

## CCLP/CCDF PROVIDER INSPECTIONS SUMMARY REPORT



Provider's Name: Loving Hands	Physical Address: San Antonio
Contact Person: Yeldez T. Javier	Contact Number: 235-0611
Category(s): Center Group Ho	me:
Date of Assessment: Aug. 9, 2016	Assessed By: Leilani Marciano, Safety Inspector Print Name
Type of Assessment: Preliminary_	Renewal Announced Unannounced: \(  \)
CCLP#:989 Date of issued: _3/28	Expiration Date: 3/24/17 Capacity: 58

### **Staff Child Ratio**

• The Provider met the Staff Child Ratio for their Infants, Toddlers, K-4&K-5, and the Pre-School level. Staffs are present and are within the ratio capacity. A floater (alternate staff) is readily available at the infant room.

## (1) Electrical

 The facility complies on all the electrical safety aspects. Nothing to report for any discrepancy or violations.

#### (2) Signage

- Important signage's are visible and posted on proper designated areas.
- Emergency drills will be conducted and schedule with the Provider.

### (3) Emergency

 Emergency equipment's are installed at the facility (landline, alarm smoke detector) to include emergency plans posted. Nothing to report for any discrepancy or violations.

#### (4) Sanitary

 The facility is odor free, practicing sanitizing continuously prevention from any bacteria. Clean towels are provided and being replaced daily as well as soap dispenser is readily available. Nothing to report for any discrepancy or violations.

### (5) Outdoor

 The facility outdoor playground is safe for children enrolled at this Day Care Center to utilized as well as fenced and gated. Nothing to report for any discrepancy or violations.

#### (6) Capacity

 The outdoor facility for this Provider complies with the required square footage of space per child. Nothing to report for any discrepancy or violations. (7) Health

• The children's health insurance and their emergency contacts are all readily available at the Providers facility file. The staff practices washing their hands before and after eating as well as properly sanitized continuously counter/table/chairs tops. Infants formula are properly stored. Nothing to report for any discrepancy or violations.

## (8) Documents

• The facility complies with the CCLP required documents to be submitted. Nothing to report for any discrepancy or violations.

## (9) Other

• Drinking water dispenser is readily available at all times for staff and children. *Nothing to report for any discrepancy or violations.* 

NOTE: Provider Assessment Monitoring checklist is available upon request.

Signature

Leilani I. Marciano, CCLP Safety Inspector



# CCLP/CCDF PROVIDER ASSESMENT REPORT



Business Name:	LOVING HA	ANDS	Physical Adda	ress:	SAN ANTONIO	
Primary Contact I	Person: OHET	DEZ Z. T. VAVIEL	Contact Num	ber:	235-0611	
2 <sup>nd</sup> Contact Person	n: 89	16	Email Address	s:		
Capacity: UB Max						
Date of Assessmen	it: <u>ÅUGUST</u>	09,2016 Asses	sed By: LE/L	ANI J. Prin	MANCIANO t Name	
Announce	d:	_ Unannour	nced:	Visit/Mo	onitoring	
	Type of	Assessment:	Preliminary_	_Renew	al	
CCLP#: <u>989</u> [	ate of issued	: <u>3/28/16</u> Expira	tion Date: (3/2	24/17Ca	pacity:GP_	
Grouping Clause Monitoring Inspection:						
<ul><li>(1) Electrical</li><li>(2) Signage</li></ul>	(3) Emergency (4) Sanitary	y (5) Outdoor (6) Capacity	(7) Heal (8) Docu	th uments	(9) Other	

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SAFETY & HEALTH	Yes	No	*Note(s)
Electrical cords securely installed on the wall, ceiling, walls and does not			
cross pathways. The facility indoor must designate and area for any kind of			
hazards such as; (sharp objects/edges, rust, chemical, etc.) in a secured area			
with locks at no access for the children. The facility has a safety padding on all	/		
areas of the children(s) presence to prevent from slipping or any type of injury.			
All outlets must be covered or blocked off (from a height of 7ft, and below;	/		
BSC recommendation) for electric shock safety purposes.			
(2) CCLP Licenses annual (60 days prior to the expiration date)	/		2
"No Smoking" and "Exit" signs posted around the facility/home vicinity at			X
least 2 "Exit Door access" and smoking not allowed within the vicinity.			
Provider does educate and explain to the children the procedure of the			
emergency evacuation plans and posted at child's eye level of every			
entrance/exit doors.			
Caregiver 18 years old or older	/		
(3) Provider must have post evacuation plans/signs to an emergency exit			
The facility or home/vicinity is equipped with a functional alarm smoke			
detectors mounted in each enclosed rooms.			
The facility or home is equipped with a fire extinguisher unit and is view, safe			
and at a convenient space.			
Lie Provider has a telephone landline installed within the			4
facility/home/vicinity for communication purposes with emergency contacts			
posted			
Create; post and practice involvement of the Emergency Evacuation plans and			
access.	/		
Hand book states center rate, enrollment, staff supervision schedule, daily			
activities schedule, emergency evacuation procedures, and alternative site.			
(3) First Aid kit is accessible and stationed at a noticeable space and must be			
updated at all times			
Conduct emergency and disaster drills once a month and continued being			
practiced thereafter			
Disaster drills (tsunami/earthquake/fire/flood)is conducted once every 6	/		210-21-00
months	/		
CCLP will conduct announced/unannounced emergency/disaster drills			WILL GET IT
Car seat are readily available upon transporting children with seat belt on. The	,		
facility's interior is in a good sanitary condition and odor free to include ample			
space for children and provider's movement.			
(4) Provide isolation area with clean, safe and pleasant space for a sick child		Ī	
arating from the other children while under the providers care.		1	

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continuation SAFETY & HEALTH	Yes	No	Note(s)
(4) Does the utilized cloth towels being replaced every other day with a cleaned towels?	/		
rovide isolation area with clean, safe and pleasant space for a sick child separating from the other children while under the providers care.	/		
For sanitary purpose, hand soap is a pump dispenser container.	/		
The Children(s) toothbrushes are covered individually at all times, stored in a stance and are accessible for children to brush their teeth after meal time (morning, afternoon & bedtime)	/		
The facility/home/vicinity installed a spotless child-size toilet or provided alternative tool that will enhance child's independence and sanitized after use			
A food crumbs in the kitchen/cafeteria is being cleaned right away and being disinfected on and before meal time and the rooms are free from any kind of scent/odor.		/	
Clean and disinfect napping area is done for each child's section @ minimum of 3 feet apart and separated by a sturdy shelve.	/		
All cleaning chemical supplies is stored and locked away out of the children's reach.	/		
Individual cloth towel or disposable paper towel, hand soap, and toilet tissue are provided and accessible at all times and changed daily.			
estrooms/Bathrooms disinfected, cleaned and free from odor at all times.			Sold of the Control o
Naptime blankets, pillow case are being replace twice a week if necessary	/		
Potty chairs are cleaned, disinfect at every use.	/		
(5) The outdoor playground is far from the main or street access road.			2
The outdoor playground must be enclosed/fenced and gated area.	-		
The playground is free from hazards (tripping hazards, sharp edges, rust, slippery risks, chemical pollutions, etc.).	/		and the second s
Outdoor equipment's are in good condition and age appropriate.	/		
Outdoor playground is far from the main access road with a enclosed fenced gated or solid wall	/		THE PARTY OF THE P
Outdoor playground is hazardous free(tripping, sharp edges, rust, etc.)	1		
(6) Outdoor meets a minimum 33% of facility capacity at 75sq. footage of space per child.	/		
Interior space accommodates a minimum of 35sq. footage of space per child.	/		
Providers accommodate children's learning space with 35 sq. ft.	/		
Providers obtained the children's records of their health, vaccination, allergies, etc as well the child's allergies must be visible.	/		
The eating area has ample space for children and adults for proper movements			
oviders must obtained a record of the child's TB clearance annually			

WALLEY.	1000			
1	continuation SAFETY & HEALTH	Yes	No	Note(s)
	Providers obtained child's hospital number, health insurance, emergency		/	
è.	ontact person(s) & alternate contact person with working phone numbers			
	Vinyl mat is in use in the changing area for convenient sanitation purposes			
	Hand washing is perform throughout the day on and after toileting/each diaper			
	changed or after outdoor/before and after meals.			
	All soiled diapers is being wrapped tight in a plastic bag and disposed in a		/	
	closed sanitary bin away from the children(s) eating area and out of the	./		
	children's reach			
	All food & formula is stored properly in a refrigerator or at the right		/	
	temperature			
	(8) Complete CCLP required documents submitted (30 days prior to the			
	expiration date), Business License, CCLP License, Staff Health Cert/Food			
	Handler Cert, CPR, DPW Occupancy Permit, Sanitation Permit, Fire Inspection			
	Report/Permit			
	(9) Comply with an open door policy.			
	Stove tops/butane stove are out of the children's reach with pots & pans			
	secured. The changing area is in a separate room away from the children(s)	1/4		
	eating area (kitchen/cafeteria).	MA		
	Providers & Staff does not use spanking, slapping or any kind of punishment	.11	/	
	as a means of discipline to manage the child's behavior	NA		
1	osted a comprehensible Daily Activity Schedule per grouping of children			

are being offered frequently

Note(s): Refer as the inspector identify a discrepancy(ies) as  $mark(\sqrt)$  no and informed/advised the provider with a verbal warning but will be noted or recorded.

Drinking water is available at all times, accessible to older children and infants

Safety Inspector Signat	ure:Leilan I./Marciano/CCLP	8/9/16 Date
Provider's Signature:	Thez Javier	8/9/16
	Print Name	Date





Date: <u>Au</u>	GUST 09, 20,	16		Time:	am
Provider's	Staff /Child Ratio	# of Staff	meet ratio	does not meet ratio	Comments
LOVING HAPD	s 4-5 yrs	/	~		
Note: Headstar	tage à Rin				
Inspector's Sign	ature: LE/LA Print	Name	TC/ANO	Date: 8/9/	16
Provider's Signs	ature: Dhz Print I			Date: 8 9 1 4	0





Date: \( \q \q \)	toppier 12 a	- HIMMEN	Time:	10:44 am		
Provider's	Staff /Child Ratio	# of Staff	meet ratio	does not meet ratio	Comments	
LIVING Hands.	1:7	3				
Note: Toanna,	Both, Debbi	e				
2 yr	· **					
Inspector's Signa	ature: LE/LANI Print N		)	Date: Aug	. 9, 2016	
Provider's Signa	ture: JOAnne	an on a	•	Date:8 9	14	.,
~ .	Print N	ame				





Date:	3914			Time: 10'.37 ar	γ
Provider's	Staff /Child Ratio	♯ of Staff	meet ratio	does not meet ratio	Comments
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Inspector's Sign	7 2-6 8 1-11 ature: LE/LAZ Print N	I I MARCINA		Date: 8/9/18	'e
Provider's Sign	ature: Norman Print Na	B. AQUIND	/	Date:	





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Date:	819116	<del></del>		Time: 10:34	
	Pre-S				
Provider's	Staff /Child Ratio	♯ of Staff	meet ratio	does not meet ratio	Comments
Rhonda	1:7	1			
		•			
					#1
Note: PRE-SO	2400L 3-4 yrs				
3-34rs					
4-4yrs					
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Inspector's Sign	ature: LEILANI ? Print N			Date: 🕳 8/9/	14
Provider's Signa	ature: RHONA		nf{	Date: 8 9 11	4





Date:	9/14 WFANT 5.Ki	_ ds.	Time	:_ 10:40 a	n	
Provider's	Staff/Child Ratio	♯ of Staff	meet ratio	does not meet ratio	Comments	
ISABEL	1: 3	Q				
1-6 month	ANTONIO  1-7 montes  1-1 montes  The state of the state o	Marcinus VI I. MARCI		Ploater Ms. B	-	: Resm - - -
Provider's Signs	GM nture: <u>JLADEUT</u> Print N	un andy	37	Date:	·	t - te
2.5.6	Print N	lame		Date.		