



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
OFFICE OF CHILDHOOD - CHILD CARE COMPLIANCE

SUBSIDY INSPECTION REPORT

DATE 10/8/24		CI NAME Ereline ClementsStubbs		INSPECTION START TIME 9:50am		INSPECTION END TIME 10:30am	
FACILITY NAME Sherika Rowe				TYPE OF INSPECTION Renewal Inspection			
FACILITY OWNER Sherika Rowe				FACILITY DVN 002921235			
FACILITY PHONE NUMBER 913-375-9612				FACILITY DIRECTOR/PROVIDER Sherika Rowe			
FACILITY EMAIL ADDRESS sherikarowe38@gmail.com							
FACILITY ADDRESS (PHYSICAL LOCATION) 15900 E. South Ave.				CITY Independence		STATE MO	ZIP 64050
COUNTY Jackson		MAILING ADDRESS IF DIFFERENT NA		FACILITY TYPE SOF			
CONTRACT EXPIRATION DATE (RENEWING PROVIDERS) 11/30/24		EXEMPTION VERIFIED ☒ YES ☐ NO		HOURS OF OPERATION Sun-Sat 24 hours			
AGE RANGE Birth-13 Years Old		LIMITATIONS Any person who is caring for six or fewer children, shall not care for more than six children and no more than three children under the age of two.					
CAPACITY 6							

REQUIRED DOCUMENTS

Sanitation Inspection	DATE APPROVED	Select One
Fire/Safety Inspection	DATE APPROVED	Select One
Child Care Provider Staff Listing	DATE APPROVED 9/4/24	Compliant

ATTENDANCE AT INSPECTION (LIST # OF CAREGIVERS AND CHILDREN)

Present at Inspection:

Provider, Sherika Rowe and 8 children

1 child, age 2 years old

5 children, age 3 years old

2 children, age 4 years old

A. RATIO	C	NC	NO	NA
1. Any person who is caring for six or fewer children, shall not care for more than six children and no more than three children under the age of two.	☐	☒	☐	☐
2. Groups of mixed ages through two (2)- years shall have no less than one (1) adult to four (4) children, with no more than eight (8) children in a group.	☐	☐	☐	☒
3. Groups of two (2)-year olds shall have no less than one (1) adult to eight (8) children, with no more than sixteen (16) children in a group.	☐	☐	☐	☒
4. Groups of three (3)- and four (4)-year olds shall have no less than one (1) adult to ten (10) children, with no more than twenty (20) children in a group.	☐	☐	☐	☒
5. Groups of five (5)-year olds and older shall have no less than one (1) adult to every sixteen (16) children, with no more than 48 children in a group.	☐	☐	☐	☒
6. Groups of mixed ages of children two (2) years of age and older shall have no less than one (1) adult to ten (10) children with a maximum of four (4) two (2)-year olds. When there are more than four (4) two (2)-year olds in a mixed group, the staff/child ratio shall be no less than one (1) adult to eight (8) children.	☐	☐	☐	☒
B. BUILDING AND PHYSICAL PREMISES SAFETY	C	NC	NO	NA
1. Compliant with any applicable local ordinances, codes, and regulations.	☐	☐	☒	☐
2. Operable smoke detector(s) on the ceiling or wall at a point centrally located.	☒	☐	☐	☐
3. Operable fire extinguisher	☒	☐	☐	☐

C- Compliant NC- Non Complaint NO- Not Observed NA- Not Applicable

4. Operable carbon monoxide detector(s) in accordance with the manufacturer's instructions on the ceiling or wall at a point centrally located.	☐	☐	☐	☐
5. Inside space for play and napping.	☐	☐	☐	☐
6. Clean and free of insects, rodents, and vermin.	☐	☐	☐	☐
7. Food preparation area is clean.	☐	☐	☐	☐
8. Hazardous items inaccessible to children.	☐	☒	☐	☐
9. Have working heating and cooling system.	☐	☐	☐	☐
10. Have potable, running water, at least one (1) flushable toilet and one (1) sink for hand-washing accessible to children.	☐	☐	☐	☐
11. Toilet paper, soap, hand drying towels (paper or cloth) are accessible to children.	☐	☐	☐	☐
12. Be free of smoke, illegal substances, and criminal activities.	☐	☐	☐	☐
13. Weapons and ammunition are stored in locked cabinets and are inaccessible to children.	☐	☐	☐	☒
14. Provide adequate supervision when outside.	☐	☐	☒	☐
15. The outdoor area is continuously fenced or, have a department approved, supervision plan.	☐	☐	☐	☐
16. Pools and open water areas are not accessible to children without adult supervision.	☐	☐	☐	☒
17. Outdoor play equipment is well-constructed and free of hazards.	☐	☐	☒	☐
18. Play area is safe, maintained, and free of hazards.	☐	☐	☐	☐
C. FURNITURE, EQUIPMENT, & MATERIALS	C	NC	NO	NA
1. Furniture, toys, and play equipment are age-appropriate, in good working order and free of sharp, loose, or pointed parts.	☐	☐	☐	☐
2. Adheres to safe sleep practices, if caring for infants.	☐	☐	☐	☐
D. ANIMALS	C	NC	NO	NA
1. Animals are non-threatening to children.	☐	☐	☐	☒
2. Animals do not have a history of attacking or injuring human beings or other animals.	☐	☐	☐	☒
3. Animals are disease free and have all required vaccines.	☐	☐	☐	☒
4. Indoor and outdoor areas used by children are free of animal excrement.	☐	☐	☐	☐
5. Litter boxes are not located in food preparation or serving area and are inaccessible to children.	☐	☐	☐	☒
E. DISASTER AND EMERGENCY PREPAREDNESS	C	NC	NO	NA
1. The Emergency preparedness and response plan is available and posted.	☐	☐	☐	☐
2. The child care provider has a written emergency preparedness and response plan.	☐	☐	☐	☐
3. The plan is reviewed and updated regularly.	☐	☐	☐	☐
4. The plan includes steps for evacuation, relocation, shelter-in-place, and lock down.	☐	☐	☐	☐
5. The plan outlines how families will be contacted during an emergency and how they will be notified at the conclusion of the emergency.	☐	☐	☐	☐
F. HEALTH REQUIREMENTS	C	NC	NO	NA
1. Child care provider and all child care staff are in good physical and emotional health with no physical or mental conditions which would interfere with child care responsibilities.	☐	☐	☐	☐
2. The provider shall have a completed medical examination report dated no more than ninety (90) days prior to applying for subsidy. (SOF only)	☐	☐	☐	☐
3. The provider and staff have a Tuberculosis (TB) Risk Assessment form (MO580- 3015) on file.	☐	☒	☐	☐
4. The provider and staff are not under the influence of alcohol or other substances while caring for children, while on the premises, or in any vehicles used by the program.	☐	☐	☐	☐
G. PRE SERVICE TRAINING	C	NC	NO	NA
1. The provider and staff involved in the care of the children, are registered with DESE's designated professional development system and have a Missouri Professional Development Identification (MOPD ID) number from DESE.	☐	☐	☐	☐
2. Subsidy Orientation Training has been completed by one (1) staff member responsible for maintaining compliance.	☐	☐	☐	☐
3. CCDF Health & Safety Training has been completed within ninety (90) days of employment and before a staff member provided unsupervised direct care to children.	☐	☐	☐	☐
4. The provider and staff have age-appropriate pediatric CPR/First Aid certification within ninety (90) days of employment and before a staff member or volunteer provides unsupervised direct care to children.	☐	☐	☐	☐
H. ANNUAL TRAINING	C	NC	NO	NA
1. The provider and staff involved in the care of children have completed six hours of annual training as approved by DESE and documentation of training is viewable in DESE's designated professional development system.	☐	☐	☐	☐

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2. The provider has a record of current certification in age-appropriate pediatric first aid and cardiopulmonary resuscitation (CPR) for all child care staff.	☒	☐	☐	☐
I. RECORD KEEPING	C	NC	NO	NA
1. 1.The provider promptly provided DESE with access to eligible families and records without limitation.	☐	☒	☐	☐
The provider has records for each child who receives care that includes:				
2. The child's full name and date of birth.	☐	☒	☐	☐
3. The name, address, e-mail address, phone number, and other necessary contact information of each person legally responsible for each child.	☐	☒	☐	☐
4. Allergies to food, medications, insects, or other materials.	☐	☒	☐	☐
5. Listing of persons authorized to pick-up and drop-off child as approved by person legally responsible for the child.	☐	☒	☐	☐
6. Infants, feeding times and amount of breast milk or formula per feeding.	☐	☒	☐	☐
7. Record of completed immunizations as required in 210.003.	☐	☒	☐	☐
8. Daily medications, including dosage, time of administering, and route for administering.	☐	☒	☐	☐
9. All records for children shall be retained for five (5) years.	☐	☐	☒	☐
The child care provider has a time and attendance register of all children who receive care from the provider that includes:				
10. The dates and times that the child received subsidized child care services, showing the date that the child arrived and the time that the child was picked up.	☒	☐	☐	☐
11. The name of the person who dropped off the child and the name of the person who picked up the child.	☒	☐	☐	☐
J. CRIMINAL BACKGROUND CHECKS	C	NC	NO	NA
1. All child care staff members have a valid eligibility letter in accordance with Section 210.1080, RSMo, and 5 CSR 25-600.	☐	☒	☐	☐
2. The results of a criminal background check has been completed for staff prior to employment or presence in the child care facility.	☐	☒	☐	☐
3. Family Care Safety Registry (FCSR) check has been completed by the provider, for all child care staff members, annually.	☒	☐	☐	☐
4. Criminal background checks are completed for each child care staff member every five (5) years.	☐	☐	☒	☐
5. Criminal background checks are completed for each child care staff member if they are separated from employment for 180 days or more.	☐	☐	☒	☐
K. GENERAL TERMS	C	NC	NO	NA
The provider shall:				
1. Not deny a child admission to, or the benefits of, any program provided by the contractor for child care services on the basis of religion.	☐	☐	☒	☐
2. Maintain confidentiality of individuals participating in subsidy.	☐	☐	☒	☐
3. Ensure all child care staff members are at least eighteen (18) years of age.	☐	☐	☒	☐
4. Provide child care services at the physical location specified on the agreement, with the exception of transportation to and from care and field trips.	☐	☐	☒	☐
5. Ensure no child care staff members shall be engaged in other employment during the hours child care services are provided.	☐	☐	☒	☐
6. Establish a discipline plan that includes simple, understandable rules for children's behavior.	☐	☐	☒	☐
7. Allow custodial parents or legal guardians to have unlimited access to their children, during the normal hours of operations and whenever children are in the care of the provider.	☐	☐	☒	☐
8. Notify all custodial parents and legal guardians of the following information: a. Telephone number where the provider can be reached; b. The location of the Discipline Policy; and c. The location of the Emergency Preparedness and Response Plan.	☐	☐	☒	☐
9. Notify custodial parents and legal guardians if the child care provider does not have immediate access to a telephone and provide parents with an alternative, effective method of communication.	☐	☐	☒	☐
10. Have policies that prevent suspension, expulsion, and denial of services of children birth to age five due to behavior.	☐	☐	☒	☐
11. Refer families to the DESE designated child care resource program to find alternative child care arrangements in the event they are no longer able to provide child care services.	☐	☐	☒	☐
12. Report suspected child abuse and neglect.	☐	☐	☒	☐
13. Cooperate with any investigations, audits, or other requests of the department.	☐	☐	☒	☐
14. Follow all statutes, regulations, and policies of the department.	☐	☐	☒	☐
15. Report the addition of any new household members eighteen (18) years of age or older, or when a current household member turns eighteen (18) years of age.	☐	☐	☒	☐

16. Not utilize physical or corporal punishment including, but not limited to, spanking.		☐	☐	☒	☐
L. NOTIFICATION REQUIREMENTS		C	NC	NO	NA
The provider shall:					
1. Report child deaths and serious injuries to DESE within twenty-four (24) hours of the incident. A child death or serious injury includes, but is not limited to:					
➤ The death of a child if the child died while in the care of the provider; ➤ The death of a child enrolled with the provider if the child died of a contagious disease; or ➤ A "serious injury" to a child that occurred while the child was at the provider's facility or away from the provider's facility but still in the care of the provider, if an injury results in the child being treated by a medical professional or admitted to a hospital.		☐	☐	☒	☐
2. Immediately, and no later than twenty-four (24) hours later, notifies DESE, in writing, if the provider becomes aware of any circumstances which may render the provider unable to perform any of its obligations under the agreement.		☐	☐	☒	☐
3. Report the following changes to DESE in writing within ten (10) calendar days: physical address, mailing address, telephone number, email address, or any other circumstance, incident, or occurrence that would alter any information provided by the provider to issue this contract.		☐	☐	☒	☐
COMPLIANCE TYPE	VIOLATION	VERIFICATION DATE			
Return Inspection v	A.1. Provider had 8 children, ages 2-4 years old, present during inspection.	10/17/24			
Corrected on Site v	B.8. Provider had a child safety lock on kitchen sink cupboard door but it was not locked.	10/8/24			
Documents Submitted v	F.3. Provider's staff person/aide, Jadin Jonasec, did not have a completed TB Risk Assessment form.	10/10/24			
Documents Submitted v	I.1. Provider had enrollment forms for six of the children in her care. Provider did not have forms for two other children present.	10/17/24			
Documents Submitted v	I.2. Provider had enrollment forms for six of the children in her care, including the child's full name and date of birth. Provider did not have forms for two other children present.	10/17/24			
Documents Submitted v	I.3. Provider had enrollment forms for six of the children in her care, including the name, address, e-mail address, phone number, and other necessary contact information of each person legally responsible for each child. Provider did not have forms for two other children present.	10/17/24			
Documents Submitted v	I.4. Provider had enrollment forms for six of the children in her care, including allergies to food, medications, insects, or other materials. Provider did not have forms for two other children present.	10/17/24			
Documents Submitted v	I.5. Provider had enrollment forms for six of the children in her care, including a listing of persons authorized to pick-up and drop-off child as approved by person legally responsible for the child. Provider did not have forms for two other children present.	10/17/24			
Documents Submitted v	I.6. Provider had enrollment forms for six of the children in her care, including infants, feeding times and amount of breast milk or formula per feeding. Provider did not have forms for two other children in her care.	10/17/24			
Documents Submitted v	I.7. Provider had enrollment forms for six of the children in her care, including a record of completed immunizations as required in 210.003. Provider did not have forms for two other children present.	10/17/24			
Documents Submitted v	I.8. Provider had enrollment forms for six of the children in her care, including daily medications, dosage, time of administering, and route for administering. Provider did not have forms for two other children present.	10/17/24			
Documents Submitted v	J.1. Provider had an Eligibility letter for herself, but did not have one for staff member/aide, Jadin Jonasec.	10/10/24			
Documents Submitted v	J.2. Provider has completed Comprehensive Background Check process, but unable to verify completion of Comprehensive Background Check process for staff person/aid, Jadin Jonasec.	10/10/24			
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NOTES

A.1. Follow-Up Inspection 10/17/24 @ 10:20am

Ratios

Present: Provider, Sherika Rowe

6 children ages: 11 months, 13 months, 2 years, 3 years and 2 - 4 year olds.