

Statement of Deficiencies

1507-E: Daily Attendance Records - Visitors

Not Met

1507-E: A daily attendance record for all visitors to include the name, date of visit, arrival and departure times, and the purpose of the visit.

Finding:

1507-E Based on record review: Provider reviewed visitor attendance logs and found that each visitor failed to sign and out as Specialist reviewed visitor logs from September 2016 through the current date and found that there were various people who were signed in and not signed out, signed out and not signed in, or whose name was written with no in or out time listed.

1507-F: Daily Attendance Records maintained

Not Met

1507-F: Daily attendance records shall be maintained for three years.

Finding:

1507-F Based on interview(s): Provider failed to have documentation of attendance maintained as Specialist requested to view staff sign in sheets from September 1, 2016. S1 stated that she had this documentation at one point; however, there was a move and the documentation is not available to her at the time of inspection. S1 and S9 stated that the person who had this verification no longer works at the site and may have taken it.

1509-A.1: Child Abuse and Neglect Policy

Not Met

1509-A.1: Child Abuse and Neglect Policy

- a. As mandated reporters, all staff and owners shall report any suspected abuse or neglect of a child to the Louisiana Child Protection Statewide Hotline 1-855-4LA-KIDS (1-855-452-5437);
- b. An early learning center shall not delay the reporting of suspected abuse or neglect to the Child Protection Statewide Hotline in order to conduct an internal investigation to verify the abuse or neglect allegations; and
- c. An early learning center shall not require staff to report suspected abuse or neglect to the center or management prior to reporting it to the Child Protection Statewide Hotline.

Finding:

1509-A.1.b Based on interview(s)/record review: Staff delayed the report of suspected abuse of a child to the Child Protection Statewide Hotline in order to conduct an internal investigation to verify the abuse or neglect allegations as evidenced by on August 22, 2017 O3 advised S1 that he observed S3 lift C1 and roughly drop her onto her bottom on the rug. O3 further advised S1 that C1 alleged that S3 had spanked her. Specialist reviewed documents submitted to Licensing which included interviews and statements from staff and children with regard to this incident dated on August 22 and 23, 2017. Specialist observed that the Critical Incident report submitted with these documents stated that Child Welfare had not yet been notified. S1 stated that Child Welfare was notified on August 23, 2017, after she had conducted her investigation. S1 stated that she was unaware that she had to notify Child Welfare prior to conducting her own investigation. S1 stated that she did call the child welfare hotline, but received a message that due to high call volume that she should submit the report by fax and did so after completing her investigation.

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.i.ii Based on interview(s): Provider used a prohibited method of discipline as a child was subject to physical punishment and yelled at as

Statement of Deficiencies

O3 stated that on August 22, 2017 when he arrived to pick up C1 from care, he observed S3 pick C1 using two hands beneath her armpits and roughly drop her onto her bottom on the rug. O3 stated that S3 then pointed and leaned into C1's face and yelled "Don't you move again". O3 stated that this took place as a reaction to C1 moving towards the door when he arrived to pick C1 up.

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 observations and interviews: Provider failed to have documentation of a staff record for each staff as S9 failed to have a staff file available for review. S9 stated that she was unaware that she needed a staff file and would correct.

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 and interviews: Provider failed to have documentation of a photo ID for each staff as S9 failed to have documentation of her ID on file in the center.

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 observations and interview: Provider failed to have documentation of a SCR1 on file for each staff prior to them being present in the facility as S9 was hired on September 1, 2016 and failed to have documentation of a SCR1 on file in the facility. S9 stated that she was unaware that she needed to have an SCR1 on file. S9 stated that she did not physically come into the center on September 1, 2017. Specialist attempted to review staff sign in sheets to determine the first date S9 was present in the center; however, the center failed to have all staff sign in sheets for the Specialist to determine S1's first date physically in the center; however, as of Specialist visit on September 6, 2017, S9 failed to have documentation of a SCR1 and stated she had not yet completed the form.

1719-A.-B.: Orientation Training

Not Met

1719-A.-B.: Within seven calendar days of date of hire, and prior to assuming sole responsibility for any children, each staff member shall receive orientation to the policies and practices of the center that at a minimum shall include:

1. child abuse identification and reporting;
2. emergency preparation;
3. licensing regulations; and
4. safe sleep practices,

Within 30 calendar days of date of hire, each staff member shall receive orientation to the additional policies and practices of the center that at a minimum shall include:

1. child development;
2. child guidance;
3. learning activities;
4. health and safety;
5. shaken baby prevention;

Finding:

1719-A.-B. Based on observations and interviews: Provider failed to have documentation of orientation training for S9. S9 was hired on September 1, 2016 and the center failed to have documentation of her orientation.

Statement of Deficiencies

1901-P: Staff Personal Belongings

Not Met

1901-P: The personal belongings of center staff members shall be inaccessible to children.

Finding:

1901-P Based on observations: The personal belongings of center staff members was accessible to children as Specialist observed a staff members gray purse on a low shelf in reach of children in classroom #2. S1 stated that she would advise staff to store their personal items out of reach of children.
