

No.: 00032 Date: 11/16/2020

#### **GENERAL INFORMATION**

| Region                                              | 6                                        |
|-----------------------------------------------------|------------------------------------------|
| CCPRU Assigned to Provider                          | ELIZABETH                                |
| Date of Referral from CCPRU                         | 11/4/2020                                |
| Child Care Facility Name                            | PLC KIDZ                                 |
| Missouri DVN                                        | 002648826                                |
| County                                              | NEWTON                                   |
| Child Care Facility Physical Address                | 5505 GATEWAY DR                          |
| City                                                | JOPLIN                                   |
| State                                               | MO                                       |
| Zip Code                                            | 64804                                    |
| Mailing Address Different from Physical address     |                                          |
| Child Care Facility Type                            | RIC                                      |
| DHSS Exemption Verified                             |                                          |
| Religious in Compliance Fire Safety and Health      | Fire inspection occurred on 7/16/20 and  |
| Sanitation Inspection Verified                      | sanitation inspection occurred on 7/7/20 |
| School Fire Safety and Health Sanitation Inspection |                                          |
| Verified                                            |                                          |
| Child Care Facility Phone Number                    | 417-553-7100                             |
| Child Care Facility Email                           | CONTACT@PLCKIDZ.COM                      |
| Child Care Facility Director                        | Samantha Jones                           |
| Child Care Facility Director Email                  |                                          |
| Type of Monitoring                                  | RENEW                                    |
| Names of Staff (Other than Provider)                |                                          |
| YES                                                 |                                          |

#### ADDITIONAL INFORMATION

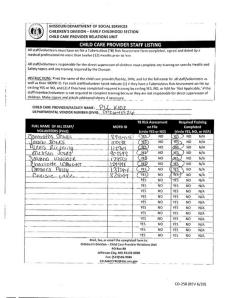
| Hours of Operation            | M-F 6am-6pm      |
|-------------------------------|------------------|
| Number of Children Enrolled   | 34               |
| Age Range of Children in Care | BIRTH - 12 YEARS |
| Monitoring Completed By       | Specialist # 17  |
| Verification of Address       |                  |





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| Date of On-Site Monitoring                        | 11/10/2020 |
|---------------------------------------------------|------------|
| Date of Follow-Up to Initial or Annual Monitoring | 11/13/2020 |
| Upload Provider Staff Listing File                |            |



Local Ordinance Municipality

JOPLIN

### RATIOS - BIRTH THROUGH TWO (2)

| Classrooms                            | Classroom 1   |
|---------------------------------------|---------------|
| Number of Children                    | 5             |
| Number of Staff                       | 2             |
| Compliance                            | In Compliance |
|                                       |               |
| Classrooms                            | Classroom 2   |
|                                       |               |
| Number of Children                    | 4             |
| Number of Children<br>Number of Staff | 4             |

### RATIOS - AGE TWO (2)

| Classrooms         | Classroom 1   |
|--------------------|---------------|
| Number of Children | 16            |
| Number of Staff    | 2             |
| Compliance         | In Compliance |

### LOCAL ORDINANCES, CODES, AND REGULATIONS



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The child care facility applicant or registered child care facility must cooperate and allow for an unannounced on-site inspection by the division or designee at initial application and annually thereafter. The on-site inspections shall ensure that the child care applicant's and registered child care provider's facility is in compliance with the following health, safety, fire, and other requirements:

The child care facility shall meet local ordinances, codes, and regulations, particularly with regard to fire safety and smoke or carbon monoxide detectors.

Compliance

In Compliance

Upload Photo Verification Technical Assistance Provided (If Any)

Fire inspection occurred on 7/16/20. There are no other local ordinances, codes, or regulations that apply to this provider

If there are no local ordinances or regulations regarding smoke and carbon monoxide detectors that apply to the child care provider facility, the child care provider applicant shall:

Install and maintain operable smoke and carbon monoxide detectors in accordance with the manufacturer's instructions.

| Compliance                             | Not Applicable |
|----------------------------------------|----------------|
| Reason Item Not Applicable             |                |
| Fire inspection occurred on 7/16/20    |                |
| Technical Assistance Provided (If Any) |                |
|                                        |                |

Install and maintain all detectors on the ceiling or wall at a point centrally located in a corridor or other area giving access to rooms used for providing child care services unless the manufacturer's instructions provide otherwise.

| Compliance                             | Not Applicable |
|----------------------------------------|----------------|
| Reason Item Not Applicable             |                |
| Fire inspection occurred on 7/16/20    |                |
| Technical Assistance Provided (If Any) |                |
|                                        |                |

| Ensure that when activated, the detectors shall provide an alarm in the structure or room. |                |  |  |
|--------------------------------------------------------------------------------------------|----------------|--|--|
| Compliance                                                                                 | Not Applicable |  |  |
| Reason Item Not Applicable                                                                 |                |  |  |
| Fire inspection occurred on 7/16/20                                                        |                |  |  |
| Technical Assistance Provided (If Any)                                                     |                |  |  |

### PHYSICAL SPACE

| It must be clean, free of insects and vermin. |               |
|-----------------------------------------------|---------------|
| Compliance                                    | In Compliance |
| Upload Photo Verification                     |               |
| Technical Assistance Provided (If Any)        |               |
| Verified by Monitoring Specialist             |               |

| State of Missouri ——<br>ISTERED CHILD CARE                         | Missouri Registered Child Care I<br>License-Exempt Checkli                                                                                                                 | -                                      |                                |
|--------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------|
| ealth and Saf                                                      | fety Checklist for LEX Child Care Provid                                                                                                                                   | ders (Build                            | No.: 00032<br>Date: 11/16/2020 |
| than eighty-fiv<br>Compliance<br>Upload Photo V<br>Technical Assis | constant temperature not less than sixty-five<br>re (85) degrees Fahrenheit.<br>Verification<br>stance Provided (If Any)<br>s equipped with central heating and air condit | In Compliance                          | nheit and not higher           |
| accessible to c<br>Compliance<br>Upload Photo V<br>Technical Assis |                                                                                                                                                                            | ble toilet and one (1)                 | sink for hand washing          |
| children.<br>Compliance<br>Upload Photo V<br>Technical Assis       | such as toilet paper, soap, hand drying towel<br>Verification<br>stance Provided (If Any)<br>Ionitoring Specialist                                                         | ls (paper or cloth) m<br>In Compliance | ust be accessible to           |
| Compliance<br>Upload Photo V<br>Technical Assis                    | aration area must be clean and equipped to p<br>Verification<br>stance Provided (If Any)<br>Ionitoring Specialist                                                          | repare snacks and m<br>In Compliance   | neals.                         |
| Compliance<br>Upload Photo \<br>Technical Assis                    | nside space for play and napping.<br>Verification<br>stance Provided (If Any)<br>Ionitoring Specialist                                                                     | In Compliance                          |                                |
| Compliance<br>Upload Photo V<br>Technical Assis                    | terials must be inaccessible to children.<br>Verification<br>stance Provided (If Any)<br>Ionitoring Specialist                                                             | In Compliance                          |                                |
| Compliance<br>Reason Item N                                        | e facility prohibited while children are present<br>ot Applicable<br>allowed on site                                                                                       | Not Applicable                         |                                |



| Health and Safety | Checklist for | LEX Child | Care F | Providers | (Build |
|-------------------|---------------|-----------|--------|-----------|--------|
|                   |               |           |        |           |        |

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| 26)                                                                                                                                                                                                                                                                                                                  |                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Technical Assistance Provided (If Any)                                                                                                                                                                                                                                                                               |                                             |
| Weapons and ammunition stored in locked cabinets inacces<br>Compliance<br>Reason Item Not Applicable<br>No weapons or ammunition on site<br>Technical Assistance Provided (If Any)                                                                                                                                   | sible to children.<br>Not Applicable        |
| Smoke detectors and fire extinguisher present.<br>Compliance<br>Upload Photo Verification<br>Technical Assistance Provided (If Any)<br>Verified by Monitoring Specialist                                                                                                                                             | In Compliance                               |
| OUTDOOR PLAY AREA                                                                                                                                                                                                                                                                                                    |                                             |
| Outdoor play area must be an area safe, maintained, and ha<br>Compliance<br>Upload Photo Verification<br>Technical Assistance Provided (If Any)<br>Verified by Monitoring Specialist                                                                                                                                 | ave no hazards.<br>In Compliance            |
| The outdoor area must either be continuously fenced to ens<br>others cannot enter the premises without supervision; or, if<br>Division approved, supervision plan for when children are in<br>Compliance<br>Upload Photo Verification<br>Technical Assistance Provided (If Any)<br>Verified by Monitoring Specialist | not fenced, child care provider must have a |
| Pools and open water areas are not accessible to children w<br>Compliance<br>Upload Photo Verification<br>Technical Assistance Provided (If Any)<br>Verified by Monitoring Specialist                                                                                                                                | ithout adult supervision.<br>In Compliance  |
| Play equipment is well-constructed and free from hazards.<br>Compliance<br>Upload Photo Verification<br>Technical Assistance Provided (If Any)<br>Verified by Monitoring Specialist                                                                                                                                  | In Compliance                               |
| EMERGENCY PREPAREDNESS AND RESPONSE PLAN                                                                                                                                                                                                                                                                             |                                             |

| State of Minosofi                            | Missouri Registered Child Care M<br>License-Exempt Checklis                                                           | -                                       |                                |
|----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------|
| Health and Sa<br>26)                         | afety Checklist for LEX Child Care Provid                                                                             | ders (Build                             | No.: 00032<br>Date: 11/16/2020 |
| Compliance<br>Upload Photo<br>Technical Assi | reparedness and response plan completed and<br>Verification<br>istance Provided (If Any)<br>Monitoring Specialist     | posted.<br>In Compliance                |                                |
| Compliance<br>Upload Photo<br>Technical Assi | hone numbers are readily available.<br>Verification<br>istance Provided (If Any)<br>Monitoring Specialist             | In Compliance                           |                                |
| ANIMALS                                      |                                                                                                                       |                                         |                                |
| Compliance<br>Reason Item I<br>No animals    | be non-threatening to children.<br>Not Applicable<br>on site<br>istance Provided (If Any)                             | Not Applicable                          |                                |
| Compliance<br>Reason Item I<br>No animals    | nimals may have a history of attacking or injur<br>Not Applicable<br>on site<br>istance Provided (If Any)             | ing human beings or<br>Not Applicable   | other animals.                 |
| Compliance<br>Reason Item I<br>No animals    | must be disease free and have all required vace<br>Not Applicable<br>on site<br>istance Provided (If Any)             | cinations according t<br>Not Applicable | o state and local law.         |
| Compliance<br>Upload Photo<br>Technical Assi | utdoor areas used by children are free of anima<br>Verification<br>istance Provided (If Any)<br>Monitoring Specialist | l excrement.<br>In Compliance           |                                |
| Compliance<br>Reason Item I<br>No animals    | nre not located in food preparation or serving an<br>Not Applicable<br>on site<br>istance Provided (If Any)           | rea and inaccessible<br>Not Applicable  | to children.                   |



### Health and Safety Checklist for LEX Child Care Providers (Build 26)

ILLEGAL SUBSTANCES AND CRIMINAL ACTIVITY

| The child care provider applicant's facility must be free<br>Compliance<br>Upload Photo Verification<br>Technical Assistance Provided (If Any)<br>Verified by Monitoring Specialist                      | e of illegal substances and criminal activity<br>In Compliance |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| RISK ASSESSMENT FOR TUBERCULOSIS (TB)                                                                                                                                                                    |                                                                |
| The child care provider applicant and staff shall submit<br>TB Test completed, signed and dated by a medical pro-<br>to initial registration or within twelve (12) months of hi                          | fessional no more than twelve (12) months prior                |
| Compliance                                                                                                                                                                                               | Not Applicable                                                 |
| Reason Item Not Applicable                                                                                                                                                                               |                                                                |
| Compliance is verified by DHSS-SCCR as part of their<br>Technical Assistance Provided (If Any)                                                                                                           | r inspection.                                                  |
| If a child care provider applicant or staff has active, co<br>applicant or staff must have on file documentation sho<br>that the child care provider applicant or staff is non-inf<br>become registered. | wing that a medical professional has certified                 |
| Compliance                                                                                                                                                                                               | Not Applicable                                                 |
| Reason Item Not Applicable                                                                                                                                                                               |                                                                |
| Compliance is verified by DHSS-SCCR as part of their                                                                                                                                                     | r inspection.                                                  |
| Technical Assistance Provided (If Any)                                                                                                                                                                   |                                                                |
| REQUIRED TRAINING                                                                                                                                                                                        |                                                                |

The child care provider applicant and staff shall register with Opportunities in a Professional Education Network (OPEN) and secure a Missouri Professional Development Identifier (MOPD ID) to track and successfully complete all required trainings as approved by the Division.

\*To be assessed at initial monitoring visit.

| Compliance                             | In Compliance |
|----------------------------------------|---------------|
| Upload Photo Verification              |               |
| Technical Assistance Provided (If Any) |               |
| Verified by Monitoring Specialist      |               |

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| Health | and Safety | Checklist for | LEX | Child | Care | Providers | (Build |
|--------|------------|---------------|-----|-------|------|-----------|--------|
| 26)    | -          |               |     |       |      |           |        |

The child care provider applicant and staff shall successfully complete Health and Safety training in all of the following topics:

- 1. Pediatric First Aid and Cardiopulmonary Resuscitation (CPR)
- 2. Prevention of Sudden Infant Death Syndrome and Safe Sleeping
- 3. Prevention of Shaken Baby Syndrome and Abusive Head Trauma
- 4. Emergency Disaster and Response
- 5. Mandatory Child Abuse and Neglect (CA/N) Reporting
- 6. Prevention and Control of Infectious Diseases, including Immunizations
- 7. Administration of Medication, Consistent with Standards for Parental Consent
- 8. Prevention and Response to Food Allergy Emergencies

9. Building and Physical Premises Safety, including Identification of and Protection from Hazards that can Cause Bodily Injury

- 10. Handling and Storage of Hazardous Materials and the Appropriate Disposal of Bio-contaminants 11. Transportation of Children

| Compliance                                | In Compliance |
|-------------------------------------------|---------------|
| Upload Photo Verification                 |               |
| Technical Assistance Provided (If Any)    |               |
| Verified by Monitoring Specialist in open |               |

Requirement (for renewing providers only)

Following the first year of training, the child care provider shall successfully complete six (6) clock hours of training prior to the expiration date of their registration annually thereafter. Training is available through the Missouri Workshop Calendar.

Public School exception: License-exempt public school providers may use Professional Development trainings required by their school as the six (6) clock hours of annual required training. Staff members who do not participate in Professional Development must take six (6) hours of training through the Workshop Calendar.

\*To be assessed at annual monitoring visit.

| Compliance                                                                                                                                                                                                                                                                         | Not In Compliance |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| Rule/Contract Reference                                                                                                                                                                                                                                                            |                   |
| Non-Compliance Description                                                                                                                                                                                                                                                         |                   |
| The following employees need to complete additional train<br>Jaden Jones 6 additional training hours needed<br>Melissa Jones 6 additional training hours needed<br>Alexis Richling 4.25 additional training hours needed<br>Charlotte Wright 4.25 additional training hours needed | ing hours:        |
| Image of Non-Compliance                                                                                                                                                                                                                                                            |                   |
| Correction Required                                                                                                                                                                                                                                                                |                   |
| Provider will submit verification of completed additional tra                                                                                                                                                                                                                      | ining hours.      |
| Technical Assistance Provided (If Any)                                                                                                                                                                                                                                             |                   |
| All other training on site and in open                                                                                                                                                                                                                                             |                   |
| Follow Up Compliance                                                                                                                                                                                                                                                               | Not In Compliance |
| Corrective Action Completed                                                                                                                                                                                                                                                        |                   |
| Provider submitted verification of completed additional trai                                                                                                                                                                                                                       | ning hours        |



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| Corrected At Time Of Visit    |            |
|-------------------------------|------------|
| Compliance Date               | 11/13/2020 |
| Compliance Verification Image |            |

#### RECORDKEEPING

The child care provider shall maintain an accurate register of all children who receive care from the provider. At a minimum, the register shall contain the following information for each child served under the contract with the department.

1. The child's full name and date of birth

2. The name, address, email address, phone number and other necessary contact information of each person legally responsible for each child

3. Allergies to food, medications, insects or other materials

4. Daily medications, including dosage, time of administering, and route for administering

5. Listing of persons authorized to pick-up and drop-off child as approved by person legally responsible for the child

6. For infants, feeding times and amount of breast milk or formula per feeding.

| Compliance                             | In Compliance |
|----------------------------------------|---------------|
| Upload Photo Verification              |               |
| Technical Assistance Provided (If Any) |               |
| Verified by Monitoring Specialist      |               |

The child care provider shall maintain a time and attendance register of all children who receive care from the provider. At a minimum, the time and attendance register shall contain the following information for each child served under a subsidized child care contract with the department:

1. The actual dates and times that a child received subsidized child care services showing for each day of service the date that the child arrived and the time that the child was picked up.

| 2   | The r | name | of the | person | who | dropped | off | the chil | d and | the | name | of the | person | who | picked | up t | the |
|-----|-------|------|--------|--------|-----|---------|-----|----------|-------|-----|------|--------|--------|-----|--------|------|-----|
| chi | ld.   |      |        |        |     |         |     |          |       |     |      |        |        |     |        |      |     |

3. The child care provider shall record the required information at the time the transaction took place. Compliance In Compliance

| Compliance                             |  |
|----------------------------------------|--|
| Upload Photo Verification              |  |
| Technical Assistance Provided (If Any) |  |
| Verified by Monitoring Specialist      |  |

#### SUMMARY

| 3 3                                                                                                                                                                                                                                                                                             | 12:59 PM<br>01:30 PM         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
| I certify that the License Exempt Facility has been reviewed a                                                                                                                                                                                                                                  | nd find that the facility is |
| In full compliance with Health and Safety Requirement<br>Not in full compliance with Health and Safety<br>Requirements. A follow-up on-site monitoring will be<br>completed within 14 business days from today's date to<br>reevaluate compliance with the areas noted as not in<br>compliance. |                              |



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| 0)                                                                                                             |                                                          |
|----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Signature Monitoring Specialist                                                                                |                                                          |
|                                                                                                                | $\mathcal{M}$                                            |
| Date                                                                                                           | 11/10/2020                                               |
| On                                                                                                             | 11/13/2020                                               |
| a follow-up on-site monitoring was completed on the<br>License Exempt Facility. I certify that the facility is | In full compliance with Health and Safety<br>Requirement |
| Signature Monitoring Specialist                                                                                | $\sim$                                                   |
| Date                                                                                                           | 11/13/2020                                               |
| Provider Signature                                                                                             |                                                          |
|                                                                                                                | lor                                                      |
| Date                                                                                                           | 11/10/2020                                               |