

Statement of Deficiencies

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 observations and record review at 10:45 AM on 12/21/2020, center staff failed to have documentation that S2 and S3 received the required orientations within 7 and 30 days of hire. S2 was hired on 9/29/2020; S3 was hired 8/27/2020.

Corrective Action Plan: Effective 12/21/2020, S1 stated she will add the orientation sheet to the new hire packet as well as go back and ensure all current staff have received orientation to ensure this deficiency is not cited again.

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 through training approved by the department.

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 through training approved by the department.

Finding:

1723.A&B: Based on observations and record review at 10:45 AM on 12/21/2020, Center staff failed to 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 through training approved by the department. 1 of 5 staff present, S1, had documentation of this certification

Corrective Action Plan: Effective 12/21/2020, S1 stated she will speak with S6 as soon as possible to discuss scheduling this training to ensure this deficiency is not cited again.

1723.C.: Pediatric First Aid

Not Met

1723.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 through training approved by the department.

Finding:

1723>A&B: Based on observations and record review at 10:45 AM on 12/21/2020, Center staff failed to 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 through training approved by the department. 1 of 5 staff present, S1, had documentation of this certification.

Corrective Action Plan: Effective 12/21/2020, S1 stated she will speak with S6 as soon as possible to discuss scheduling this training to ensure this deficiency is not cited again.