Statement of Deficiencies

1103.A.-D.: Critical Incidents and Required Notifications

Not Met

Date - 06/22/2020

License # - 51157

Action Code - 23 - INCIDENT

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.-D. Based on interview(s)/record review on 6/22/2020, at 10:30 AM, S1 and S2 failed to immediately notify the Parent of the following critical incident: Specialist reviewed a Critical Incident Report Form which documented on 5/6/2020, at 1:40 AM, S3 was observed by S2 hitting C1, age 4, on the back with an unacceptable amount of force. S2 stated the hit was not extreme; however, it was too hard. S4 stated she was standing in the hallway and heard the hit though she was not in a position to see it. O1 was not notified until 4:00 PM. S1 and S2 stated the reason for the delay was due to the center dealing with a less than reasonable outburst from S3 as well as seeking guidance on the proper protocol for situations such as this.

Corrective Action: Effective 6/22/2020, S1 stated she will have a training with all staff on the proper steps to handle a critical incident with all staff by 7/3/2020 to ensure this deficiency is not cited again.

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 interviews and record review on 6/22/2020, at 10:30 AM: Although the center developed and implemented a written behavior management policy, S3 used a prohibited method of discipline as she subjected C1, age 4, to physical punishment/corporal punishment on 5/6/2020 at 1:40 PM. Specialist reviewed a Critical Incident Report Form which documented on 5/6/2020, at 1:40 PM, S3 was observed by S2 hitting C1, age 4, on the back with an unacceptable amount of force. S2 stated the hit was not extreme; however, it was too hard. S4 stated she was standing in the hallway and heard the hit though she was not in a position to see it. S3 was immediately terminated.

Corrective Action Plan: Effective 5/8/2020, S1 stated she and S2 began completing observation walks in each classroom during nap-time as well as required all staff to attend a Managing Challenging Situations training on 5/12/2020 to ensure this deficiency is not cited again.