

Statement of Deficiencies

713.A.: Office of Public Health, State Fire, City Fire Approval

Not Met

713.A.: Annual licensing inspections by the department, current approvals by the Office of Public Health, Office of State Fire Marshal, and city fire (if applicable), and academic approval by the department (if type III center) shall be required before the expiration of an existing license. However, if a center has documentation establishing that the center requested an inspection by the Office of Public Health or the Office of State Fire Marshal prior to the expiration of the existing license, these approvals may be submitted to the department within 90 calendar days of the date of the license renewal.

Finding:

713.A. Based on record review/Interview: Center failed to have State Fire Marshal approval for when the center switched owners. The center had until 11/1/18 to have State Fire Marshal do a re-inspection and they have not obtained the inspection as of 12/7/18.

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: A daily attendance record for all staff was not maintained, as on 12/7/18, Specialist observed S8 in the center but S8 failed to sign into the centers staff daily attendance logs.

1707.A.1.&2.: Required Staffing - Director or Director Designee

Not Met

1707.A.1.&2.: Director or Director Designee. Each center shall have a qualified director or qualified director designee.

1. The director or director designee shall be an on-site, full-time staff person at the center during the daytime hours of operation (prior to 9 p.m.). When the director is not an on-site full-time employee at the licensed location, there shall be a qualified director designee who is an on-site full-time employee at the licensed location.
2. The director or director designee shall be responsible for planning, managing, and controlling the center's daily activities, as well as responding to parental concerns and ensuring that minimum licensing requirements are met.

Finding:

1707-A.1&2 Based on Record Review/interview: The center's director is not an on-site full time employee of the licensed location and there was not an on-site full time qualified Director Designee given responsibility for for planning, managing, and controlling the center's daily activities, as well as responding to parental concerns and ensuring that minimum licensing requirements are met. On 12/7/18, Specialist reviewed staff attendance logs and observed that the assigned Director, S11, has not worked in the center since the opening on 9/1/18. The center has not had a licensing approved director designee on site full time since 9/1/18.

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: Center failed to maintain all staff files in the center as on 12/7/18, Specialist requested S12's file and after some time requested the file again. S6 stated that S12 had taken her file home and was on her way to bring it back to the center. S12 stated that she has had the file with her and did not realize it needed to be kept at the center.

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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/interview: Center failed to have all staff orientated within 7 days of hire and additional training within 30 days for S12. On 12/7/18, Specialist reviewed S12's file, the center failed to update the paperwork with the new hire date and orientation training for when the change of owners took place on 9/1/18.

1719.C.: Orientation Training - Transportation staff

Not Met

1719.C.: All staff members responsible for transporting children shall receive additional orientation training in the following areas prior to assuming their transportation duties:

1. transportation regulations, including the modeling of how to properly conduct a vehicle passenger check and demonstration by staff to director on how to conduct a vehicle passenger check;
2. proper use of child safety restraints required by state Law;
3. proper loading, unloading, and tracking of children as required by state law;
4. location of first aid supplies; and
5. emergency procedures for the vehicle, including actions to be taken in the event of accidents or breakdowns.

Finding:

1719.C. Based on record review/interview: All staff members responsible for transporting children did not receive additional orientation training prior to transportation duties. On 12/7/18, Specialist reviewed S12's file, the center failed to update the paperwork with the new hire date and orientation training for when the change of owners took place on 9/1/18.

2103.F.: Passenger Transportation Log

Not Met

2103.F.: Passenger Log

1. A current passenger log for each trip shall be used to track children and staff during transportation.
2. The log shall be maintained on file at the center and a copy shall be provided to the driver or monitor.
3. The following shall be recorded in the passenger log:
 - a. date the transportation is provided;
 - b. name of the child;
 - c. name of driver and staff members;
 - d. pick up and drop off locations;
 - e. time child was placed on the vehicle;
 - f. time child was released and name of the person or entity to whom child was released; and
 - g. signature of staff person completing the log.

Finding:

2103.F. Based on record review: the passenger log was not fully completed to show the time of the departure off of the bus 27 times from 9/1/18 until 12/6/18.

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2107.A.1.&2.: Visual Check of Vehicle

Not Met

2107.A.1.&2.: A visual passenger check of a vehicle is required to ensure that no child is left in the vehicle.

1. A staff person shall physically walk through the vehicle and inspect all seat surfaces, under all seats, and in all enclosed spaces and recesses in the interior of the vehicle.
2. The staff member shall record the time of the visual passenger check and sign the log, indicating that no child was left on the vehicle.

Finding:

2107.A.1.&2. Based on record review/interview: A visual passenger check of the center bus was not completed to ensure that no child is left in the vehicle. On 12/7/18, record review of the visual check logs for the bus showed that the center had not documented the visual checks from 9/1/18 until 12/3/18. The center only began to complete the visual check log on 12/4/18.
