is not currently available as it may be at S4's home. S1 also failed to have documentation that S2 received orientation to the additional policies and practices of the center. S2's hire date was 7/20/2020.

## Statement of Deficiencies

Corrective Action Plan: Effective 11/10/2020, S1 stated she will ensure that required documents remain in the center as well as complete both the 7 day and 30-day orientation at the same time to ensure this is not cited 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 observations, interview, and record review at 11:00 AM on 11/10/2020, S1 failed to have documentation of an eligible CCCBC for S3 prior to her beginning work. According to the center's staff attendance log, S3's first day in the center was 10/12/2020. S3 was observed present at the time of Specialist inspection; however, she does not have an eligible CCCBC. S1 stated S3 has not yet completed a finger image due to her nearest location being closed. Specialist advised S1, S3 cannot be present in the center without an eligible CCCBC. S3 remained in the center at the time of Specialist departure.

Corrective Action Plan: Effective 11/10/2020, S1 stated she will familiarize herself with the nearest operating CCCBC finger image location and ensure staff receive an eligible determination prior to being present in the center to ensure this deficiency is not cited again.

### 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 interviews and record review at 10:30 AM on 11/10/2020, S1 failed to have documentation of all incidents of incidents, injuries, accidents, illnesses, and unusual behaviors which occurred in the center as. On 8/11/2020, C1, age seven-years-old, had a fight with an unknown child which caused a scratch to his neck. There was no documentation of this incident available. The last documented incident in the center occurred on 6/10/2020.

Corrective Action Plan: Effective 11/10/2020, S1 stated she will have a staff retraining regarding this regulation to ensure it is not cited again.