

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

#### Renewal/ Monitoring Visit

	Visit Information	
Visit Date: May 2, 2022	Visit Start Time: 2:40PM	Visit End Time: 4:00PM
Name of Licensor: Brigitte Haywood	•	

Provider Information			
Program Name: Oliver Day School			
Provider ID: 45477 License Expiration Date: April 30, 2023		License Expiration Date: April 30, 2023	
Email Address: oliverdayschool@gmail.com Telephone Number: (401)434-4434		Telephone Number: (401)434-4434	
Street Address: 865 Waterman Ave		State: RI	
City: East Providence		Zip Code: 02914	
Administrator On-S	ite at Time of Visit:	Jessica Moore	
Education Coordinator	On-Site at Time of Visit:		
School Age Coordinator (if appl			
Current Licen	sed Capacity	Total Staff Employed	
I/T:	69		
PS:	36	24	
SA:	0		

Classroom:	Age Group:	# of children	#of staff	# of others	Activities Observed:
Preschool		13	2		Snack time
Pre K		14	2		Free play
Toddler 3	18 months	7	2		Free play
Toddler 4	18months	3	1		Free play
Toddler 1	24-36months	7	2		Free play
Toddler 2	24-36months	13	2		Free play
Wobbler 1 & Wobbler 2	12m-18m	7	2		Floor play and 1 diaper change Combined classrooms in gross motor space until pick up time.
Infant 1	6m-12m	8	2		3 sleeping , 4 playing, 1 feeding-
Infant 2	6w-6m	4	1		3 napping, 1 getting ready for a bottle

		Inspections 1.7.A.2.a-c
Fire	Compliant	Expiration Date July 13, 2022
Lead	Compliant	Expiration Date June 30, 2022
Radon	Compliant	Expiration Date January 3, 2023
Comments	:	

	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 $65^{\circ}$ F – $74^{\circ}$ F at the children's height. In an infant classroom, the temperature should be a minimum $68^{\circ}$ 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 for		-	-
1.8.C.3 (High Risk)	A daily log is maintained of every medication administered. This record includes the:		
	<ul> <li>a. child's name;</li> <li>b. name and dosage of medication administered;</li> <li>c. date and time administered;</li> <li>d. name and signature of the person who administered the medication; and</li> <li>e. name of the licensed physician, physician's assistant, or nurse practitioner prescribing the medication.</li> </ul>	Compliant	
1.8.C.6 (High Risk)	<ul> <li>b. name and dosage of medication administered;</li> <li>c. date and time administered;</li> <li>d. name and signature of the person who administered the medication; and</li> </ul>	Compliant Compliant	
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(High Risk) 1.8.G.1 (High Risk) 1.8.G.3 (High Risk) 1.8.G.7 (High Risk)	<ul> <li>b. name and dosage of medication administered;</li> <li>c. date and time administered;</li> <li>d. name and signature of the person who administered the medication; and</li> <li>e. name of the licensed physician, physician's assistant, or nurse practitioner</li> <li>prescribing the medication.</li> <li>Medications are stored: <ul> <li>a. In clearly labeled original containers;</li> <li>b. In spaces secured with child safety locks that are separate from any items that attract children; and</li> <li>c. In a way that does not contaminate play surfaces or food preparation areas.</li> </ul> </li> <li>The facility, equipment, and materials are clean, free of hazards, and kept in good repair.</li> <li>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.</li> </ul> <li>The program posts and follows a regular cleaning and sanitation schedule,</li>	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	<ul> <li>b. name and dosage of medication administered;</li> <li>c. date and time administered;</li> <li>d. name and signature of the person who administered the medication; and</li> <li>e. name of the licensed physician, physician's assistant, or nurse practitioner</li> <li>prescribing the medication.</li> <li>Medications are stored: <ul> <li>a. In clearly labeled original containers;</li> <li>b. In spaces secured with child safety locks that are separate from any items that attract children; and</li> <li>c. In a way that does not contaminate play surfaces or food preparation areas.</li> </ul> </li> <li>The facility, equipment, and materials are clean, free of hazards, and kept in good repair.</li> <li>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.</li> <li>The program posts and follows a regular cleaning and sanitation schedule, including provisions for deep cleaning.</li> </ul> <li>Staff wash their hands, and ensure children wash their hands, with liquid soap and</li>	Compliant Compliant Compliant Compliant	

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imeframe to Corre	ct 1 week Resolved	
	Injuries are documented on an injury report.	1
(Medium Risk)	<ul> <li>a. A parent/guardian must sign the written injury report.</li> <li>b. Parents/guardians are notified of injuries on the same day of the injury.</li> <li>c. A copy of this report is placed in the child's file.</li> <li>d. The injury, first aid and parent/guardian communication are recorded in the program's daily health log.</li> </ul>	Compliant
1.8.J.6 (Medium Risk)	A choke-saving poster that outlines the Heimlich Maneuver, is prominently displayed in any area where children eat.	Non-Compliant
	ation Missing from Toddler 1 Classroom, and not visible in Toddler 2 it is partially hid entire poster can be seen.	den behind a microwave and needs to be
imeframe to Corre		
1.8.K.1 (Medium Risk)	Program furniture must be clean, durable, maintained in good repair and free of hazards.	Compliant
1.8.K.3 (High Risk)	Programs serving Infants and/or Toddlers have a choke prevention gauge readily available.	Non-Compliant
	All bedding used on cots must be removed in between uses and safely stored in individual plastic bags, or comparable means, to prevent contamination.	Compliant
imeframe to Corre		
1.8.K.9 (Medium Risk)	There is one (1) assembled evacuation crib equipped with wheels for every five (5) children under two (2) years of age, accessible in case of emergency.	Non-Compliant
-	ation Evacuation crib missing in 2 of the toddler classrooms	-
1.8.K.10 (Medium Risk)	Evacuation cribs are to remain empty of materials and accessible for use in case of an emergency. a. In the event of an emergency, the evacuation cribs are used to safely remove children from the facility. b. Evacuation cribs may be utilized for sleeping children at naptime.	Compliant
imeframe to Corre		
1.8.L.1&2 (High Risk)	The program develops and implements an individualized, written plan to prepare for and respond to potential emergency/disaster situations. This plan is appropriate to support the needs of all children in the program and must be approved by the Department.	Compliant
1.8.L.4 (High Risk)	An individualized graphic evacuation plan identifying alternative escape routes is posted in each classroom.	Compliant
1.8.L.5 (High Risk)	All required emergency phone numbers are posted in a conspicuous place adjacent to the telephone.	Compliant
1.8.L.6 (High Risk)	The program Administrator or designee conducts regular safety drills. 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. c. Two (2) shelter-in-place drills are conducted every twelve (12) months. d. 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.	Non-Compliant
Description/Observ	ation No fire drill on log since August 2021	
imeframe to Corre	ct 24 to 48 hours Resolved	
1.8.M.7 (Low Risk)	Menus for meals and snacks are planned and are posted weekly.	Not Applicable
1.8.M.10 & 11 (Medium Risk)	Drinking-water is readily available and offered throughout the day, especially before, during and after outdoor play. Drinking-water supplies are located in or near classrooms and activity rooms.	Compliant
1.8.N.1 (Medium Risk)	For each child with food allergies or special nutritional needs, the program requests that the parent/guardian obtains a care plan from the child's health care provider	Compliant
1.8.N.2 (High Risk)	The program makes provisions for protecting children with food allergies from contact with the allergen(s).	Compliant
1.8.N.3 (Medium Risk)	The program asks the parent/guardian of a child with food allergies to give consent 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 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	Compliant

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	provided, then this information is shared verbally with all relevant staff, including substitutes, and is documented in the child's file.		
.9 Routine Care o			
No violations for			
	s Program does not offer infant/toddler care		
1.9.A.5&6	Bottles are never propped up at any time or placed in a child's crib. A heating unit		
	for warming bettles and food is readily accessible to staff. Misrowayas are not used		
(	for heating bottles.	Compliant	
1.9.B.7	The diaper-changing surface is cleaned and sanitized after each use with a		
(High Risk)	disposable towel, United States Environmental Protection Agency registered	Compliant	
	disinfectant, or disinfectant solution that is prepared daily.	oompilant	
1.9.C.8	There are no restraining devices of any type, including swaddles.		
(High Risk)		Compliant	
1.9.C.10	Infants must sleep in a crib approved by the United States Consumer Product		
(High Risk)		Compliant	
(ingit i doit)	sheet. Older Infants may sleep on a cot, at the discretion of the program.	Compliant	
1.9.C.11	Lighting must allow for staff to view the color of the child's skin and to check for		
(High Risk)	broathing		
	5	Compliant	
1.9.C.15 & 17	No items are placed in the crib with an Infant except for a pacifier. No additional		
(High Risk)	items are placed on or above the crib.	Compliant	
		Compliant	
.10 Enrollment ar	-		
No violations for			
1.10.B.1	Programs must group children according to the correct staff/child ratio and	Non-Compliant	
(High Risk)	maximum group size.		
escription/Observ	ation Toddler room had 13 children and 2 staff		
imeframe to Corre	ct Immediate to 24 hours Resolved M		
1.10.D.1	Each classroom has an individual attendance sheet that lists the first and last		
(Medium Risk)	names of all children in the room.	Compliant	
1.10.D.3	Every classroom has a copy of the emergency information for each child.		
(High Risk)	5 5 5	Compliant	
	, , , , , , , , , , , , , , , , , , , ,	Compliant	
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(High Risk) 1.10.G.1 (Medium Risk) 1.10.G.12 (High Risk) 1.10.G.16 (Medium Risk) 1.10.G.16 (Medium Risk) 1.2 Administratio No violations for 1.12.A.1 (High Risk) 1.12.C.2 (High Risk) 1.12.D.1 (Low Risk) 1.12.D.3 (High Risk) 1.12.D.4 Low/Medium/High	Classroom staff provide sight and sound supervision during all aspects of the program. Each program is required to have individuals in Program Leadership roles as appropriate. At least 50% of all staff members on-site, are trained under the most recent guidelines of the American Heart Association in: a. pediatric cardiopulmonary resuscitation (CPR) (online training is not accepted); and b. pediatric first aid (online training is accepted). The program must have the consultant services of a licensed physician, physician's assistant, or nurse practitioner, who practices pediatric medicine, readily available. <b>n</b> <b>und</b> The program is responsible for immediately notifying the Department, in writing, of major changes which affect the license. Approved individuals manually or electronically sign the child in at drop off and sign the child out at pick up, using a time stamp and a full signature, name, or comparable identifier. If the program chooses to provide transportation, a transportation policy must be written. All individuals who provide transportation of children must: a. hold a valid Rhode Island Chauffeur's License or equivalent from another state; and b. have a completed background check on file. In addition, vehicles used to transport children must have: a. two-inch lettering on the vehicle (unless leased and then a magnetized sign can	Compliant Compliant Compliant Compliant Compliant Not Applicable Not Applicable	
(High Risk) 1.10.G.1 (Medium Risk) 1.10.G.12 (High Risk) 1.10.G.16 (Medium Risk) 12 Administratio No violations for 1.12.A.1 (High Risk) 1.12.C.2 (High Risk) 1.12.D.1 (Low Risk) 1.12.D.3 (High Risk) 1.12.D.4 Low/Medium/High Risk)	Classroom staff provide sight and sound supervision during all aspects of the program. Each program is required to have individuals in Program Leadership roles as appropriate. At least 50% of all staff members on-site, are trained under the most recent guidelines of the American Heart Association in: a. pediatric cardiopulmonary resuscitation (CPR) (online training is not accepted); and b. pediatric first aid (online training is accepted). The program must have the consultant services of a licensed physician, physician's assistant, or nurse practitioner, who practices pediatric medicine, readily available. <b>n</b> and The program is responsible for immediately notifying the Department, in writing, of major changes which affect the license. Approved individuals manually or electronically sign the child in at drop off and sign the child out at pick up, using a time stamp and a full signature, name, or comparable identifier. If the program chooses to provide transportation, a transportation policy must be written. All individuals who provide transportation of children must: a. hold a valid Rhode Island Chauffeur's License or equivalent from another state; and b. have a completed background check on file. In addition, vehicles used to transport children must have:	Compliant Compliant Compliant Compliant Compliant Not Applicable Not Applicable	

#### about:blank

	c. first aid, emergency airway and bodily fluid spill kits; and <i>(High Risk)</i> d. audible door and back-up alarms (mountable or installed). <i>(Medium Risk)</i>		
1.12.D.8 (High Risk)	Attendance and emergency information on each child being transported must be available in the vehicle when transportation is being provided.	Not Applicable	
1.12.F.1 (Medium Risk)	The program maintains program files, and individual files for children and staff that are available on-site at all times.	Compliant	
1.13 Learning and	•		
1.13.A.5 (Medium Risk)	Written or electronic documentation of the classroom level curriculum (lesson plans or planning documentation) is easily accessible in each individual classrooms.	Compliant	
		Compliant Compliant	

Staff File Requirements Reference: 1.12. F.10				
or Non-Compliant Items:				
ligh Risk - Must be fixed within 24 to 48 hours				
Nedium Risk - Must be fixed within 1 week				
Low Risk - Must be fixed within 1 month				
Staff A	Staff B	Staff C		
No violations found	✓No violations found	✓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:		
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)		

Evidence of annual health exam (c)Evidence of annual health exam (c)Evidence of annual health exam (c)Immunization record (d)Immunization record (d)Immunization record (d)Written authorization from the parent/guardian for emergency medical treatment (g)Written authorization from the parent/guardian for emergency medical treatment (g)A statement authorizing the program to act in anA statement authorizing the program to act in anA statement authorizing the program to act in an	Child File Requirements Reference: 1.12. F.7/1.12.F.8.a				
Image: Non-Sompliant ItemsNon-Compliant ItemsHigh Risk:Non-Compliant ItemsHigh Risk:High Risk:Medium Risk:Medium Risk:Low Risk:Low Risk:Compliant Items:Nomes of individuals to whom the child can be release (I)An application form (a)Compliant Items:Names of individuals to whom the child can be release (I)Compliant Items:Names of individuals to whom the child can be release (I)Compliant Items:Names of individuals to whom the child can be release (I)Compliant Items:Names of individuals to whom the child can be release (I)An application form (a)Evidence of annual health exam (c)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)Developmental History (infants and toddlers)	For Non-Compliant Items: High Risk - Must be fixed within 24 to 48 hours Medium Risk - Must be fixed within 1 week				
High Risk: Medium Risk: Low Risk:High Risk: Medium Risk: Low Risk:High Risk: Medium Risk: Low Risk:Compliant Items: 					
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(1.12.F.o.a)(1.12.F.o.a)(1.12.F.o.a)Date of Enrollment (b)Date of Enrollment (b)Date of Enrollment (b)Written authorization for field trips (k)Written authorization for field trips (k)Written authorization for field trips (k)Parental consent form (n)Parental consent form (n)Parental consent form (n)	n (c) arent/guardian nt (g) gram to act in an nt (m) and toddlers)				
Additional Reporting					

work in the facility? No If yes, record details of these events below:



## Rhode Island Department of Human Services

Child Care Center and School Age Program Monitoring Checklist

**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 Jessica Moore	Date May 2, 2022
Signature of Licensor Brigitte Haywood	Date May 2, 2022