

## Statement of Deficiencies

### 1509-A.2: Non-Discrimination Policy

Not Met

1509-A.2: Non-discrimination Policy that prohibits discrimination on the basis of race, color, creed, sex, national origin, handicap, ancestry or whether a child is being breastfed.

#### Finding:

1509-A.2 Based on record review: The Provider did not have a policy that states that discrimination on the basis of race, color, creed, sex, national origin, handicap,ancestry, or whether a child is being breastfed is prohibited.

### 1511-A.1: Physical Activity Procedure

Not Met

1511-A.1: Physical Activity

- Children under age two shall be provided time and space for age appropriate physical activity for a minimum of 60 minutes per day.
- Children age two and older shall be provided a minimum of 60 minutes of physical activity per day that includes a combination of both teacher led and free play.

#### Finding:

1511-A.1 Based on record review: The Provider did not have a written and implemented procedure for children under age two and for children age two and older.

### 1511-A.2: Sleep/Rest Procedure

Not Met

1511-A.2: Sleep/Rest

- Infants shall be allowed to sleep according to their individual schedules
- Children under age 4 shall have daily rest time of at least 75 minutes in programs operating more than 5 hours per day.
- Children ages 4 and older shall be offered the opportunity for quiet time.

#### Finding:

1511-A.2 Based on record review: The Provider did not have a written and implemented procedure for Sleep/Rest for infants, children under age four and for children age four and older.

### 1715-A.1.3.: Staff Records and Personnel Files

Not Met

1715-A.1.3.: Personnel files for each staff member shall be maintained at the center and shall include the following:

An application or staff information form containing the following information: name, date of birth, home address and phone number, training, work experience, educational background and hire date;

Upon termination or resignation of employment, the last date of employment and reason for leaving;

#### Finding:

1715-A.1.3. Based on record review: The Provider did not have an application/staff information form to include name, date of birth, home address and phone number, training, work experience, educational background,hire date,upon termination or resignation of employment, the last date of employment, reason for leaving,for staff: S3.

### 1715-A.2: Photo Identification

Not Met

1715-A.2: Personnel files for each staff member shall be maintained at the center and shall include the following:

copy of a state or federal government issued photo identification;

#### Finding:

1715-A.2 Based on record review: The center did not have a copy of a State or federal government issued photo Identification available for review for 1 of 10 staff, S3.

### 1715-A.4: Criminal Background Check

Not Met

1715-A.4: Staff Members. 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: S1 and S3 provided a copy of their certified criminal background check (RTR), however, the provider failed to obtain a new satisfactory criminal background check from the Louisiana State Police for this staff prior to the one year date of issuance of the previous certified

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criminal background check in order for the individual to continue employment at the center (1703.E). The criminal background check on file for S1 expired on 7/8/2017 , S1 has been present on the premises since her date of hire on 7/8/2016, but was not present during licensing visit on 7/26/2017. The criminal background check on file for S3 expired on 6/27/2017, S3 has been present on the premises since her date of hire on 7/10/2016. S3 was present on the premises during licensing visit on 7/26/2017. S3 exited the premises at 12:17 pm.

### 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). 1 of 10 staff, S3 SCR although completed failed to contain signature dates , therefore specialist was unable to determine if form was completed timely.

### 1723-A.&B.: CPR Certification

**Not Met**

1723-A.&B.: Infant and child CPR

Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in infant and child CPR.

Adult CPR

Centers shall have at least one staff member on the premises and accessible to children trained in Adult CPR if there is a child eight years or older on the premises.

#### Finding:

1723-A.&B.: Based on record review: The Provider did not have documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in infant and child CPR. 3 of 8 staff present on the premises had documentation of this certification.

### 1723-C.-D.: Pediatric First Aid

**Not Met**

1723-C.-D.:

C. Pediatric First Aid - Beginning on July 1, 2016, Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in Pediatric First Aid.

D. Certification - A copy of the certification for each such staff member shall be on-site at all times and available for inspection by the Licensing Division.

#### Finding:

1723-C.-D. Based on record review: Based on record review: The Provider did not have documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in infant and child CPR. 3 of 8 staff present on the premises had documentation of this certification.

### 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 center did not 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. Specialist reviewed Health Services-Observation forms in S6 class and verification that Health Service Observations were completed could not be located. The last documentation was completed on 6/20/2017

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### 1921-C: Evacuation Pack

Not Met

1921-C: The center shall have an evacuation pack, the location of which is known to all staff, that at a minimum shall contain:

1. a list of area emergency phone numbers;
2. a list of emergency contact information and emergency medical authorization for all enrolled children;
3. an emergency pick up form;
4. first aid supplies, hand sanitizer, wet wipes, and tissue;
5. diapers for children who are not toilet trained and plastic bags for diapers;
6. a battery powered flashlight and radio and batteries;
7. food for children under the age of 4, including infant food and formula; and
8. disposable cups and bottled water.

#### Finding:

1921-C Based on observations: Based on observations, the provider failed to have a completed evacuation pack. The provider failed to have the following: a list of area emergency phone numbers, a list of emergency contact information and emergency medical authorization for all enrolled children, an emergency pick up form, first aid supplies, hand sanitizer, wet wipes, and tissue, diapers for children who are not toilet trained and plastic bags for diapers, a battery powered flashlight and radio and batteries, food for children under the age of 4, including infant food and formula, disposable cups and bottled water.

### 1921-D: Emergency and Evacuation Records

Not Met

1921-D: A center shall maintain a copy of records, documents, and computer files necessary for its continued operation following an emergency in either a portable file or at an off-site location.

#### Finding:

1921-D Based on observations: The center did not maintain a copy of records, documents, and computer files necessary for its continued operation following an emergency in either a portable file or at an off-site location.

### 1921-E: Tornado Drills

Not Met

1921-E: Tornado drills shall be conducted at least once per month in the months of March, April, May, and June at various times of the day necessary to include all children and shall be documented.

#### Finding:

1921-E Based on record review:

The provider did not have documentation of tornado drills that were conducted at least once per month during the months of April, May, and June. Documentation of the last tornado drill was completed on 3/30/2017.