



# Rhode Island Department of Human Services

## FCCH/GFCCH Monitoring Summary

Final 9/27/2021

### Provider Information

Provider Name: Ana Rogue

### Visit Information

Visit Date: 1-19-2022 Visit Start Time: 9:45am Visit End Time: 11:15am

Name of Licensors: Stephanie Lutrario

### Compliance and Corrective Action Plans

Corrective action plans are developed when noncompliance to regulations is observed during a monitoring visit. Regulations are assessed using the Child Care Center and School Age Program Monitoring Checklist. To review this full checklist or to get more information on the risk levels associated with each regulation, please visit [here](#).

#### Non-Compliances Observed During Monitoring Visit

- ☐ Program demonstrated compliance in all regulations assessed during this visit. No violations found.
- ☒ Program demonstrated partial compliance in the regulations assessed during this visit. Noncompliance found resulted in the following corrective action plan.

#### Corrective Action Plan

Non-Compliant Regulation	Description/Observation	Corrected Onsite (Check)	Timeframe to resolve	Resolved (Check)
2.3.1.B.5	Exits were not clearly identified- exit signs had been created but were not posted	<input checked="" type="checkbox"/>		<input type="checkbox"/>
2.3.1.F.3	Stairway within area used for child care did not have a gate	<input checked="" type="checkbox"/>		<input type="checkbox"/>
2.3.1.H.1	Fireplace was not securely screened/gated to avoid children gaining access	<input checked="" type="checkbox"/>		<input type="checkbox"/>
2.3.2.1.7	Cleaning schedule not posted	<input checked="" type="checkbox"/>		<input type="checkbox"/>
2.3.2.L.6	Provider provides snacks/meals but does not have a menu posted	<input type="checkbox"/>	1 month	<input checked="" type="checkbox"/>
2.3.2.M.7	Provider is not conducting monthly fire drills- last documented fire drill in 2020	<input type="checkbox"/>	24 hours	<input checked="" type="checkbox"/>
2.3.2.N.4	Choke saving poster not displayed in room where children eat	<input checked="" type="checkbox"/>		<input type="checkbox"/>
2.3.2.P.7	Provider does not have a choke prevention gauge tool	<input type="checkbox"/>	48 hours	<input checked="" type="checkbox"/>
2.3.4.G.3	Provider did not have a visitor/volunteer sign-in sheet	<input checked="" type="checkbox"/>		<input type="checkbox"/>
1.12. F.7.c&d	1 of 3 child files missing annual physical exam and evidence of yearly flu shot	<input type="checkbox"/>	2 weeks	<input checked="" type="checkbox"/>



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