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Statement of Deficiencies

1507.B.: Daily Attendance Records - Staff and Owners

Not Met

1507.B.: A daily attendance record for all staff members and owners shall be maintained that shall:

- 1. include the first and last name of the staff member or owner and arrival and departure times;
- 2. accurately reflect the staff members and owners on the center premises at any given time; and
- 3. be used to document staff members and owners who leave and return to the center during the day

Finding:

1507.B. Based on record review/observations at 11:38am, S1 failed to have a staff and owner's daily attendance record that accurately reflect persons on the child care premises on 3/11/2020:

- The Specialist observed S1 and S2 on premises during the Licensing visit, however there is no documentation of S1 and S2's arrival times. S1 stated she arrived at 6:30am, and S2 arrived at 8:30am.
- There is no documentation of the arrival and departure time for S5. S1 stated S5 arrived at 6:30am, and left at 10:00am.

Corrective Action Plan: Effective 3/12/2020, S1 stated she will begin checking the sign in sheets by 8:30am every morning, and will post a reminder sign near the front door today, to make sure all staff sign in and out daily.

1507.E.: Daily Attendance Records - Visitors

Not Met

1507.E.: A daily attendance record for all visitors to include the name, date of visit, arrival and departure times, and the purpose of the visit.

Finding:

1507.E. Based on record review at 1:21pm, S1 failed to have visitor's daily attendance record that accurately reflect when a visitor is on the child care premises.

- There is no documentation of the departure time and purpose of visit for O1 on 1/3/2020.
- There is no documentation of the departure time for O2 on 1/28/2020, 12/5/2019, 9/26/2019, 10/1/2019, 10/29/2019, 10/30/2019, and 11/21/2019.
- There is no documentation of the purpose of visit for O3 on 12/6/2019.
- There is no documentation of the departure time for O4 on 10/1/2019.
- There is no documentation of the departure time for O5 on 10/8/2019.

Corrective Action Plan: Effective 3/11/2020, S1 stated she will post a sign near the sign in clipboard, and on the back of the exit door, to remind visitors to sign and out prior to leaving the center. Both signs will be posted by the end of day today.

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.
- . 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:

		Ratio
		5:1
	7:1	
		11:1
13:1		
	15:1	
	19:1	
	23:1	
	13:1	13:1 15:1 19:1

- 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.B.1.Based on record review at 11:45am, S1 failed to have a minimum of 2 child care staff present at the early learning center when more than one child was present on 3/11/2020. Based on review of the staff's and children's attendance logs dated 3/11/2020, S1 had more than one child present when S3 arrived at 8:20am. At 8:20am S1 had 9 children present, ages one-year-old to four-years-old (3 one-year-olds, 2 two-year-olds, 2 three-year-

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olds, and 2 four-year-olds). S1 stated she and S5 were both present between 6:30am - 8:20am, however, there was no supporting documentation.

Corrective Action Plan: Effective 3/11/2020, S1 stated she will post a sign near the sign in clipboard, and on the back of the exit door, to remind visitors to sign in and out prior to leaving the center. Both signs will be posted by the end of day today.

1903.C.: Free of Hazards Not Met

1903.C.: Indoor and outdoor areas shall be free of hazards.

Finding:

1903.C. Based on observations at 11:43am, S1 failed to have an outdoor area that was free of hazards as, the Specialist observed the following:

- One loose wooden boards on the fence with two exposed nails that are accessible to the 15 children present.
- One broken wooden board with sharp jagged edges on the A/C unit's barrier, that has seven exposed nails that are accessible to the 15 children present. This was corrected prior to the Specialist's departure by S1 and S5. S1 was observed contacting the building's owner, to request to have the fence repaired or replaced.

Corrective Action Plan: Effective 3/11/2020, S1 stated she will check the play yard every morning, to ensure there are no hazards.

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.B.3. Based on record review/observations at 11:46am, S1 failed to have menu substitutions or additions posted on or near the menu for lunch on 3/11/2020. The posted menu stated the following would be served for lunch: Barbecue Chicken, Yellow Rice, Carrots, Mixed Fruit, and Milk. However, the Specialist observed S2 serve the following for lunch: Red Beans, Rice, Orange Slices, Bread, and Milk. S1 stated she had to change the menu, but forgot to document the changes.

Corrective Action Plan: Effective 3/11/2020, S1 stated she will prep meals the day before, and will document any changes to the menu at that time, to ensure all substitutions or additions are posted prior to the meal being served.

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/observations at 1:27pm, S1 failed to have documentation that tornado drills were conducted at least once per month during the months of March, April, and June 2019. S1 stated a tornado drill was not conducted during those months. The last tornado drill was conducted on 5/6/2019. S1 stated she will conduct a drill by the end of March 2020.

Corrective Action Plan: Effective 3/11/2020, S1 stated she will post a sign in the office today, to remind herself to conduct a tornado drill once month every March, April, May, and June.