

Statement of Deficiencies

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

Not Met

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 record review/interview(s): S13, the acting staff in charge at the time, failed to notify within 24 hours the Department and Child Welfare of the following critical incident:

- On 05/22/2019, Child Welfare received an allegation of C1 having unexplained red marks on his back, left shoulder blade, right arm and the inner side of the right elbow. S1 stated, although she was not present for this incident, She is aware that C1 was brought to the doctor on this allegation.
- On 06/25/2019, S1 stated she was walking around the center to check on the classrooms and observed C2 with scrapes on the middle of her forehead and knees. S1 stated C2's teachers were not aware of the scratches or of what happened to C2. C2 did not come into the center with marks on her on 06/25/2019, according to the classroom's daily observation documentation. S1 stated C2 was brought to the doctor by her parents because of scratches.

1509.A.6.: Parental Access Policy

Not Met

1509.A.6.: Parental Access Policy

Parents shall be allowed to visit the center anytime during its regular hours of operation and when children are present.

Finding:

1509.A.6. Based on record review/interview: S1 did not have a written policy allowing parents to visit the center anytime during regular hours of operation and when children are present.

- On 8/1/2019 at approximately 1:45pm, S1 stated that there is no written policy allowing parents to visit the center anytime during regular hours of operations and when children are present. S1 stated that she did not add a written policy for parental access.
- During the visit on 08/07/2019, Specialist did observe the parental access policy posted on the wall.

1707.A.1.&2.: Required Staffing - Director or Director Designee

Not Met

1707.A.1.&2.: Director or Director Designee. Each center shall have a qualified director or qualified director designee.

1. The director or director designee shall be an on-site, full-time staff person at the center during the daytime hours of operation (prior to 9 p.m.). When the director is not an on-site full-time employee at the licensed location, there shall be a qualified director designee who is an on-site full-time employee at the licensed location.
2. The director or director designee shall be responsible for planning, managing, and controlling the center's daily activities, as well as responding to parental concerns and ensuring that minimum licensing requirements are met.

Finding:

1707.A.1.&2. Based on record review/interview: S1 did not have a qualified Director who is an on-site full time staff person at the center during the day time hours of operation (prior to 9:00 p.m.) and responsible for planning, managing, and controlling the center's daily activities, as well as responding to parental concerns and ensuring that minimum licensing requirements are met.

- On 8/1/2019, at approximately 12:15pm S1 stated that there is no full time staff person on-site at the center working as a Director. S1 stated that interviews for a full time director will be held soon to fill the Director position.

Statement of Deficiencies

1707.B.1.&2.: Required Staffing - Staff-in-Charge

Not Met

1707.B.1.&2.: Staff-in-Charge. When the director or director designee is not on the premises due to a temporary absence of less than 11 consecutive business days, or during nighttime care hours, there shall be an individual appointed as staff-in-charge.

1. The staff-in-charge shall be at least age 21.
2. The staff-in-charge shall have the authority to respond to emergencies, inspections, parental concerns, and have access to all required information.

Finding:

** NEW ** 1707 B.1&2 Based on observation and interview: There was no staff in charge present on 08/07/2019 as S1 was not at the center.

1711.A.&B.&F.&G.: Child to Staff Ratio

Not Met

1711.A.&B.&F.&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.
- F. Minimum Child to Staff Ratios for Type I centers:

Ages of Children	Ratio		
Infants under 1 year	6:1		
1 year		8:1	2 years
3 years	14:1		12:1
4 years	16:1		
5 years	20:1		
6 years and up		25:1	

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:

NEW 1711.A.&B.&C.&F.&G. Based on observation. S1 failed to meet the required child to staff ratio for children of the following ages: eight children age two months to five month old with one staff. The required ratio for children of this age is six children per 1 staff person.

- On 8/1/2019 at approximately 1:23pm, during the second walk-through Specialists observed S4 alone in the infant room with eight infants. S2 was seen coming out of building two and going into the infant room with S4 and the eight infants to satisfy infant ratio.

1713.E.&F.: Supervision Participation

Not Met

1713.E.&F.:

- E: While supervising a group of children, staff shall devote their time to supervising the children, meeting the needs of the children, and participating with them in their activities.
- F: Staff duties that include cooking, housekeeping or administrative functions shall not interfere with the supervision of children.

Finding:

1713 E Based on observation: While supervising a group of children, childcare staff did not devote their time to supervision of the children, meeting the needs of the children, and in participation with the children in their activities.

- On 08/01/2019 at approximately 11:48am, S6 did not devote her entire time to supervising children the seven 1 year old children in her classroom. S6 was observed eating and reading a book while children napped. S6 did not notice Specialists and S1 at the door of the classroom until she looked up after being asked the age of the children in her classroom.

- On 08/07/2019, S5 did not devote her entire time to supervising the 6 one year old children eating snack in her class. At approximately 2:06pm, after Specialists visited the other tow classes in building 2, S5 was heard and seen talking on her cellular phone, standing by the counter/cabinet on the opposite side of the classroom with her back to the children. S5 got off of the phone up at 2:07pm.

Statement of Deficiencies

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:

****NEW**** 1715.3. Based on record review/interview: S1 did not provide documentation upon termination or resignation of employment, the last date of employment, reason for leaving, for staff: S14, S15, S16, and S17.

- On 8/1/2019 at approximately 2:32pm, S1 did not have documentation of termination dates for S14, S15, S16, and S17.

1725.A.-C.: Medication Management Training

Not Met

1725.A.-C.: A. All staff members who administer medication shall have medication administration training.

B. Whether the center is administering medication or not, each early learning center shall have at least two staff members trained in medication administration and at least one on the premises. A staff member who is a licensed practical nurse (LPN) or registered nurse (RN) with a valid nursing license shall be considered to have medication administration training.

C. Such training shall be completed every two years with an approved child care health consultant.

Finding:

1725.A.-C. Based on record review: There was no documentation that at least two staff members were trained in medication administration whether the early learning center administers medication or not.

-On 8/1/2019 at approximately 12:17pm, S1 stated that there are no staff members that are trained in medication administration. S1 stated that at least four staff members will be receiving training in medication administration soon.

- Upon return to the center on 08/07/2019, S1, S4, S5 and S10 did receive medication training on 08/02/2019

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:

****NEW****1909.C. Based on observations: Written authorization from a physician was not available for one of eight infants to use a positioning device.

- On 8/1/2019 at approximately 1:24pm, during the second walk-through Specialists observed one out of five infants ranging from seven months to eleven months old sleeping in an infant swing in the infant room while S3 was present in the room.

1909.H.: Infant - Placed Over Head or Face

Not Met

1909.H.: Nothing shall be placed over the head or face of an infant.

Finding:

****NEW****1909.H. Based on observations: An Infant's face was covered by a loose blanket during nap time.

- On 8/1/2019 at approximately 1:24pm, during the second walk-through Specialists observed one of five infants ranging from seven months to eleven months old sleeping with a loose blanket covering their face. S3 removed the blanket from the child's face at 1:25pm.

Statement of Deficiencies

1921.A.: Emergency Preparedness and Evacuation Planning

Not Met

1921.A.: Emergency and Evacuation Plan. The director shall consult with appropriate state and local authorities and shall establish and follow a written multi-hazard emergency and evacuation plan to protect children in the event of emergencies that at a minimum shall:

1. address any potential disaster related to the area in which the center is located;
2. include procedures for sheltering in place, lockdown and evacuation to a pre-determined site for potential threats to the safety, health and well-being of children in care;
3. include specific procedures for handling infants through two year olds, including food and formula;
4. include specific procedures for handling children with special needs, including the evacuation and transportation of children in wheelchairs;
5. include a system to account for all children;
6. include a system, and a back-up system, for contacting parents and authorized third party release caretakers;
7. include a system to reunite children and parents following an emergency;
8. include procedures for providing information about the emergency plan to parents at the time of enrollment and when changes occur;
9. be reviewed annually for accuracy and updated as changes occur; and
10. be reviewed with all staff at least once per year.
11. practice drills shall be conducted at least twice per year to include all children and shall be documented.

Finding:

1921.A. Based on record review: There was no documentation that practice drills were conducted at least twice per year.

-On 8/1/2019 at approximately 12:30pm, S1 stated she did not have documentation of practice drills that were conducted twice per year.

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: S1 did not have documentation of tornado drills that were conducted at least once per month during the months of March, April, May, and June in 2019.

- On 8/1/2019 at approximately 12:10pm, S1 stated that there was no completion of at least one tornado drill per month during March, April, May, and June in 2019.