

## Statement of Deficiencies

### 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.: Based on record review/interviews on 3/6/2023 at 1:30 p.m., although the early learning center has a behavior management policy that prohibits verbal abuse, and physical and corporal punishment, S7 (Date of Hire: 12/06/2021) used these prohibited methods of discipline. On 2/17/2023 from 12:57 p.m.-1:02 p.m., S7 subjected C3, three-years-old, to the following:

- Pushed C3 onto his nap mat;
- Held C3's right arm in her left hand and used right her elbow to push down on the back of C3's head while he lay face down on the nap pillow;
- Held C3 down with her hands, under his arms, while he squirmed on his stomach, and pushed the back of his head into the nap pillow;
- Pulled C3's legs down to straighten them when he tried to pull his knees up under him to a fetal position;
- Leaned her right side body onto C3 with her right elbow holding C3's head down at his neck;
- Grabbed C3 by the back, under his arms, and shook him;
- Extended his leg after he squirmed on his stomach and tried to bring his knees and legs under him;
- Leaned over him, nudged, and pressed her right elbow into his neck to hold his head down;
- Leaned with force and weight with her right elbow in C3's neck and held there as he kicked his feet;
- Grabbed the back of C3's neck, pulled him toward her, and leaned into the back of his neck with her elbow after he pulled away from her;
- Pushed C3's head onto nap pillow and leaned her elbow onto the left side of C3's head and face;
- Wrapped her hands under C3's right arm and around his left upper arm and shook him;
- Shoved C3's head down onto nap pillow;
- Grabbed the back of C3's head and shoved his head to the ground twice, in one swift motion, and yanked him by his right arm;
- Grabbed C3 by upper body, while face up and shook and shoved him in downward motion;
- Pressed C3 against her body with her elbow;
- Grabbed and pulled C3 by right upper arm and pushed back of head down toward the floor;
- Shook C3 while holding his leg and midsection, grabbed the back of his head, and shoved it to the floor;
- Held his left hand behind his back and grabbed the back of his neck and shoved his head down into his nap pillow; and
- Threw him across her body and dropped him onto his nap mat after he attempted to crawl away from her.

S7's last day worked was 2/17/2023 and she was terminated on 2/19/2023.

Corrective Action Plan: Effective 4/4/2023, S1 stated she will hold monthly meetings with all staff (attendance will be documented) to review the behavior management policy to be followed. Management will continue to conduct regular video monitoring of staff in the classroom to ensure staff are following the behavior management policy, to ensure compliance with this regulation.

## Statement of Deficiencies

### 1719.A.-C.: Orientation Training

Not Met

1719.A.-C.: 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 center-specific orientation to the policies and practices of the center that at a minimum shall include information on the center:

1. child abuse identification and reporting, including phone numbers for mandatory reporting and suspected child abuse and neglect;
2. location of emergency exits and emergency preparedness plans;
3. handling of emergencies due to food/allergic reactions;
4. location of first-aid supplies;
5. list of children with allergies and special needs;
6. identification of critical staff including but not limited to staff trained in CPR and first aid and staff who can administer medicine;
7. child release policies and restrictions;
8. child-to-staff ratio policies;
9. daily schedules;
10. opening policy;
11. closing policy; and
12. transportation policy and vehicle inspection procedures.

B. 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 complete the LDE Key Training Module 1 and the DCFS online Mandated Reporter Training. Key Training Module 1 shall at a minimum include information on the following:

1. general emergency preparedness, including natural disasters and man-caused events;
2. professionalism;
3. health and safety, which includes: daily observations, supervision regulations, daily attendance, child to staff ratios, improper discipline, prohibited discipline, prevention of shaken baby syndrome, prevention of abusive head trauma and child maltreatment, food safety, choking risks recognition and reporting of child abuse and neglect;
4. administration of medication consistent with standards for parental consent;
5. prevention and response to emergencies due to food and allergic reactions;
6. appropriate precautions in transporting children, if applicable;
7. public health policies, prevention and control of infectious diseases, including immunization information;
8. handling and storage of hazardous materials and the appropriate disposal of bio-contaminants;
9. pediatric first aid and cardiopulmonary resuscitation (CPR);
10. prevention of sudden infant death syndrome and use of safe sleep practices;
11. outdoor play practices;
12. environmental safety; and
13. building and physical premises safety, including identification of and protection from hazards, bodies of water and vehicular traffic;
14. child release practices; and
15. critical incident practices and licensing regulations

C. Within 30 calendar days of the first day present at the center and prior to assuming sole responsibility for any children, each staff member shall complete the LDE Key Orientation Training Modules 2 and 3, that at a minimum shall include information on the following:

1. child development;
2. child guidance;
3. learning activities;
4. health and safety; and
5. early learning development standards.

### Finding:

1719.B.-C.: Based on record review at 3/6/2023 12 p.m., S1 failed to provide documentation of the following orientation requirements:

- S35's failed to complete the LDE Key Training Module 2 and 3 within 30 calendar days of first day present at the center on 1/23/2023; and
- S40's failed to complete the LDE Key Training Module 1 within 7 calendar days and the LDE Key Training Modules 2 and 3 within 30 calendar days of the first day present at the center on 1/4/2023.

Based on observation/record review on 4/4/2023, Specialist observed S45 supervising 7, two-year-old children, and has not completed the LDE Key Training Module 1, 2, and 3, and DCFS Mandated Reporter Training. S45's first day working was 3/27/2023. S44's first day working is 3/13/2023 and there is no documentation of a completed LDE Key Training Module 1.

Corrective Action Plan: Effective 4/4/2023, S1 stated she will follow the New Hire/Re-Hire checklist and document completions by due dates, to ensure compliance with this regulation.

## Statement of Deficiencies

### 1721.A.-C.: Continuing Education Training

Not Met

1721.A.-C.: A. Early learning centers shall provide opportunities for continuing education of staff members who are left alone with children, or who have supervisory or disciplinary authority over children.

1. Staff members of early learning centers, excluding foster grandparents, shall obtain a minimum of 12 clock hours of continuing education per center anniversary year.

B. Staff members of type I, type II and type III centers who are neither left alone with children, nor have supervisory or disciplinary authority over children, shall obtain a minimum of three clock hours of continuing education in job related topics per center's anniversary year.

C. Continuing education for all types of centers shall be conducted by trainers approved by the department. The department shall keep a registry of approved trainers.

#### Finding:

1721.A.-C. Based on record review on 3/6/2023 at 1 p.m., the childcare center's staff failed to provide documentation that a minimum of 12 clock hours of continuing education were obtained in the center's anniversary year.

Corrective Action Plan: Effective 4/4/2023, S1 stated she has set a schedule that each staff member will complete a minimum of three training hours per quarter, and require certificate completion, to ensure compliance with this regulation.

### 1723.A.&B.: CPR Certification - Infant/Child

Not Met

1723.A.&B.: A. Infant and child CPR. All staff members on the premises of a center and accessible to children shall have current certification in infant and child CPR through training approved by the department.

B. Adult CPR. All staff members on the premises of a center and accessible to children shall have current certification in adult CPR through training approved by the department.

CPR Certification

#### Finding:

1723.A.&B.: Based on observation/record review on 3/6/2023 at 2 p.m., all staff on the premises of the childcare center and accessible to children failed to have a current certification in infant, child, and adult CPR through training approved by the Department.

Corrective Action Plan: Effective 4/4/2023, S1 stated all staff persons who have not completed the scheduled required trainings, no later than 60 days from their date of hire will be terminated, to ensure compliance with this regulation.

### 1723.C: Pediatric First Aid

Not Met

1723.C: C. All staff members on the premises of a center and accessible to children shall have current certification in pediatric first aid through training approved by the department.

#### Finding:

1723.C.: Based on observation/record review on 3/6/2023 at 2 p.m., all staff on the premises of the childcare center and accessible to children failed to have a current certification in Pediatric First Aid through training approved by the Department.

Corrective Action Plan: Effective 4/4/2023, S1 stated all staff persons who have not completed the scheduled required trainings, no later than 60 days from their date of hire will be terminated, to ensure compliance with this regulation.