

Statement of Deficiencies

1103-A-E: Critical Incidents and Required Notification

Not Met

1103-A-E: 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 Licensing Division and other appropriate agencies shall be notified via email within 24 hours of the incident.
- D. The Licensing Division 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 Licensing Division's Critical Incidents Report Form and shall contain all information requested on the form.
- E. Reporting deadlines may be adjusted in the event of a natural catastrophe and/or disaster, as determined by the Department.

Finding:

1103-A.2. Based on record review: The Provider failed to notify the Division of Licensing by written report within 24 hours or by the next business day of the incident of 7/8/17, in which C1 sustained an injury to her left wrist and sought medical treatment after hours. The written notification shall be made on the Licensing Division's Critical Incidents Report Form and shall contain all information requested on the form.

1503-A-C: General Liability Insurance Policy

Not Met

1503-A-C: A. A center shall maintain in force at all times current commercial liability insurance for the operation of the center to ensure medical coverage for children in the event of accident or injury.

- B. A center is responsible for payment of medical expenses of a child injured while in the center's care.
- C. Documentation of commercial liability insurance shall consist of the insurance policy or current binder that includes the name of the early learning center, physical address of the center, name of the insurance company, policy number, period of coverage and explanation of the coverage.

Finding:

1503-A-C Based on interview(s): The provider was not responsible for payment of medical expenses of a child injured while in the provider's care as S6 was aware O1 was taking C1 to seek medical treatment for an injury to the wrist on noticed at pick-up on 7/8/17 and did not offer the center's insurance coverage.

1507-A: Daily Attendance Records - Children

Not Met

1507-A: A daily attendance record for children shall be maintained that shall:

1. include the child's first and last name, arrival and departure times, and first and last name of person or entity to whom the child is released;
2. accurately reflect children on the center premises at any given time; and
3. be used to sign in and out if a child leaves and returns to the center during the day.

Finding:

1507-A Based on observation/record review: The center's daily attendance record for children did not accurately reflect the children on the child care premises at any given time as 24 children were present and 17 children were signed in on the log upon Specialist's arrival on 7/24/17.

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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.

1. 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:

Ages of Children	Ratio
Infants under 1 year	5:1
1 year	7:1
2 years	11:1
3 years	13:1
4 years	15:1
5 years	19:1
6 years and up	23:1

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-A-B-D-G Based on observations: The Provider failed to meet the required child to staff ratio for children of the following ages: 15 children age Two to Four years of age with one staff (S2). There were 6 - Two year old children, 7 - Three year old children and 1 - Four year old child and 1 - Five year old child. The required ratio for children of this age is average and should be 13 children per 1 staff person. S1 was in the kitchen preparing lunch for the children. Two staff were needed to satisfy the required child to staff ratio. S5 arrived at 11:30 a.m. to bring the group into child/staff ratio.

1715-A.4: Criminal Background Check

Not Met

1715-A.4: Personnel files for each staff member shall be maintained at the center and shall include the following: documentation of a fingerprint based satisfactory criminal background check

Finding:

1715-A.4 Based on record review: Documentation of a satisfactory fingerprint based criminal background check (CBC) was not available for 1 of 6 staff, prior to the individual(s) being present in the childcare facility (1703.A) S3 date of hire is 5/22/17 and the CBC was completed on 6/19/17.

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) prior to an individual being present in or providing services to the center on site and available for review at the center (1705.A-B). 1 of 6 staff, S3(DOH: 5/22/17) failed to have documentation of the completed form. Staff were on the premises on 5/22, 5/23, 5/24, 5/25, 5/30, 6/5, 6/6, 6/7, 6/9, 6/12, 6/13, 6/14, 6/16, 6/19, 6/22, 6/23, 6/26, 6/27, 6/28, 6/30, 7/3, 7/5, 7/7, 7/10, 7/11, 7/13, 7/14, 7/17, 7/19, 7/21 and 7/24/17 and failed to have documentation of the completed form. Staff were on the premises as observed by the licensing specialist. Provider corrected during licensing inspection. 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). 2 of 6 staff, S5(DOH: 9/26/13) and S6(DOH: 9/26/13) failed to have documentation of the annually completed form. The SCR on file for S5 expired on 4/19/17 and the SCR on file for S6 expired on 8/13/16 and this staff person was present in the licensed child care facility. Provider corrected during licensing inspection.

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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: The provider did not have documentation of incidents of incidents, injuries, accidents, illnesses, and unusual behaviors. Provider did not have documentation of the incident of 7/8/17, in which C1 injured her wrist on the day care premises.
