

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 at approximately 2:11pm, S1 failed to maintain documentation of a current annual inspection and approval from Office of Public Health (center was not given approval) and Academic Approval (expired on 6/30/19).

Corrective Action Plan: S1 stated that she would contact the Office of Public Health to find out when an inspector would conduct a re-inspection. Also, S1 stated that she has contacted her licensing consultant to apply for an updated academic approval.

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 at approximately 12:35pm, S1 failed to document daily 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.

- On 7/26/19, a child's face was swollen on the right side. The explanation does not state if the parent or child explained what happened.
- On 8/12/19, a child had a scrape. There was no explanation from the parent of child documented.
- On 8/16/19, a child had scabs on his stomach. The explanation does not state if the parent or child explained what happened.
- On 10/9/19, a child had lice eggs. There was no explanation from the parent of child documented.
- On 11/11/19, a child had a bruise on the top of her forehead and under her right eye. There was no explanation from the parent of child documented.
- On 11/19/19, a child had a bruise on the forehead. There was no explanation from the parent of child documented.
- On 11/26/19, a child had a bruise on the head. There was no explanation from the parent of child documented.
- On 12/9/19, a child had a scratch on the eye. There was no explanation from the parent of child documented.

Corrective Action Plan: S1 stated that she would have a staff meeting to inform everyone to complete the daily observation everyday; as well as document whether the parent or child gave an explanation.

1921.A.: Emergency Preparedness and Evacuation Planning

Not Met

1921.A.: Emergency and Evacuation Plan. The director shall consult with appropriate state and local authorities and shall establish and follow a written multi-hazard emergency and evacuation plan to protect children in the event of emergencies that at a minimum shall:

1. address any potential disaster related to the area in which the center is located;
2. include procedures for sheltering in place, lockdown and evacuation to a pre-determined site for potential threats to the safety, health and well-being of children in care;
3. include specific procedures for handling infants through two year olds, including food and formula;
4. include specific procedures for handling children with special needs, including the evacuation and transportation of children in wheelchairs;
5. include a system to account for all children;
6. include a system, and a back-up system, for contacting parents and authorized third party release caretakers;
7. include a system to reunite children and parents following an emergency;
8. include procedures for providing information about the emergency plan to parents at the time of enrollment and when changes occur;
9. be reviewed annually for accuracy and updated as changes occur; and
10. be reviewed with all staff at least once per year.
11. practice drills shall be conducted at least twice per year to include all children and shall be documented.

Finding:

1921. Based on record review at approximately 11:45am, S1 failed to conduct and document practice drills at least twice per year. S1 stated that she conducted a fire drill on 9/16/19, but was unaware that she had to conduct another practice drill.

Corrective Action Plan: S1 stated that she will conduct her practice drills when she conducts her tornado drills.

1921.E.: Tornado Drills

Not Met

1921.E.: Tornado drills shall be conducted at least once per month in the months of March, April, May, and June at various times of the day necessary to include all children and shall be documented.

Statement of Deficiencies

Finding:

1921.E. Based on record review at approximately 11:55am, S1 failed to maintain documentation of tornado drills that were conducted at least once per month during the months of March, April, May, and June. S1 stated that she was unaware that a tornado drill had to be conducted at least once per month during March, April, May, and June.

Corrective Action Plan: S1 stated that she wrote when to conduct her tornado drills on her calendar and stated that she will conduct her tornado drills when she conducts her practice drills.
