

Rhode Island Department of Human Services Child Care Center and School Age Program Monitoring Checklist

Renewal/ Monitoring Visit

Visit Information			
Visit Date: March 28, 2022	Visit Start Time: 11:30 am	Visit End Time: 12:00 pm	
Name of Licensor: Stephanie Lutrario			

	Provid	er Information	
Program Name: Lollipop Learning Cer	nter, LLC-Pre-K		
Provider ID: 44196		License Expiration Date: December 31, 2022	
Email Address: lollipoplearningcenterllc@yahoo.com		Telephone Number: 401)764-0468	
Street Address: 2770 Hartford Avenue		State: RI	
City: Johnston		Zip Code: 02919	
Administrator On-Site at Time of Visit:		Maria Evangelista	
Education Coordinator On-Site at Time of Visit:		Amanda Theriault	
School Age Coordinator On-Site at Time of Visit: (if applicable)			
Current Licensed Capacity		Total Staff Employed	
I/T:			
PS:	20	4	
SA:			

Classroom:	Age Group:	# of children	#of staff	# of others	Activities Observed:
РК	4-5	17	2		lunch and preparing for nap time

	Inspections 1.7.A.2.a-c				
Fire	Compliant	Expiration Date November 4, 2021			
Lead	Compliant	Expiration Date October 18, 2023			
Radon	Compliant	Expiration Date October 29, 2022			
Comments:	Comments: Center requested a fire inspection via the portal in September 2021 and is waiting for the fire marshal to come out.				

	Child Care and School Age Program Regulations 218-RICR-70-00-1			
ection	Requirement Description	Compliant Status	Remarks	
7 Physical Facil No violations for		-		
1.7.B.1 (Medium risk)	The construction of new buildings or outdoor space for the use of children, or the renovation/modification of existing buildings or outdoor space used by children requires approval by the Department.	Not Applicable		
1.7.C.6 (Medium risk)	Each classroom and activity space has artificial lighting that is intact and in good working order.	Compliant		
1.7.C.7&a. (Medium risk)	The temperature in all classrooms and other spaces used by children is maintained within a range of 65° F – 74° F at the children's height. In an infant classroom, the temperature should be a minimum 68° F at the height of the crib.	Compliant		
1.7.C.9 (High Risk)	All classroom and program exits/egresses are: a. clearly identified; and b. free of clutter around the area of the door.	Compliant		
1.7.C.11 (High Risk)	All entrances to the program are kept locked with mechanisms in place for monitoring entry. a. If at any time an entrance to the program is unlocked, a designated staff person is required to directly monitor all entries/exits from the program and is then responsible for re-securing the entrance.	Compliant		
1.7.G.8 (High Risk)	Programs with a pool must comply with the Rhode Island Department of Health Rules and Regulations for Licensing of Aquatic Venues, 216-RICR50-05-4. a. The pool license must be posted in a visible area. b. If a program's pool has been deemed by the Rhode Island Department of Health as a status of "voluntary close" it is not permitted for children's use, until such time that the Rhode Island Department of Health changes the status. c. The use of diving boards is not permitted.	Not Applicable		
1.7.H.1 (High Risk)	Programs are wholly responsible for ensuring that all parts of the licensed facility and program grounds are maintained in a way that ensures health and safety of children, staff, and visitors at all times.	Compliant		
.8 Health, Safety ∃No violations fo				
1.8.C.3 (High Risk)	A daily log is maintained of every medication administered. This record includes the: a. child's name; b. name and dosage of medication administered;			
	d. name and signature of the person who administered the medication; and e. name of the licensed physician, physician's assistant, or nurse practitioner	Compliant		
1.8.C.6 (High Risk)	d. name and signature of the person who administered the medication; and	Compliant Compliant		
	 d. name and signature of the person who administered the medication; and e. name of the licensed physician, physician's assistant, or nurse practitioner prescribing the medication. Medications are stored: a. In clearly labeled original containers; b. In spaces secured with child safety locks that are separate from any items that attract children; and 			
(High Risk)	 c. date and time administered, d. name and signature of the person who administered the medication; and e. name of the licensed physician, physician's assistant, or nurse practitioner prescribing the medication. Medications are stored: a. In clearly labeled original containers; b. In spaces secured with child safety locks that are separate from any items that attract children; and c. In a way that does not contaminate play surfaces or food preparation areas. The facility, equipment, and materials are clean, free of hazards, and kept in good repair. Toxic substances and any other items of potential danger to children are clearly labeled and are in an area that is secured by a child safety lock.	Compliant		
(High Risk) 1.8.G.1 (High Risk) 1.8.G.3	 c. date and time administered; d. name and signature of the person who administered the medication; and e. name of the licensed physician, physician's assistant, or nurse practitioner prescribing the medication. Medications are stored: a. In clearly labeled original containers; b. In spaces secured with child safety locks that are separate from any items that attract children; and c. In a way that does not contaminate play surfaces or food preparation areas. The facility, equipment, and materials are clean, free of hazards, and kept in good repair. 	Compliant Compliant		
(High Risk) 1.8.G.1 (High Risk) 1.8.G.3 (High Risk) 1.8.G.7 (High Risk)	 c. date and time administered, d. name and signature of the person who administered the medication; and e. name of the licensed physician, physician's assistant, or nurse practitioner prescribing the medication. Medications are stored: a. In clearly labeled original containers; b. In spaces secured with child safety locks that are separate from any items that attract children; and c. In a way that does not contaminate play surfaces or food preparation areas. The facility, equipment, and materials are clean, free of hazards, and kept in good repair. Toxic substances and any other items of potential danger to children are clearly labeled and are in an area that is secured by a child safety lock. The program posts and follows a regular cleaning and sanitation schedule, including provisions for deep cleaning. Staff wash their hands, and ensure children wash their hands, with liquid soap and warm running water as needed.	Compliant Compliant Compliant		
(High Risk) 1.8.G.1 (High Risk) 1.8.G.3 (High Risk) 1.8.G.7 (High Risk) 1.8.H.2 & 1.8.H 3 (High Risk) 1.8.J.1&2 (Medium Risk)	 C. date and time administered; d. name and signature of the person who administered the medication; and e. name of the licensed physician, physician's assistant, or nurse practitioner prescribing the medication. Medications are stored: a. In clearly labeled original containers; b. In spaces secured with child safety locks that are separate from any items that attract children; and c. In a way that does not contaminate play surfaces or food preparation areas. The facility, equipment, and materials are clean, free of hazards, and kept in good repair. Toxic substances and any other items of potential danger to children are clearly labeled and are in an area that is secured by a child safety lock. The program posts and follows a regular cleaning and sanitation schedule, including provisions for deep cleaning. Staff wash their hands, and ensure children wash their hands, with liquid soap and warm running water as needed. A daily health check is conducted on each child as soon as possible after the child arrives at the program. If a child presents with symptoms of concern, staff: a. Document the findings; b. Determine the needs of the child and make accommodations as necessary; and c. Notify the parent/guardian, as necessary.	Compliant Compliant Compliant Compliant		
(High Risk) 1.8.G.1 (High Risk) 1.8.G.3 (High Risk) 1.8.G.7 (High Risk) 1.8.H.2 & 1.8.H 3 (High Risk) 1.8.J.1&2	 c. date and time administered, d. name and signature of the person who administered the medication; and e. name of the licensed physician, physician's assistant, or nurse practitioner prescribing the medication. Medications are stored: a. In clearly labeled original containers; b. In spaces secured with child safety locks that are separate from any items that attract children; and c. In a way that does not contaminate play surfaces or food preparation areas. The facility, equipment, and materials are clean, free of hazards, and kept in good repair. Toxic substances and any other items of potential danger to children are clearly labeled and are in an area that is secured by a child safety lock. The program posts and follows a regular cleaning and sanitation schedule, including provisions for deep cleaning. Staff wash their hands, and ensure children wash their hands, with liquid soap and warm running water as needed.	Compliant Compliant Compliant Compliant Compliant		

a. A parent/guardian must sign the written injury report. (Medium Risk) b. Parents/guardians are notified of injuries on the same day of the injury. c. A copy of this report is placed in the child's file. d. The injury, first aid and parent/guardian communication are recorded in the program's daily health log. A choke-saving poster that outlines the Heimlich Maneuver, is prominently 1.8.J.6 (Medium Risk) displayed in any area where children eat. Compliant 1.8.K.1 Program furniture must be clean, durable, maintained in good repair and free of Compliant (Medium Risk) hazards 1.8.K.3 Programs serving Infants and/or Toddlers have a choke prevention gauge readily Not Applicable (High Risk) available All bedding used on cots must be removed in between uses and safely stored in 1.8.K.7 Compliant (Medium Risk) individual plastic bags, or comparable means, to prevent contamination There is one (1) assembled evacuation crib equipped with wheels for every five (5) 1.8.K.9 Not Applicable (Medium Risk) children under two (2) years of age, accessible in case of emergency. 1.8.K.10 Evacuation cribs are to remain empty of materials and accessible for use in case of (Medium Risk) an emergency. a. In the event of an emergency, the evacuation cribs are used to safely remove Not Applicable children from the facility. b. Evacuation cribs may be utilized for sleeping children at naptime. 1.8.L.1&2 The program develops and implements an individualized, written plan to prepare for and respond to potential emergency/disaster situations. This plan is appropriate to (High Risk) Compliant support the needs of all children in the program and must be approved by the Department 1.8.L.4 An individualized graphic evacuation plan identifying alternative escape routes is (High Risk) posted in each classroom. Compliant 1.8.L.5 All required emergency phone numbers are posted in a conspicuous place adjacent (High Risk) to the telephone. Compliant The program Administrator or designee conducts regular safety drills. 1.8.L.6 (High Risk) a. One (1) fire drill is conducted every month the program is in operation, with no more than three (3) drills delayed for weather. b. Every fourth (4th) drill must be obstructed, by means of not using one (1) of the typical exits/egresses. The other drills may be unobstructed. Compliant c. Two (2) shelter-in-place drills are conducted every twelve (12) months. A record of all safety drills is maintained. e. Programs with Night Time Care conduct an additional set of safety drills during the night time hours of operation. 1.8.M.7 Menus for meals and snacks are planned and are posted weekly. Compliant (Low Risk) Drinking-water is readily available and offered throughout the day, especially 1.8.M.10 & 11 (Medium Risk) before, during and after outdoor play. Drinking-water supplies are located in or near Compliant classrooms and activity rooms. 1.8.N.1 For each child with food allergies or special nutritional needs, the program requests (Medium Risk) that the parent/guardian obtains a care plan from the child's health care provider Compliant 1.8.N.2 The program makes provisions for protecting children with food allergies from (High Risk) contact with the allergen(s). Compliant The program asks the parent/guardian of a child with food allergies to give consent 1.8.N.3 (Medium Risk) for posting information within the program about that child's food allergy. a. If consent for posting is provided, that information is posted in the food preparation area and in the areas of the program the child uses. b. If consent for posting is not Compliant provided, then this information is shared verbally with all relevant staff, including substitutes, and is documented in the child's file. If consent for posting is not provided, then this information is shared verbally with all relevant staff, including substitutes, and is documented in the child's file. 1.9 Routine Care of Children No violations found Not applicable as Program does not offer infant/toddler care 1.10 Enrollment and Staffing No violations found 1.12 Administration ✓No violations found 1.13 Learning and Development No violations found

3/29/22, 10:30 AM

Staff File Requirements Reference: 1.12. F.10			
F <u>or Non-Compliant Items:</u> High Risk - Must be fixed within 24 to 48 hours Medium Risk - Must be fixed within 1 week Low Risk - Must be fixed within 1 month			
Staff A ☑No violations found	Staff B ☑No violations found	Staff C ☑No violations found	
Non-Compliant Items	Non-Compliant Items	Non-Compliant Items	
High Risk:	High Risk:	High Risk:	
Medium Risk: Low Risk:	Medium Risk: Low Risk:	Medium Risk: Low Risk:	
Compliant Items:	Compliant Items:	Compliant Items:	
Personnel Sheet (a)	Personnel Sheet (a)	Personnel Sheet (a)	
Criminal Records Checks (c)	Criminal Records Checks (c)	Criminal Records Checks (c)	
Clearance of Agency Activity check (d)	Clearance of Agency Activity check (d)	Clearance of Agency Activity check (d)	
Job Description (b)	Job Description (b)	Job Description (b)	
Notarized Criminal Record and Employment	Notarized Criminal Record and Employment	Notarized Criminal Record and Employment	
Record Forms (e)	Record Forms (e)	Record Forms (e)	
Health records as required by the RIDOH (g)	Health records as required by the RIDOH (g)	Health records as required by the RIDOH (g)	
Training Plan (j)	Training Plan (j)	Training Plan (j)	
Documentation of participation in orientation (k)	Documentation of participation in orientation (k)	Documentation of participation in orientation (k)	
(Orientation must include recognition and	(Orientation must include recognition and	(Orientation must include recognition and	
reporting of child abuse and neglect 1.11.E.2)	reporting of child abuse and neglect 1.11.E.2)	reporting of child abuse and neglect 1.11.E.2)	
Proof Professional Development (I)	Proof Professional Development (I)	Proof Professional Development (I)	

<u>For Non-Compliant Items:</u> High Risk - Must be fixed within 24 to 48 hours Medium Risk - Must be fixed within 1 week			
Low Risk - Must be fixed within 1 month Child A No violations found	Child B ⊠No violations found	Child C ▼No violations found	
Non-Compliant Items	Non-Compliant Items	Non-Compliant Items	
High Risk:	High Risk:	High Risk:	
Medium Risk:	Medium Risk:	Medium Risk:	
Low Risk:	Low Risk:	Low Risk:	
Names of individuals to whom the child can be release (I) An application form (a) Evidence of annual health exam (c) Immunization record (d) Written authorization from the parent/guardian for emergency medical treatment (g) Injuries/illnesses/accidents (h) A statement authorizing the program to act in an emergency, signed by the parent (m) Developmental History (infants and toddlers)	for emergency medical treatment (g) Injuries/illnesses/accidents (h) A statement authorizing the program to act in an emergency, signed by the parent (m) Developmental History (infants and toddlers)	emergency, signed by the parent (m) Developmental History (infants and toddlers)	
(1.12.F.8.a) Date of Enrollment (b)	(1.12.F.8.a) Date of Enrollment (b)	(1.12.F.8.a) Date of Enrollment (b)	
	Written authorization for field trips (k)	Written authorization for field trips (k)	
Parental consent form (n)	Parental consent form (n)	Parental consent form (n)	
	Additional Reporting		

If yes, record details of these events below:



Rhode Island Department of Human Services

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Additional Discussion Notes

Based on today's visit, the items identified as areas of non-compliance with the Child Care Center and School Age Program Regulations for Licensure must be corrected as outlined in the Corrective Action Plan. Failure to correct a non-compliance may result in the revocation of the license or denial of the application, as applicable. Please contact your licensor with any questions or concerns related to resolving the Corrective Action Plan. Additionally, you may contact the Child Care Licensing Office at DHS.ChildCareLicensing@dhs.ri.gov regarding today's visit.

I understand that by signing this monitoring report, I am also granting permission for Child Care Licensing to share my provider information with the designated Technical Assistance provider, where TA Referral(s) were made. I am aware that these agencies will both give and receive information related to my progress in addressing any item on the Corrective Action Plan.

Signature of Provider Stephanie Lutrario	Date March 28, 2022
Signature of Licensor Maria Evangelista	Date March 28, 2022