

Statement of Deficiencies

1103-A-D: Critical Incidents and Required Notification

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 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.

Finding:

1103-A,4 & C Based on record review and interview: Center staff, S5, failed to notify other appropriate agencies. Child welfare, was not notified within 24 hours of the following critical incident: C1, an infant, suffered blisters on her right cheek from the milk in her bottle being spilled on her, during feeding time, by a former staff, S6. Incident occurred on 08/15/2018 at 12:30pm. S2 stated that she was not aware of any information being reported to child welfare in regards to the incident. Center incident documentation, completed by S5, states that child welfare was not notified.

1515-A.2: Emergency Medical Treatment

Not Met

1515-A.2: Written authorization signed and dated by the parent to secure emergency medical treatment;

Finding:

1515-A.2 Based on observations: 1 of ~1 Children's records lacked a signed and dated parental authorization to secure emergency medical treatment. S2, did not have written authorization to secure emergency medical treatment for C1. Specialist explained to S2 that the center needs to make sure that they obtain this written permission of medical treatment for all children in their care.