

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

Renewal/ Monitoring Visit

Visit Information			
Visit Date: April 7, 2022	Visit Start Time: 11:05AM	Visit End Time: 12:30PM	
Name of Licensor: Brigitte Haywood			

Provider Information			
Program Name: Coggeshall Club			
Provider ID: 48597		License Expiration Date: September 30, 2022	
Email Address: Britt@coggeshallclub.c	dress: Britt@coggeshallclub.com Telephone Number: 401-965-8146		
Street Address: 82 Valley Road		State: RI	
City: Middletown		Zip Code: 02842	
Administrator On-Site at Time of Visit:		Britt Riley	
Education Coordinator On-Site at Time of Visit:		Haley Paige	
School Age Coordinator On-Site at Time of Visit: (if applicable)			
Current Licensed Capacity		Total Staff Employed	
I/T: 21			
PS:	18	15	
SA:	0		

Classroom:	Age Group:	# of children	#of staff	# of others	Activities Observed:
Yearling	12-24 months	6	2		Outside
Infants	6weeks-12 months	6	3		Feeding and sleeping
Toddler	2-3 years	4	1		Outside
Preschool	3-4 years	4	1		Outside
Pre K	4-5 years	7	1		Bathroom time

	Inspections 1.7.A.2.a-c			
Fire	Compliant	Expiration Date February 18, 2023		
Lead	Compliant	Expiration Date		
Radon	Compliant	Expiration Date December 21, 2023		
	Comments: Full lead safe, certificate is valid for as long as any permanently covered lead based paint and any soil not previously determined to be elow the lead safe threshold for bare soil remain covered.			

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;	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	Compliant		
1.8.C.6 (High Risk)	d. name and signature of the person who administered the medication; and	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 			
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(High Risk) 1.8.G.1 (High Risk) 1.8.G.3 (High Risk) 1.8.G.7 (High Risk)	 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 runping 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)	 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		
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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. 1.8.J.6 A choke-saving poster that outlines the Heimlich Maneuver, is prominently (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 Compliant (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 1.8.K.9 There is one (1) assembled evacuation crib equipped with wheels for every five (5) Compliant (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 Compliant children from the facility. b. Evacuation cribs may be utilized for sleeping children at naptime. The program develops and implements an individualized, written plan to prepare for 1.8.L.1&2 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 1.8.N.3 The program asks the parent/guardian of a child with food allergies to give consent (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 1.9.A.5&6 Bottles are never propped up at any time or placed in a child's crib. A heating unit for warming bottles and food is readily accessible to staff. Microwaves are not used (Medium Risk) Compliant for heating bottles. 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.

5/6/22, 1:14 PM

5/6/22, 1:14 PM

(High Risk)	There are no restraining devices of any type, including swaddles.	Compliant
1.9.C.10 (High Risk)	Infants must sleep in a crib approved by the United States Consumer Product Safety Commission Standards, equipped with a firm crib mattress and a tight-fitting sheet. Older Infants may sleep on a cot, at the discretion of the program.	Compliant
1.9.C.11 (High Risk)	Lighting must allow for staff to view the color of the child's skin and to check for breathing.	Compliant
1.9.C.15 & 17 <i>(High Risk)</i>	No items are placed in the crib with an Infant except for a pacifier. No additional items are placed on or above the crib.	Compliant
.10 Enrollment a No violations fo		
1.10.B.1 (High Risk)	Programs must group children according to the correct staff/child ratio and maximum group size.	Compliant
1.10.D.1 (Medium Risk)	Each classroom has an individual attendance sheet that lists the first and last names of all children in the room.	Compliant
1.10.D.3 (High Risk)	Every classroom has a copy of the emergency information for each child.	Compliant
1.10.F.1 (High Risk)	Classroom staff provide sight and sound supervision during all aspects of the program.	Compliant
1.10.G.1 (Medium Risk)	Each program is required to have individuals in Program Leadership roles as appropriate.	Compliant
1.10.G.12 (High Risk)	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).	Compliant
1.10.G.16	The program must have the consultant services of a licensed physician, physician's	Compliant
(Medium Risk)	assistant, or nurse practitioner, who practices pediatric medicine, readily available.	Compilant
, ,	assistant, of hurse practitioner, who practices pediatric medicine, readily available.	oonphant
.12 Administratio	assistant, of hurse practitioner, who practices pediatric medicine, readily available.	Not Applicable
.12 Administratic No violations fo 1.12.A.1	und The program is responsible for immediately notifying the Department, in writing, of	
.12 Administration No violations for 1.12.A.1 (High Risk) 1.12.C.2	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	Not Applicable
.12 Administration No violations fo 1.12.A.1 (High Risk) 1.12.C.2 (High Risk) 1.12.D.1	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.	Not Applicable Compliant
.12 Administratic No violations fo 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	If the program chooses to provide transportation, a transportation policy must be written.	Not Applicable Compliant Not Applicable
.12 Administratic No violations fo 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	 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 be used), stating the program's name; (Low Risk) b. a fire extinguisher; (High Risk) c. first aid, emergency airway and bodily fluid spill kits; and (High Risk) 	Not Applicable Compliant Not Applicable Not Applicable Not Applicable
.12 Administratic No violations fo 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) 1.12.D.4	assistant, of nurse practitioner, who practices pediatic medicine, readily available. und 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 be used), stating the program's name; (Low Risk) b. a fire extinguisher; (High Risk) c. first aid, emergency airway and bodily fluid spill kits; and (High Risk) d. audible door and back-up alarms (mountable or installed). (Medium Risk) Attendance and emergency information on each child being transported must be	Not Applicable Compliant Not Applicable Not Applicable Not Applicable Not Applicable
.12 Administratic No violations fo 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) 1.12.D.8 (High Risk) 1.12.D.8 (High Risk) 1.12.F.1	assistant, of nurse practitioner, who practices pediatic medicine, readily available. 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: a. two-inch lettering on the vehicle (unless leased and then a magnetized sign can be used), stating the program's name; (Low Risk) b. a fire extinguisher; (High Risk) c. first aid, emergency airway and bodily fluid spill kits; and (High Risk) d. audible door and back-up alarms (mountable or installed). (Medium Risk) Attendance and emergency information on each child being transported must be available in the vehicle when transportation is being provided. The program maintains program files, and individual files for children and staff that are available on-site at all times. Development	Not Applicable Compliant Not Applicable Image: Complicable Image: Complicable
.12 Administratic No violations fo 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) 1.12.D.4 Low/Medium/High Risk) 1.12.D.8 (High Risk) 1.12.F.1 (Medium Risk) 1.12.F.1	assistant, of nurse practitioner, who practices pediatic medicine, readily available. 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: a. two-inch lettering on the vehicle (unless leased and then a magnetized sign can be used), stating the program's name; (Low Risk) b. a fire extinguisher; (High Risk) c. first aid, emergency airway and bodily fluid spill kits; and (High Risk) d. audible door and back-up alarms (mountable or installed). (Medium Risk) Attendance and emergency information on each child being transported must be available in the vehicle when transportation is being provided. The program maintains program files, and individual files for children and staff that are available on-site at all times. Development	Not Applicable Compliant Not Applicable Image: Not Applicable

ans of written/electronic daily communication between staff and ant/Toddler programs, which includes information about the child's	Compliant

Staff File Requirements Reference: 1.12. F.10				
For Non-Compliant Items: 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:	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 (i)	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)		

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 B ☑No violations found	Child C ☑No violations found		
<u>Non-Compliant Items</u> High Risk: Medium Risk: Low Risk:	<u>Non-Compliant Items</u> High Risk: Medium Risk: Low Risk:	<u>Non-Compliant Items</u> High Risk: Medium 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)	Compliant Items: 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) (1.12.F.8.a) Date of Enrollment (b) Written authorization for field trips (k) Parental consent form (n)	Compliant Items: 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) (1.12.F.8.a) Date of Enrollment (b) Written authorization for field trips (k) Parental consent form (n)		

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 Haley Paige	Date April 7, 2022
Signature of Licensor Brigitte Haywood	Date April 7, 2022