

Statement of Deficiencies

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/interview(s)/record review: On November 29, 2017, the Provider failed to meet the required child to staff ratio for children of the following ages: 9 children ages infant through one (3 infants and 6 one year olds) with 1 staff. The required ratio for children of this age is 5 children per 1 staff person. Upon arrival, Specialist observed S4 supervising a group of 9 children aged infant through one alone in classroom #2. S1 stated that the infants are combined with the one year old class at nap time. Specialist advised S1 that child to staff ratio must be met at all times when infants are included in their group.

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 and observations: Upon arrival on November 29, 2017, Specialist found that the Provider 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. 2 of 6 staff had documentation of this certification. S1 and S2 stated additional staff members have current CPR certification; however, they had left the facility on their lunch breaks.

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/observations: Upon arrival on November 29, 2017, Specialist found that the Provider 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. 2 of 6 staff had documentation of this certification. S1 and S2 stated that additional staff members have current PFA certification; however, they were on a lunch break away from the facility.

Statement of Deficiencies

1901-G.&H.: Equipment

Not Met

1901-G.&H.: All equipment used by children shall be maintained in a clean and safe condition and in good repair. Moveable equipment shall be secured and supported so that it shall not fall or tip over.

Finding:

1901-G: Based on observations and interview: All of the center equipment used by children was not maintained in good repair as Specialist observed a gray castle toy in play yard #2 and a yellow and blue climbing toy in play yard #1 that each had large cracks on them in reach of children. S2 stated that he will remove them from the play yard or repair them prior to allowing children to have access to them again.

1901-P: Staff Personal Belongings

Not Met

1901-P: The personal belongings of center staff members shall be inaccessible to children.

Finding:

1901-P Based on observations and interview: On November 29, 2017, Specialist found that the personal belongings of staff members was not inaccessible to children as Specialist observed S3's purse and can of soda stored on a low shelf in classroom #1. S3 stated that she sat it there upon returning from her break. Specialist observed that S3 removed her purse and soda can and stored them out of reach of children prior to Specialist departure.

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 and interview: Provider failed to have documentation of immediate parental notification of head or eye injuries as Specialist reviewed an incident report that read that on November 10, 2017 at 10:35 C1 fell and hit his eye on a table. Specialist found that this form has no documentation of parental notification. S7 and S8 stated that they believed that C1 only hit his head at 10:35 AM and were unaware that C1 had hit his eye until C1 awoke from nap with a black eye. S7 and S8 stated that the parent was not immediately called as there were no marks left. S8 stated that when C1's eye turned black, she notified the parent immediately.

Specialist also found that the center incorrectly documented the time of parental notification as on November 27, 2017 C2 was bit by another child. Specialist found that the time of parental notification was documented at 11:20 AM and there was no name of the staff member notifying the parent. S3 stated that she notified O2 at the time of pick up and not at 11:20 AM.

1919-D.2: Food Service and Nutrition - Choking Hazards

Not Met

1919-D.2: Children under age 4 shall not have foods that are implicated in choking incidents. Examples of these foods include but are not limited to: whole hot dogs, hot dogs sliced in rounds, raw carrot rounds, whole grapes, hard candy, nuts, seeds, raw peas, hard pretzels, chips, peanuts, popcorn, marshmallows, spoonful of peanut butter, and chunks of meat larger than what can be swallowed whole.

Finding:

1919-D.2 Based on observations: Center served foods to children under age 4 that are implicated as choking incidents as on December 6, 2017, Specialist observed 29 children aged 1 through 3 served whole cocktail sausages. S1 stated that center usually cuts these prior to service. Specialist observed center staff slice the sausage on the children's plates prior to departure.