

Statement of Deficiencies

1507.A.: Daily Attendance Records - Children

Not Met

1507.A.: A daily attendance record for children shall be maintained that shall:

1. include the child's first and last name, arrival and departure times, and first and last name of person or entity to whom the child is released;
2. accurately reflect children on the center premises at any given time; and
3. be used to sign in and out if a child leaves and returns to the center during the day.

Finding:

1507.A. Based on record review/interviews: At 10:30am, the center's daily attendance record for children did not accurately reflect the children on the child care premises at any given time. Specialist reviewed the children's daily attendance and observed 17 children signed in on the log, however, there were 28 children present.

Corrective Action Plan: S1, the staff in charge, was unable to provide a corrective action plan prior to departure. Specialist advised S1 that the center's children's daily attendance record must accurately reflect the children on the premises.

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 observations/interviews: At 10:20am, the center failed to meet the required child to staff ratio for children. Specialist observed 24 children, ages 1yr-4yrs, in a room with S2. S1 stated that they were short staff and did not have anyone else to come in and substitute.

Corrective Action Plan: S1, the staff in charge, was unable to provide a corrective action plan prior to departure. Specialist advised S1 that the center shall remain in ratio at all times.

1719.A.&B.: Orientation Training

Not Met

1719.A.&B.: A. Within seven calendar days of the first day present at the center, and prior to assuming sole responsibility for any children, each staff member shall receive orientation to the policies and practices of the center that at a minimum shall include:

1. child abuse identification and reporting;
2. emergency preparation;
3. licensing regulations; and
4. safe sleep practices.

B. Within 30 calendar days of date of hire, each staff member shall receive orientation to the additional policies and practices of the center that at a minimum shall include:

1. child development;
2. child guidance;
3. learning activities;
4. health and safety;
5. shaken baby prevention; and
6. CPR and first aid, as applicable.

Statement of Deficiencies

Finding:

1719.A.&B.: Based on record review/interviews: At 11:15am, Specialist reviewed staff files and observed that S3's file lacked documentation of S3 receiving orientation within seven days of the first day present at the center and prior to having sole responsibility for any children. S3 started on 2/17/2020, however, there was no documentation of orientation being completed. S1 stated that S3's orientation had been completed, but she did not know where it was.

Corrective Action Plan: S1, the staff in charge, was unable to provide a corrective action plan prior to departure. Specialist advised S1 an orientation for all staff must be completed within 7 days of staff being present at the center and it must be kept in all staff's file.

1723.A.&B.: CPR Certification

Not Met

1723.A.&B.: A. Infant and child CPR. Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in infant and child CPR through training approved by the department.

B. Adult CPR. Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in adult CPR through training approved by the department.

Finding:

1723.A.&B.: At 11:45am, the center failed to provide documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in infant and child CPR, through training approved by the department. 1 of 3 staff had documentation of this certification. S1 stated that S2 and S3 have registered to take a class to get certified.

Corrective Action Plan: S1, the staff in charge, was unable to provide a corrective action plan prior to departure. Specialist informed S1 that at 50% or at least 4 staff, whichever is less, shall have this certification.

1723.C.: Pediatric First Aid

Not Met

1723.C.: Pediatric First Aid. Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in pediatric first aid through training approved by the department.

Finding:

1723C.: At 11:45am, the center failed to provide documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in Pediatric First Aid through training approved by the department. 1 of 3 staff had documentation of this certification. S1 stated that S2 and S3 have registered to take a class to get certified.

Corrective Action Plan: S1, the staff in charge, was unable to provide a corrective action plan prior to departure. Specialist informed S1 that at 50% or at least 4 staff, whichever is less, shall have this certification.

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.

Finding:

1919.A.&B. Based on observations/interviews: At 10:45am, Specialist observed that the current weekly menu listing specific food items served for each day of the week was not prominently posted by the first day of each week and remain posted throughout the week. The menu posted was for the week of 2/10/20-2/14/20. S1 stated that she did not have a menu for the current week.

Corrective Action Plan: S1, the staff in charge, was unable to provide a corrective action plan prior to departure. Specialist advised S1 that the center's menu should be posted weekly.