

DEPARTMENT of COMMUNITY and CULTURAL AFFAIRS CHILD CARE LICENSING PROGRAM





Business Name: NMIS-1st STEP DAY CARE

Primary Contact Person: Darlene Sobremisana

2nd Contact Person: Levi Sobremisana

Inspection Date: 9/22/2021 Start Time: 9:05am

Physical Address: Susupe, Saipan

Contact Number: 288-4970

Email Address: josmick9802@yahoo.com

End Time: 10:20am Assessed By: Rita N. Olopai

Type of Assessment:

Initial: _

Renewal: √

Extension:

Concerns:

Announced: _ Follow-up: _

Visit (Monitor): <u>√</u>

Provisional: __ Unannounced: $\sqrt{}$

Date of Last Visit ____

Rorlin J.D.

Category(s):

Licensed: √

Certified: √

Type of Services:

Part 200: √

Part 300:

Part 400: √

Group Home Care: ___ Center Base: √

Family Home Care: _ Before/After (B/A) Pro.: $\sqrt{}$

Infant/Toddler: $\sqrt{}$

Capacity:

Total Occupants 188

Enrollment 131 children

No. of Staff 28 employees

Child Care No.:

License: CCL-1058

Certificate: C-013

Expiration Date: <u>10/29/2021</u>

The NMIS-1st Step Day Care original expiration date of Child Care License and Certificate was on July 31, 2021. However, due to the incomplete required documents to complete the renewal application, the provider was issued a Provisional License that will expire on the 29th of October, 2021.

Staff Child Ratio (No. of children ENROLLED / PRESENT/ CAPACITY / No. of staffs in each AGE-GROUP or room):

INFANT:

(6-to-17 mos. old) 20 O/L – 11 enrolled

9 presence/3 staff

TODDLERS:

(22-to-30 mos. old)

Rm. 16: 11 O/L-8 enrolled/5 presence/2 staff Rm. 17: 10 O/L-8 enrolled/6 presence/2 staff

K-3:

(3 years old)

11 O/L-9 enrolled 9 presence/2 staff

K-4:

(4 years old) 11 O/L – 10 enrolled

10 presence/1 staff

K-5:

(5 years old)

Rm. 2: 8 O/L-6 enrolled/

6 presence/1 staff Rm. 3: 13 O/L-10 enrolled/

10 presence/2 staff

B/A SCH.:

(6-to-13 years old)

Rm.10: 17 O/L-13 enrolled/2 staff

Rm.13: 15 O/L-12 enrolled/2 staff

Rm.12: 12 O/L-10 enrolled/1 staff

Rm.11: 11 O/L- 9 enrolled/1 staff

Rm.14/15: 8/8 O/L - 5/5 enrolled/1 staff

Rm.01: 33 O/L-10 enrolled/2 staff

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DEPARTMENT of COMMUNITY and CULTURAL AFFAIRS CHILD CARE LICENSING PROGRAM

INSPECTION SUMMARY REPORT



Grouping Clause Monitoring Inspection:

(1) Documents

- (3) Sanitary
- (5) Capacity
- (7) Electrical

(2) Health

- (4) Signages
- (6) Emergency
- (8) Outdoor
- (1) Documents Incompliance to completing required documents. The provider was issued a provisional license during the renewal process of the center's Child Care License and Certificate applications due to the lack of updated documents.
- (2) Health No deficiencies. However, recommend to create a maintenance record for each room within the facility to ensure that educational materials and furniture in the room are disinfected daily and sanitized occasionally as needed. In addition, a suggestion to have the children's health insurance and hospital number in their file in an event of emergency and to organized each child's file.
- (3) Sanitary No deficiencies.
- (4) Signages No deficiencies.
- (5) Capacity No deficiencies. Although room 14 and room 15 are within the staff/child ratio for before/after school age of 1 staff to 10 children, the 2 rooms are enclosed with a door that is situated between both rooms. Since the rooms are separated that provides minimal visibility for the teacher assigned, another teacher for one of the rooms is recommended. The center director acknowledged to assign 2 teachers for each room.
- (6) Emergency No deficiencies.
- (7) Electrical No deficiencies.
- (8) Outdoor No deficiencies. The playground is enclosed, shaded, and furnished with child-size slide, tricycles, basket ball rim, and balls.

With all that is mentioned above, a proposal for your approval to proceed with the renewal of C.C. license and C.C. certificate for NMIS-1st Step Day Care.

NOTE: Provider Assessment Monitoring checklist is available upon request.

Reported By: _

CCLP Staff

Approved By: Gordon B. Sala

CCLP Supervisor

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DEPARTMENT of COMMUNITY and CULTURAL AFFAIRS CHILD CARE LICENSING PROGRAM (DCCA/CCLP)





Business N. A. MIS - 15T S.T D.	
Business Name: NIGO Day Care Physical Address (SUSUM) COO	
Primary Contact Person: <u>Davien Sobremisana</u> Contact Number: 234-6648	
2nd Contact Person: Levi Sohrem Bana	
Date of Inspection: 9:22-2/ Start Time: 9:05 F 17:	M
Date of Inspection: 9:22-21 Start Time: 9:05 End Time: 10:20 Inspector(s): RU Oloyai	
Type of Assessment: PRELIMINARY	
MONITOR/VISIT V NEW SITE CONSTRUCT	
UNANNOUNCED V	
G :	
Certified	
Type of Child Care Services: FAMILY HOME _ GROUP HOME _ CENTER BASE	
INFANT/TODDLER V BEFORE/AFTER (B/A) SCH.	
Capacity: Total Occupants 188 Enrollment	
Child Care No.: License: CCL-1058 Certificate: C-0/3 Expiration Date: 10.39.3/(P.L.) Age-Group (Per Room – list the O/L, enrollment, # present, age range, # of staff assigned):	
Age-Group (Par P	
20/11/3-9p HO Rm3 (62-71m) Rm 2 (50-61m)	
1/9/3	
K-4:	
Pm 17-10/6/ (5-13/3/2/5) R-10: 17/13/2/53	1
Rm 16-11/8/2- 5p +3 (5-74) Rm 16-11/8/2- 5p +3 (5-74) Rm 17-10/8/2- 6p 11/10/1 R-14: \$ 10/11/1(0-1)/3: 15/13/2 (5-74) (16m-22m) 15:18 10/11/1(0-1)/3: 15/13/2 (6-84) 10:12: 12/10/1 (6-8)	s.) s.)
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	
Grave Classic Classic Classic Completed Provider — # of Provider Completed	
(1) DOCUMENTS (2) HEALTH	
(5) CAPACITY (6) EMERGENCY (7) ELECTRICAL (4) SIGNAGES	

- (4) SIGNAGES (8) OUTDOOR

- (7) ELECTRICAL

(1) Without hair	T	_/	V
(') villiout being reminded provide	-	V	X NOTE
			Wegative training clearar
(1-a) The renewal process of the facility/staff			done to asspired docume
The double is to though the second			the dolume
document expiration date.			V
(1-b) The renewal application packet was received within 60 days prior to the expirate.		1	Orange al al XIII
within 60 days prior to the expiration of the existing Child Care license/certificate.			The que gate to sur
(1-c) Directors (15)			100 011 60 6/1/22 0/ comple
(1-c) Directors notifies and encourages all staff to		-	Romanded the que pate to sur app will be 6/1/22 e/comple avaid required doos.
	1		0
(1-d) All Childcare staff in a license to	+	+	
center/school has accrued 15 hours of			
training/technical assistance (T/TA) is			
development annually.			
(1-e) Upon completed T/T/ the and the		pd.	47/
(1-e) Upon completed T/TA, the center director (or authorized person) must inform and submit		X	NA
attended staff supporting and submit	11	1	7
attended staff supporting documents (of T/TA			
The strict of th	1		
atteridance) for verification			
(1-f) All childcare staff in a licensed and certified			
The strong of th	1		
(1-9) Newly approved staff was informed by	_	_	
	1		
(1-11) New Staff must complete the			
training within 3 months from the date of their	1		
- PPIOVAI.	/		
(1-i) While working to complete the pre-service			
training the new staff is assistant the pre-service			
training, the new staff is assigned to assist a certified staff.			
serunou stant.	/		
(1-j) The center director (authorized persons) is			
TOPOLIOIDIC IO COMPACINA I			
The region of the life was a series of the s			
idividually.	1		
1-l) Subsidized children are signed in/out on the		+	
The street daily	1		
1-m) Provider conforms with the open-door policy.	-		
me with the open-door policy.		~	Non wester Walt
HEALTH	-		<i>F//</i>
2) All enrolled children are updated with their	/ :	X	NOTE
nedical documents (immunicated with their	1		A A
nedical documents (immunization, dental,	/		need to be organize
evelopmental screening, etc.).			need to be oraquial
2-a) All listed staff provides a valid supporting			0.4
riedical) document that cleared them with			U
TOTAL COLUMN TO THE TAX TO THE TA			
iberculosis.	1		
Described them with the property of the described them with the property of the described them with the property of the proper	-	+	

(2 ·) P	-		
(2-c) Records of the daily health check is			
		1	
The second secon			
child's allergy.		1	
(2-e) A cozy and comfortable room for a sick child is available (Isolation Room)		V	
is available (Isolation Room).		1	
(2-f) Children's moole and 6	4		
(2-f) Children's meals and formulas are stored at proper temperature.			
	~		
(2-g) Facility is furnished with age-appropriate educational items.			
	V		
(2-h) Furniture and equipment are in a good and safe condition for the children's	+	/	
	1		
(2-1) The use of adaptive tools is set		+	
the children.	1		
(2-j) Hand washing is performed throughout the	+-	+	
	1,		
	1		
2-K) Proper hand-washing for 20	+	_	
	1		
2) The use of hand canifizor is a self to	-		
	1	1	
2-m) Facility is equipped with adapted.			
	/		
2-n) Comfort rooms are furnished with toiletries	1		
Tank Coup, paper rower tollot tion	1	-	
2-o) Toiletries are stationed in an area that is safe	/		
nd accessible to the children.			
2-p) All trash bins are sealed with covers.	1	/	
Type and on birds are sealed with covers.	/		
CABING			
SANITARY The facility is good to	$\sqrt{}$	X	NOTE
The facility is generally odor-free, clean and utter-free (floors swept, works			NOTE
TION OF THE PROPERTY OF THE PARTY OF THE PAR			
a) oldii die idiiiidi with the measure	/		
odon water for Sanitizing and disinfert	1		monthly over to
b) The bleach/water solution is made daily and corded.			Millionia, And
	1		Classiff manting
3-c) The mixture of bleach/water is and fit			I THOMAN TO THE

SIGNAGES		11	44
(4) The Child Care Licenso/Contistant	-	V	X NOTE
		/	
(4-d) Posting of the facility's required.		9	
at view and are updated.	S		
(4-b) Staff required documents are valid, filed individually and accessible for			
individually and accessible for review.		/	
(4-c) "No Smoking" and/or "Exit" signs are posted in an appropriate area and is not	,		
in an appropriate area and it signs are posted			
	1		
(4-d) Evacuation plan is posted beside all entrance/exit doors.		/	
Contractice/eXit (100) te	-		
(4-e) Emergency contact number is posted near		/	
	-		
(4-1) Certificate of occupant and the	-	_	
Life of the final is noticed at the first of	/		
3) Daily activities scrientile is nosted at visite	-		
	/		
(4-h) DCCA/CCLP's and CCDF's contact	+		
information is posted at parents/visitors view.	1		
parents/visitors view.	1		
CADACUM			
(5) The total number of the	V	X	NOTE
(5) The total number of staff and enrolled children			NOTE
The state of the s	1		
To a) The stall/cillio ratio is mot in social	1		
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	/		
todoll allo lini he counted in the	/		
(5-d) With the exceptions of an emergency, special situation (but not to exceed 40 by			
	/		
	1		
() O'maren's loster with assigned stoff:			
Piovided IIIOniniv	/		
(5-f) Provider notify the CCLP with any revision of			
the approved staffing.	/		
EMEDOENCY			
EMERGENCY (6) Provider's current arr	$\sqrt{}$	X	NOTE
(6) Provider's current emergency preparedness			NOTE
and response plan (EPRP) is approved by the Child Care Program.	/		
o ma oaic i judiam			
(6-a) Submission of the changes to the approved	/		
- It is within 5 days from the date of revision	-		
/6 h) Ctaff			
(Ob) Stall are aware of the FDRD and their			
responsibility.			
responsibility. (6-c) Facility is equipped with at least 2			
(Ob) Stall are aware of the FDRD and their			

THE REST OF THE RE			
(6-d) All entrances/exits doors are kept clear of clutter and etc.			
(6-e) Emergency drills (alternating) are performed and recorded monthly		1	
and recorded manufills (alternating) are performed			
and recorded monthly.		1	
(6-f) Disaster drills (alternating) are conducted an recorded every six months	7	\dashv	
recorded every six months.	4	/	
(b-g) Records of all drills are seen it		-	
(VII) I acility is equipped with!			
	r -		
(6-i) Fire extinguisher is located in a safe and			
convenient space.		/	
(6-i) First aid kit is quallable	6	1	
(6-j) First aid kit is available and accessible.	-		
(6-k) First aid kit is filled with update medical supplies.			
	1		
(6-I) Facility is furnished with sufficient number of			
(6-m) Smoke alarm are installed in each enclosed room of the facility	+	-	
	1		
(6-n) In the event a child gets burt in the	+	-	
THE GOOD THE HECOTAGE	1	1	
(6-o) Parents are notified immediate			
(6-o) Parents are notified immediately if their child is injured (minor/major) in the			
Jaroa (IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	1		
(6-p) An incident report (minor/major) is issued to		/	
The Parcials of the flav of the accident	/		
(0-q) incidents that involve modical and		-	
and/or enforcers must be reported to CCLP.	1		
FIECEDICAL			
ELECTRICAL	-/	V	
(7) Fuse box is covered and located out of		X	NOTE
(7) Fuse box is covered and located out of children's reach.	√	X	NOTE
(7) Fuse box is covered and located out of children's reach.	√ /	X	NOTE
(7) Fuse box is covered and located out of children's reach. (7-a) Electrical outlets not in use are covered.	1	X	NOTE
(7) Fuse box is covered and located out of children's reach. (7-a) Electrical outlets not in use are covered properly or blocked from children's reach.	√ /	X	NOTE
(7) Fuse box is covered and located out of children's reach. (7-a) Electrical outlets not in use are covered properly or blocked from children's reach. (7-b) Overload of an electrical outlet in the control of the control outlet in the control	√ /	X	NOTE
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Exit Review & Acknowledgment:	
I, Darley J. Sobremicans, herethe discrepancies found during the visit. Therefore frame recommended.	by acknowledged that the CCLP staff(s) assessed and notified are, I attest to address the stated deficiencies within the time
Authorized Personnel Signature/Date:	2 09/22/21
Reported By:CCLP Staff & Signature	Date: 09. 22.2/
Approved By: Gordon B. Salas CCLP Supervisor	Date:
1) Current thealth Ins. 3) Consent B) Hosp. #	