

CCLP/CCDF PROVIDER INSPECTION SUMMARY REPORT



| Provider's Name: P1- Loving Hands Kindergarten | Physical Address: Koblerville |
|---|-------------------------------|
| Contact Person: Yeldez Javier | Contact Number: 288-1004 |
| Category: Center: Group Home: | |
| Date of Assessment: January 29, 2018 Asses | sed By: George R. Fleming |
| Type of Assessment: Preliminary Renewal Announced Unannounced | : Monitoring: _√ |
| CCLP#: 1024 Date Issued: 06/16/2017 Expiration Date: 0 | 6/16/2018 Canacity: 33 |

Staff Child Ratio:

An inspection was conducted on the Loving Hands Kindergarten to ensure compliance with child care safety standards. Upon further inspection of the infant room, it was noticed that one caregiver and five toddlers were present. The caregiver was asked to provide the ages of the toddlers. The toddlers were under 24 months of age. In accordance with TITLE 55, SUBCHAPTER 55-40.1, Part 400, Subpart C § 55-40-1-426 (f) of the *CHILD CARE STANDARDS RULES AND REGULATIONS*, for every group size of six or less children between the ages of 12 to 24 months, it is required that for every third child within a group be supervised by one provider for a 1:3 staff to child ratio. Therefore, two caregivers were required to have been present in the infant room. As a result, Loving Hands Kindergarten is found to be in violation of the requirements set forth by the aforementioned publication within the CNMI Administrative Code. Furthermore, it is highly advised that a counseling session be scheduled with the Child Care Licensing Program office to provide technical assistance and guidance in developing a plan of action to reclaim and maintain compliance with the Child Care Licensing Program.

1. Electrical:

• The facility is in compliance with all electrical aspects of the Child Care Standards Rules and Regulations. *No discrepancies noted*.

2. Signage:

• Signages were clearly visible and posted within designated areas. *No discrepancies noted*.

3. Emergency:

 Emergency kits/equipment were properly installed and readily available. No discrepancies noted.

4. Sanitation:

A trash bin located next to the restroom was noted to be full. The director was made aware.
 Discrepancy was corrected on-site. No further action required.





5. Outdoor:

• The outdoor play area being utilized is a garage. This is acceptable as the garage itself does not contain hazards to children. However, objects such as potholes, a vehicle, and rocks in the main driveway are present and present safety concerns. It is advisable that the garage be enclosed to prevent access to children and provide a safe and healthy play environment.

6. Capacity:

• The facility capacity requirements are met per the issuance of a valid Occupancy Permit and observed during the CCLP Announced inspection. *No discrepancies noted.*

7. Health:

Children's health information is available for review by authorized personnel when needed.
Isolation room does not exist. However, procedures are in place. Upon notice of obvious
symptoms by staff members, parents/guardians are notified immediately to pick child up. If
parent/guardian is unable to do so, child is then transferred to isolation room for the remainder of
the day.

8. Documents:

• All required licenses and applicable documentation observed were current, clearly visible, and placed in an organized fashion. *No discrepancies noted.*

9. Other:

None

NOTE: It is highly advised that action be taken regarding the prescribed recommendations in this report.

Signature

George R. Fleming, CCLP Safety Inspector

Concurred by:

Gordon B. Salas, Acting CCLP Supervisor



Annour ad/Unannounced Staff / Child Inspection



| Date: //29// | ate: 1/29/18 | | Time: 1036 | | |
|-----------------|----------------------------|-------------|------------|---------------|----------|
| Provider's | Staff /Child Ratio | # of Staff | meet ratio | does not meet | Comments |
| | fadoller 5 | | | | |
| | (order 2 yrs) | | | | |
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| nspector's Sign | nature: Rook N | | | Date: | / F |
| 'rovider's Sign | $\mathcal{D}_{\mathbf{a}}$ | 2 Janie | ₩ | Date: 1/20 | 7/18 |



Annour d/Unannounced Staff/Child Inspection



Date: 1/2418

Time: /6/0

| Comments | • | |
|--------------------|------------|--|
| [O] | | |
| does not meet | | |
| meet ratio | \ | |
| # of Staff | 87 | |
| Staff /Child Ratio | K-3m5 (25) | |
| Provider's | | |

. Note:

Date:

Print Name

Inspector's Signature:

Dhez Ware Print Name

Provider's Signature:

Date: 1/29/18



7.

CCLP/CCDF PROVIDER ASSESSMENT REPORT



| Business Name: | Lourg Harel | Know | Physical Address | s: Kobberr/1 |
|---|-------------------|--|-----------------------------|-----------------------------|
| Primary Contact I | Person: Mez | Tour | Contact Number | s: <u>Kobberer//1</u> r: |
| 2 nd Contact Perso | | | | |
| Capacity: Ma | aximum: En | rolled: Catego | ry(s): Center: | _ Group Home: |
| Date of Assessmer | nt: 1/29/18 | Assessed By | r: <u>George I</u> Print | R. Fleming t Name |
| Announced: | Unannoun | ced: Visit, | /Monitoring: | - |
| Type of Assessme | nt: Prelimina | aryRenewal | | |
| CCLP#: <u>1029</u> Da | ate of issue: 4/4 | Expiration Da | te: <u>6/14/201</u> 4 Capa | acity: <u>33</u> |
| Grouping Clause | Monitoring Inspe | ection: | | |
| (2) Signage | | (5) Outdoor(6) Capacity | | (9) Other |
| Staff: 1. Sher 2. Jeans 3. Word, Fy 4. Jeans He 5. 6. | | | | |

| SAFEII & HEALIH | 169 | 110 | 11010(3) |
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| Electrical cords: Securely installed on walls, ceilings and does not pose as tripping | | Ī | |
| hazard on pathways. The facility indoor must designate an area for 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 | | | |
| yent from slipping or any type of injury. | | | |
| outlets must be covered or blocked off (from a height of 7ft and below; BSC | | | |
| recommendation) for electric shock safety purposes. | | | |
| © CCLP Licenses annual (60 days prior to the expiration date) | | | |
| "No Smoking" and "Exit" signs posted around the facility/home vicinity at 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 | | | |
| Provider must post evacuation plans/signs at every emergency exit | | | |
| The facility or home/vicinity is equipped with functional smoke alarm detectors mounted | | | |
| in each enclosed room. | | | |
| The facility or home is equipped with a fire extinguisher unit and is view, safe and at a | | | |
| convenient space. | | | |
| The Provider has a telephone landline installed within the facility/home/vicinity for | | | |
| communication purposes with emergency contacts posted | | | |
| Create, post, and conduct Emergency Evacuation drills in accordance with facility's | | | |
| Emergency evacuation plan. | | | |
| Hand book states center rate, enrollment, staff supervision schedule, daily activities | | | |
| schedule, emergency evacuation procedures, and alternative site. | | | <u> </u> |
| First Aid kit is accessible and stationed at a noticeable space and must be updated at | | | • |
| all times | | | |
| duct emergency and disaster drills once a month and continued being practiced | | | |
| thereafter | | | |
| Disaster drills (tsunami/earthquake/fire/flood)is conducted once every 6 months | | | 1:00 |
| CCLP will conduct announced/unannounced emergency/disaster drills | | | |
| 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. | | | |
| (5) Provide isolation area with clean, safe and pleasant space for a sick child separating | | 15. | |
| from the other children while under the providers care. | | | |
| continuation SAFETY & HEALTH | Yes | No | Note(s) |
| (6) Are used cloth towels being replaced every other day with cleaned ones? | | | |
| For sanitary purposes, 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/ installs a spotless child-size toilet or provided alternative tool that will | | | |
| enhance child's independence and is sanitized after use | | | |
| Food crumbs kitchen/cafeteria are cleaned immediately and disinfected on and before | <u> </u> | <u> </u> | |
| meals and rooms free from scent/odor | | | |
| n and disinfect napping area is done for each child's section @ minimum of 3 feet | <u> </u> | | |
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Safety Inspector Signature:

George R. Fleming

Date

ovider's Signature: _

Print Name

Date

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