

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: The Provider did not have a behavior management policy that clearly states ALL methods of discipline that are prohibited. The center's behavior management policy lacked prohibited forms of discipline to include: being bullied by another child and being restrained by devices such as high chairs or feeding tables for disciplinary purposes. Corrected before departure.

1715-A.5: State Central Registry

Not Met

1715-A.5: Personnel files for each staff member shall be maintained at the center and shall include the following:

documentation of a current, completed state central registry disclosure form indicating no justified (valid) finding of abuse or neglect by the DCFS, or a current determination from the DCFS indicating that the individual does not pose a risk to children.

Finding:

1715-A.5 Based on record review: Provider failed to have documentation of a completed state central registry disclosure form (SCR 1) on site and available for review at the center prior to a previously completed form expiring (1705.B). 1 of 26 staff, S16(DOH: 4/11/16) failed to have documentation of the annually completed form. Staff were on the premises on 6/7/17. Corrected before departure.

1725-A.-E.: Medication Management Training

Not Met

1725-A.-E.:

- A. Beginning July 1, 2016 - All staff members who administer medication shall have medication administration training.
- B. Whether administering medication or not, each early learning center shall have at least two staff members trained in medication administration.
- C. Such training shall be completed every two years with an approved Child Care Health Consultant.
- D. A licensed practical nurse (LPN) or registered nurse (RN) with a valid nursing license shall be considered to have medication administration training.

Finding:

1725-A.-E. Based on record review: The provider did not have at least two staff members trained in medication administration whether the early learning center administers medication or not. The center staff's certification expired in October 2016. S10 stated center staff took Medication Administration Training in October 2016 with a CCHC trainer, but the certificates have the training topic listed as "Infectious Disease, Ergonomics and Blood Borne Pathogens."

1903-C: Free of Hazards

Not Met

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

Finding:

1903-C Based on observations: The indoor area was not free of hazards as Specialist observed two corners protruding outwards in the classroom of S7 and S8 (Room 307) to have paint and plaster broken and chipping/flaking away, posing a hazard if ingested by children. S9 stated a work order will be put in for maintenance to repair the walls.

Statement of Deficiencies

1909-C: Infants - Positioning Devices

Not Met

1909-C: Infants shall not be placed in positioning devices, unless the center has written authorization from a physician to use a positioning device.

Finding:

1909-C Based on observations: Written authorization from a physician was not available for 1 of 1 infants to use a positioning device. Specialist observed C2 to be asleep in a crib lying on a boppy type pillow. There was no written authorization from a physician requiring the use of a positioning device.

1909-G: Infant - Bibs

Not Met

1909-G: Bibs shall not be worn by any child while asleep.

Finding:

1909-G Based on observations: The provider allowed a bib to be worn by a child while asleep. Specialist observed C1 to be asleep with a bib still being worn around the neck. Corrected at the time.

1915-A: Health Services - Observation

Not Met

1915-A: 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: The provider DID document 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.
