

Statement of Deficiencies

1709.B.1.-3.: Director Qualifications

Not Met

1709.B.1.-3.: The director/director designee shall have documentation of at least one of the following upon date of hire as director or director designee:

1. an early childhood ancillary certificate and one year of experience in teaching or care in a licensed early learning center, or comparable setting, subject to the approval by the department;
2. a national administrator credential and one year experience in teaching or care in a licensed early learning center, or comparable setting, plus 6 credit hours or 90 clock hours of training in child care, child development, early childhood, or management/administration, subject to approval by the department; or
3. three years of experience as a director or staff in a licensed early learning center, or comparable setting, subject to approval by the Licensing Division; plus 6 credit hours or 90 clock hours of training in child care, child care development, early childhood, or management/administration approved by the department.

Finding:

1709.B.1.-3.: Based on observation/record review at 10 a.m., S2 failed to have at least one of the required documentation to qualify as director of the center. S2 has been the sole director of the center as of 5/13/2022. S2's date of hire is 2/25/2022 and first day working in the center is 3/28/2022. S2 stated she requested all documentation to submit in order to qualify and is awaiting a response.

Corrective Action Plan: Effective 7/11/2022, S2 stated she will submit all documentation and complete all training requirements required to qualify as the director no later than 7/22/2022, to ensure compliance with this regulation.

1713.A.&B.&C.: Supervision

Not Met

1713.A.&B.&C.: A: Children shall be supervised at all times in the center, on the playground, on field trips, on non-vehicular excursions, and during all water activities and water play activities.
B: Children shall not be left alone in any room, (except the restroom as indicated in Subsection G of this Section or when being provided services by therapeutic professionals, as defined in §103), outdoors, or in vehicles, even momentarily, without staff present.
C: A staff person shall be assigned to supervise specific children whose names and whereabouts that staff person shall know and with whom the staff person shall be physically present. Staff shall be able to state how many children are in their care at all times.

Finding:

1713.A.&B.&C.: Based on observation/interview, staff failed to supervise children at all times. At 12:28 p.m., S15 returned to the classroom with 11 three-to-four-year old children while C7 (three-year-old) remained down the hallway in the restroom behind the front office alone. Specialist alerted S2 and she assisted with returning C7 to the classroom. At 12:43 p.m., Specialist observed C3 (four-year-old) leave the classroom and walk down the hallway to the restroom behind the front office. S2 observed C3 in the hallway and provided supervision to the restroom. S5 was assigned to supervise C3 who was unaware he left the classroom to go to the restroom.

Corrective Action Plan: Effective 7/11/2022, S2 stated she will conduct a retraining of this regulation on 7/12/2022 and it will be documented with all staff in attendance, to ensure compliance with this regulation.

1715.A.1.&3.: Staff Records and Personnel Files

Not Met

1715.A.1.&3.: Staff Members. Personnel files for each staff member shall be maintained at the center and shall include the following:

1. an application or staff information form containing the following information:
 - a. name;
 - b. date of birth;
 - c. home address and phone number;
 - d. training,
 - e. work experience;
 - f. educational background;
 - g. hire date; and
 - h. first day onsite working with children;
3. Upon termination or resignation of employment, the last date of employment and reason for leaving;

Finding:

1715.A.1.: Based on record review at 11 a.m., S2 failed to maintain a staff personnel file to include an application or staff information form for S15. The personnel files failed to include documentation of the date of hire and first day onsite working with children for S15, S18, and S20. S2 corrected prior to Specialist's departure.

Corrective Action Plan: Effective 7/11/2022, S2 stated she will print the staff information form and orientation form to include in the staff's file prior to hiring new staff and it will be documented, to ensure compliance with this regulation.

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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.A.: Based on observation/record review at 11 a.m., S2 failed to provide documentation that 6 of 7 staff (S8, S15, S17, S19, S20, and S22) received center-specific orientation to the policies and practices of the center within seven days of the first day present at the center. S2 failed to provide documentation that S15 completed the DCFS Mandated Reporter Training within seven days of first day present at the center on 6/9/2022. The staff's first day present at the center were as follows: S8 was 4/4/2022, S17 was 6/7/2022, S19 was 6/6/2022, S20 was 6/16/2022, and S22 was 5/5/2022.

Corrective Action Plan: Effective 7/11/2022, S2 stated she will print the orientation form and document at the time of staff hire and completed training, 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

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Finding:

1723.A.&B.: Based on observation/record review at 10 a.m., S2 failed to have documentation that all staff on the center's premises and accessible to children have current certification in infant, child, and adult CPR through training approved by the Department. S2 stated all staff will complete their online and skills training no later than 7/22/2022.

Corrective Action Plan: Effective 7/11/2022, all new hired staff will have the training classes scheduled to complete at their time of hire, 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 at 10 a.m., S2 failed to have documentation that all staff on the center's premises and accessible to children have current certification in Pediatric First Aid through training approved by the Department. S2 stated all staff will complete their online and skills training no later than 7/22/2022.

Corrective Action Plan: Effective 7/11/2022, all new hired staff will have the training classes scheduled to complete at their time of hire, to ensure compliance with this regulation.

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 10 a.m., the indoor area was not free of hazards. Specialist observed an electrical wall receptacle in two 3-4 year old classrooms that failed to include safety covers. S2 corrected.

Corrective Action Plan: Effective 7/11/2022, S2 stated she will review this regulation with staff and make a part of the closing duties. S2 stated she conducts a walk-through of the center daily, to ensure compliance with this regulation.

1909.B.: Infants Placed on Backs for Sleeping

Not Met

1909.B.: All infants shall be placed on their backs for sleeping.

1. Written authorization from a physician is required for any other sleeping position.
2. Written notice of the specifically authorized sleeping position shall be posted on or near the crib.

Finding:

1909.B.: Based on observations/interview at 1:30 p.m., staff failed to place infants on their backs for sleeping. Specialist observed C4, C5, and C6 (infants) on their stomachs asleep in their cribs. S17 stated all of the infants were placed in their cribs on their stomachs because they sleep better this way. Staff stated all of the infants are able to turn over on their own. Staff corrected prior to Specialist's departure.

Corrective Action Plan: Effective 7/11/2022, S2 stated she reviewed this regulation with all staff who work in the infant classroom. S2 stated she and S5 will conduct walk-through of the classroom, to ensure compliance with this regulation.

1915.A.: Health Services - Observation

Not Met

1915.A.: Observation. 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 observations at 10:15 a.m., Specialist observed a sore on C1's nose and reviewed the center's daily observations. The record documented a sore on C1's nose and a scratch on C2's forehead, and failed to include an explanation from the parent or child.

Corrective Action Plan: Effective 7/11/2022, S2 stated she printed the most current form to include column for explanation and will conduct a retraining of this regulation with staff, no later than 7/22/2022, and it will be documented, to ensure compliance with this regulation.

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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.B.&C.: Based on record review at 2 p.m., Specialist reviewed the center's incident reports from 5/1/2022 to present and the records failed to include the following documentation:

- On 6/28/2022 at 10:40 a.m., a child pushed another student on the large outdoor slide resulting in a brush burn on their arm. There failed to be documentation of the injury and notification to the parent;
- On 6/23/2022 at 11:05 a.m., a child fell and busted his bottom lip, staff failed to document immediate notification as the parent was notified at 12:08 p.m.;
- On 6/22/2022 at 4 p.m., a child was bitten on the shoulder. There failed to be documentation of the injury and notification to the parent;
- On 5/25/2022 at 10:20 a.m., staff observed a blood blister on a child's lip, staff failed to document immediate notification to the parent. The parent signed the report with no date and time recorded;
- On 5/23/2022 at 9:35 a.m., a child was bit on her back, staff failed to document that the parent was notified no later than when the child was released. The parent signed and dated the record on 5/24/2022;
- On 5/23/2022 at 4:30 p.m., a child was hit on the forehead, leaving a red mark. Staff failed to document immediate notification to the parent. The parent signed and dated the form at 5:51 p.m.;
- On 5/20/2022 at 10:50 a.m., a child was bitten on the back. There failed to be documentation that the parent was notified no later than when the child was released. The parent signed with no date and time recorded;
- On 5/12/2022 at 8:20 a.m., a child was bitten on the right shoulder. There failed to be documentation that the parent was notified no later than when the child was released. The parent signed with no date and time recorded;
- On 5/12/2022 at 8:37 a.m., a child hit her head, staff failed to document immediate notification to the parent. The parent signed the report with no date and time recorded; and
- On 5/3/2022 throughout the morning, a child was consistently pushing, hitting, and getting in his friends' faces. He used profanity and when corrected, ignored staff or said, "No." There failed to be documentation that the parent was notified no later than when the child was released on the day of the incident.

Corrective Action Plan: Effective 7/11/2022, S2 stated she will ensure both incident reports are documented and maintained together. A retraining will be conducted with all staff no later than 7/22/2022 and it will be documented, to ensure compliance with this regulation.