Date - 05/08/2019 License # - 51267 Action Code - 5 - ANNUAL SURVEY

## 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.2,C.D. Based on record review on 05/08/2019, S1 failed to notify the Division of Licensing within 24 hours of an incident occurring that requires medical attention as evidenced by the center's incident/injury/accident/illness report dated 04/24/2019 indicate that C1 hit her head on the corner of a changing table. Per S1's statement, C1 received a "scratch" on her right forehead area that was bleeding but stopped after she applied pressure. S1 stated that she notified C1's mother immediately and the child was picked up. S1 stated that she was notified the next morning by C1's mother that she had taken C1 to the doctor. C1 received medical glue instead of stitches to the injury. S1 stated that medical insurance was offered but C1's mother chose not to use it.

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

## Finding:

1719.A.&B:Based on record review on 05/08/2019, S1 failed to complete orientation of the policies and practices with each staff within seven calendar days of the first day present at the center, and prior to them assuming sole responsibility of children to include child abuse identification and reporting; emergency preparation, licensing regulations; and safe sleep practices as evidenced by S8 and S11 failed to have an orientation training form. Per S1's statement, S8 was first present at the center on 02/25/2019. S11 was first present at the center on 02/13/2019.

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#### 1915.B.&C.: Health Services - Parental Notification

Not Met

1915.B.&C.:

- B. Reporting. Incidents, injuries, accidents, illnesses, and unusual behavior shall be documented and reported to the parent no later than when the child is released to the parent or authorized representative on the day of the occurrence.
- C. Immediate Notification. The parent shall be immediately notified in the following circumstances:
- 1. blood not contained in an adhesive strip;
- 2. head or neck or eye injury;
- 3. human bite that breaks the skin;
- 4. animal bite:
- 5. impaled object;
- 6. broken or dislodged teeth;
- 7. allergic reaction skin changes (e.g. rash, spots, swelling, etc.);
- 8. unusual breathing;
- 9. symptoms of dehydration;
- 10. temperature reading over 101° oral, 102° rectal, or 100° axillary; or
- 11. injury or illness requiring professional medical attention.

## Finding:

1915.C Based on record review on 05/08/2019, S2 failed to make immediate notification when a head injury occurred as evidenced by the incident/injury/accident/illness/behavior report indicates that on 04/03/2019 C2 fell and hit her head causing a red mark to appear on her forehead at 12:00 PM. S2 did not notify C2's mother until 5:00 PM that afternoon. Per S1's statement, C2's mother was notified by text however this information was not documented. C2 is 11 months old.

### 1917.D.: Medication Authorization - Non-Prescription Medication

**Not Met** 

1917.D.: If a non-prescription medication label reads "consult a physician", the early learning center shall also maintain a written authorization from a licensed health care provider for the child to take the medicine.

### Finding:

1917.D. Based on record review on 05/08/2019, S1 failed to maintain a written authorization from a licensed health care provider prior to administering medication to children as evidenced by the medication authorization form indicate that C3 and C4 was given as needed medication without written authorization from a phsycian. C3 was administered 3.75 ml of Tylenol on 04/11/2019 and C4 was administered 3.00 ml of Tylenol on 05/03/2019. Per S1's statement, the parent's provided the medicine and the dosage instructions. C3 is 1 years old. C4 is 10 months old.