

Statement of Deficiencies

713.A.: Office of Public Health, State Fire, City Fire Approval

Not Met

713.A.: Annual licensing inspections by the department, current approvals by the Office of Public Health, Office of State Fire Marshal, and city fire (if applicable), and academic approval by the department (if type III center) shall be required before the expiration of an existing license. However, if a center has documentation establishing that the center requested an inspection by the Office of Public Health or the Office of State Fire Marshal prior to the expiration of the existing license, these approvals may be submitted to the department within 90 calendar days of the date of the license renewal.

Finding:

713.A. Based on record review/interview: At approximately 11:16am, S1 failed to have documentation of a current an updated approval from Academic Approval. Academic Approval expired on 6/30/2019. S1 stated she paid a renewal fee for the updated Academic Approval; however she has not received it from The Department. S1 provided Specialist with emails between her and The Department requesting the updated Academic Approval.

Corrective Action Plan: S1 stated she will contact her Licensing Consultant today to ensure she receives the updated Academic Approval.

1711.A.&B.&D.&G.: Child to Staff Ratio

Not Met

1711.A.&B.&D.&G.: A. Child to staff ratios are established to ensure the safety of all children.

B. Minimum child to staff ratios shall be met at all times.

1. There shall be a minimum of two staff members present at an early learning center when more than one child is present.
 2. Only those staff members directly providing care, supervision or guidance to children shall be counted in the child to staff ratios.
- D. Minimum Child to Staff Ratios for Type II and Type III centers:

Ages of Children	Ratio
Infants under 1 year	5:1
1 year	7:1
2 years	11:1
3 years	13:1
4 years	15:1
5 years	19:1
6 years and up	23:1

G. Mixed Age Groups - Minimum Child to Staff Ratios

1. An average of the child to staff ratios may be applied to mixed age groups of children ages 2, 3, 4 and 5
2. Child to staff ratios for children under age two are excluded from averaging.
3. When a mixed age group includes children younger than age two, the age of the youngest child determines the child to staff ratio for the group.
4. An average may be applied to a mixed age group consisting only of children ages 5 and older.

Finding:

1711.A.&B.&D.&G. Based on observation/interview/record review: At approximately 9:20am, the minimum child/staff ratio was not met at the center. Specialist observed S4 with 7 children ages 1 - 6 weeks, 1 - 2 months, and 4 - 1 year olds in a classroom. S1 was informed that the infant classroom did not meet ratio, as the infants' ratio is 5 children to 1 staff. Another staff is needed to meet the ratio. S1 stated that S5 was on her way to the center. She would be arriving late due to car issues. According to S4's attendance log, she arrived at the center at 8:30am. S4 was caring for the 7 children from 8:30am until S5 arrived at 9:28am. According to S5's attendance log, she clocked in at 9:28am. Ratio was corrected once S5 arrived at the center and went into the infant room.

Corrective Action Plan: Starting today, S1 stated she will schedule enough staff to ensure child/staff ratio is met at all times. She stated that she will assist in the classrooms when needed.

1725.A.-C.: Medication Management Training

Not Met

1725.A.-C.: A. All staff members who administer medication shall have medication administration training.

B. Whether the center is administering medication or not, each early learning center shall have at least two staff members trained in medication administration and at least one on the premises. A staff member who is a licensed practical nurse (LPN) or registered nurse (RN) with a valid nursing license shall be considered to have medication administration training.

C. Such training shall be completed every two years with an approved child care health consultant.

Finding:

1725.A.-C. Based on record review/interview: At approximately 6:57am, S1 failed to have at least two staff members trained in medication

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administration whether the early learning center administers medication or not. S1 stated since medication is not given to the children at the center she was unaware that at least two staff needed training in medication administration.

Corrective Action Plan: S1 emailed her trainer to schedule a class. She stated she was waiting for a response back.

1807.B.: CCCBC-Based Determinations of Eligibility for Volunteers and Staff

Not Met

1807.B.: B. Volunteers and Staff. An early learning center shall obtain a CCCBC-based determination of eligibility for child care purposes from the department for each volunteer, staff member, or employee of any kind, and shall have documentation of said determination available at all times for inspection upon request by the Licensing Division.

Finding:

1807.B. Based on record review/interview: At approximately 7:05am, a CCCBC-based determination of eligibility for child care purposes from the department was not obtained for S2, prior to her being present at the center or performing services. S1 stated S2's date of hire is 2/3/2020. According to the staff attendance log, S2 worked on the premises on 2/3/2020, 2/4/2020, 2/5/2020, and 2/6/2020. S1 stated she was unaware that S2 had to complete a background check prior to working with children on the premises. S1 provided Specialist with provisional monitoring forms for S2; however, S2 did not have provisional status on 2/3/2020, 2/4/2020, 2/5/2020 and 2/6/2020. At approximately 6:00am, Specialist observed S2 with S1 caring for 2 children (1 - 10 month old to 1 - 6 years old). At approximately 10:00am, S2 was observed leaving the premises.

Corrective Action Plan: S1 stated S2 would complete her a background check today. Additionally, S1 stated all new staff will have a completed background check and an eligible status prior to working on the premises.

1901.A.1.-3.: Telephones and Emergency Numbers

Not Met

1901.A.1.-3.: Telephones and Emergency Numbers

1. A working phone capable of incoming and outgoing calls shall be readily available at the center at all times. Cellular phones are not acceptable for this purpose.
2. When a center has multiple buildings and a phone is not located in each building where children are present, the center shall establish and follow written procedures for securing emergency help. The written procedures shall be posted in each building.
3. Centers located in schools and churches shall have a phone within the licensed area.

Finding:

1901.A.1.-3. Based on observations/interview: At approximately 11:55am, S1 failed to have a functional, readily available telephone capable of incoming and outgoing calls at all times at the center. S1 stated there is a land line, but she has always had the center's calls forwarded to her cellular phone. Specialist informed S1 that cellular phones are not acceptable for this purpose. S1 attempted to re-route the calls from her cellular phone to the center's land line, but was unable to during the licensing visit.

Corrective Action Plan: S1 stated she purchase a new telephone by the close of business today.

1915.A.: Health Services - Observation

Not Met

1915.A.: Observation. Upon arrival at the center, the physical condition of each child shall be observed for possible signs of illness, infections, bruises or injuries, and when something is observed, it shall be documented and such documentation shall include an explanation from the parent or child.

Finding:

1915.A. Based on record review/interview: At approximately 12:12pm, S1 failed to have documentation of observations, when something is observed, noted on children upon arrival to the center. Results including an explanation from parent and/or child were not documented. S1 stated staff completes daily observations of the all the children; however she could not locate any documentation of the daily observation. Specialist did not observe any staff conducting observations for the children upon arrival at the center. S1 stated that staff did not complete daily observations for today.

Corrective Action Plan: S1 stated she will locate the missing daily observation and file them in a binder and staff will complete observations everyday.

1919.A.&B.: Food Service and Nutrition - Menu

Not Met

1919.A.&B.: A. All meals and snacks provided by the center, and their preparation, service and storage, shall meet the requirements for meals of the U. S. Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP), 7 CFR 226.20, and LAC 51:XXIII.

B. The weekly menu shall:

1. be planned for each day of the week and list the specific food items served;
2. be prominently posted by the first day of each week and remain posted throughout the week; and
3. have substitutions or additions posted on or near the menu.

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Finding:

1919.A.&B. Based on record review/interview: At approximately 10:17am, S1 failed to have a current weekly menu listing specific food items served for each day of the week posted by the first day of each week and remain posted throughout the week. S1 stated she was unaware that a weekly lunch menu had to be posted. She stated that she is still learning the requirements for licensing since she has not been the Director for long. S1 stated that the children would served the following for lunch: Meat Sauce, Spaghetti, Corn, Fruit Cocktail, Milk.

Corrective Action Plan: S1 stated a weekly menu would be posted by the close of business today.

1921.E.: Tornado Drills

Not Met

1921.E.: Tornado drills shall be conducted at least once per month in the months of March, April, May, and June at various times of the day necessary to include all children and shall be documented.

Finding:

1921.E. Based on record review/interview: At approximately 11:40am, S1 failed to have documentation of tornado drills that were conducted at least once per month during the months of March, May, and June. S1 provided Specialist with a tornado drill conducted in April of 2019; however, S1 was unable to locate tornado drills March, May and June of 2019. S1 stated a tornado drill were conducted in March, May and June, but she believes they were misplaced.

Corrective Action Plan: S1 stated she will locate the missing tornado drills today and file them in a binder.
