

Statement of Deficiencies

1103.A.-D.: Critical Incidents and Required Notifications

Not Met

1103.A.-D.: An early learning center shall make immediate notification to emergency personnel, law enforcement as applicable, and other appropriate agencies for the following types of critical incidents involving children in care:

1. death;
 2. serious injury or illness that required medical attention;
 3. reportable infectious diseases and conditions listed in LAC 51.II.105; and
 4. any other significant event relating to the health, safety, or well-being of any child, including but not limited to a lost child, an emergency situation, fire or other structural damage, or closure of the center.
- B. The parent shall be contacted immediately following any immediate notifications made under Subsection A.
- C. The department and other appropriate agencies shall be notified via email within 24 hours of the incident.
- D. The department shall be notified by written report within 24 hours of the incident or the next business day. This written notification shall be made on the department's Critical Incidents Report Form and shall contain all information requested on the form.

Finding:

1103.A.4, C.D.: Critical Incidents and Required Notifications. Based on record review/interview on 1/15/2021: The Provider failed to submit a critical incident report to the Department when on 1/14/2021, a Department of Children and Family Services Child Welfare investigator initiated an investigation regarding the care that S2 provides to infants at the center. As of 1/19/2021 at 8:30am, a critical incident report form has not submitted to the Department. S1 stated she would complete the critical incident form and submit to the Department.

CORRECTIVE ACTION PLAN: Effective 1/19/2021, S1 stated in the future she will submit all incidents defined in the regulation within 24 hours to the Department.

1509.A.8.a.&b.: Behavior Management Policy

Not Met

1509.A.8.a.&b.: Behavior Management Policy

Each center shall develop and implement a written behavior management policy describing the methods of behavior guidance and management that shall be used at the center.

The behavior management policy shall prohibit children from being subject to any of the following:

- i. physical or corporal punishment which includes but is not limited to yelling, slapping, spanking, yanking, shaking, pinching, exposure to extreme temperatures or other measures producing physical pain, putting anything in the mouth of a child, requiring a child to exercise, or placing a child in an uncomfortable position.
- ii. verbal abuse, which includes but is not limited to using offensive or profane language, telling a child to "shut up", or making derogatory remarks about children or family members of children in the presence of children;
- iii. the threat of a prohibited action even if there is no intent to follow through with the threat;
- iv. being disciplined by another child;
- v. being bullied by another child;
- vi. being deprived of food or beverages;
- vii. being restrained by devices such as high chairs or feeding tables for disciplinary purposes; and
- viii. having active play time withheld for disciplinary purposes, except timeout may be used during active play time for an infraction incurred during the playtime.

Finding:

1509.A.8.a.&b.i & ii: Behavior Management Policy. Based on interviews on 1/15/2021 and 1/19/2021, although the center developed and implemented a written behavior management policy, S2 has been seen on different occasions in 2020 and this year using a prohibited method of discipline as multiple infants were subject to corporal punishment and verbal abuse. Staff witnessed S2 "pop" infants on thigh, hand, and top of the head. Staff witnessed S2 "plop" multiple infants down hard into the infant rocker from a height of two feet and onto the changing table from a height of one foot. Staff have witnessed S2 yelling at the infants that "you get on my nerves", "no one wants to hold you", "shut up", "you are ugly", and "you look like the Grinch." S2 also allows the infants to cry for up to thirty minutes at a time and refuses to allow other staff to assist.

CORRECTIVE ACTION PLAN: Effective 2/2/2021, S1 will conduct a training on 2/3/2021 with all staff to address behavior management policy to ensure this deficiency is not repeated. Also, S1 will meet with S2 on 2/2/2021 and this will be documented as a formal staff write up.

1907.A.1.&2.: High Chairs

Not Met

1907.A.1.&2.:

1. The high chair manufacturer's restraint device shall be used when children are sitting in a high chair.
2. Children who are either too small or too large to be restrained using the manufacturer's restraint device shall not be placed in a high chair.

Finding:

1907.A.1. High Chairs. Based on observation: On 1/15/2021 at 11:23am, the high chair manufacturer's restraint device was not used when C2, age one

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year, was sitting in a high chair in the S4's classroom. S4 immediately corrected the issue prior to the Specialist exiting the classroom.

CORRECTIVE ACTION PLAN: Effective 1/15/2021, S1 will address with each staff today that children must be restrained with the safety belt when using a high chair to ensure this deficiency is not recited.

1909.H.: Infant - Placed Over Head or Face

Not Met

1909.H.: Nothing shall be placed over the head or face of an infant.

Finding:

1909.H.: Infant - Placed Over Head or Face. Based on interview(s): On 1/15/2021 and 1/19/2021, S2 has been seen on different occasions in 2020 and this year placing a blanket over the face of multiple infants when crying.

CORRECTIVE ACTION PLAN: Effective 1/29/2021, S1 will conduct a training with all staff to address that nothing can be placed over the head or face of an infant in order to ensure this deficiency is not recited.

1919.H.: Infants Held While Bottle Fed

Not Met

1919.H.: Infants that cannot hold a bottle shall be held while being bottle-fed. A child shall not be placed lying down on a mat or otherwise with a bottle, sippy cup, etc. A bottle shall not be propped at any time.

Finding:

1919.H. Infants Held While Bottle Fed. Based on observation: On 1/15/2021 at 11:10 am, S2 failed to hold a infant, C1 age 5 months, while being bottle-fed. S2 was observed bottle feeding C1, while C1 was seated in an infant rocker seat. S2 corrected the issue prior to the Specialist exiting the classroom.

CORRECTIVE ACTION PLAN: Effective 1/15/2021, S1 will address with each staff today that all infants must be held while being bottle fed to ensure this deficiency is not recited.