

## Statement of Deficiencies

### 713.A.: Office of Public Health, State Fire, City Fire Approval

Not Met

713.A.: Annual licensing inspections by the department, current approvals by the Office of Public Health, Office of State Fire Marshal, and city fire (if applicable), and academic approval by the department (if type III center) shall be required before the expiration of an existing license. However, if a center has documentation establishing that the center requested an inspection by the Office of Public Health or the Office of State Fire Marshal prior to the expiration of the existing license, these approvals may be submitted to the department within 90 calendar days of the date of the license renewal.

#### Finding:

713.A. Based on record review at 11 a.m., S1 failed to have documentation of a current annual inspection and approval from the Office of Public Health. The date of the last approval is 3/2/2022.

Corrective Action Plan: Effective 9/7/2023, S1 will continue to contact the Office of Public Health to resolve the issue of the center's expired inspection; once completed, S1 will submit the report to the Department. Going forward, S1 will contact the Office of Public Health one month prior to the current inspection's expiration to ensure compliance with this regulation.

### 1501.A.: Operations

Not Met

1501.A.: A center shall operate within the licensed capacity, age range, hours of operation and other specific services designated on its license.

#### Finding:

1501.A. Based on observations/record review at 11 a.m., S1 failed to notify the Department prior to making changes that had an effect on the license, as indoor classroom space is being utilized that has not been approved for use. The space had not been in use since August 2020; however, S1 resumed use of the classroom in June 2023, without prior approval from the Department.

Corrective Action Plan: Effective 9/7/2023, S1 stated she will cease use of the unlicensed space until approval from all agencies has been met, to ensure compliance with this regulation.

### 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, 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.: Based on record review, although the center has a behavior management policy in place, on 8/29/2023, at approximately 9:20 a.m., S19 (DOH 6/20/2023) used a prohibited method of discipline, corporal punishment, when she jerked C1, 1-year-old, by his right arm below his elbow and then lifted him up off the floor by one arm (wrist area), and moved him in that manner from the highchair to a nearby rocking chair to prevent him from biting another child who was sitting in the highchair. S19 was written up for using improper lifting technique and was sent home for the remainder of the day. C1 was unharmed; however, no longer attends the center. S19 is still employed.

Corrective Action Plan: Effective 9/20/2023, S2 stated she will retrain staff on the center's behavior management policy, focusing on what is appropriate/inappropriate when it comes to handling children, to ensure understanding and compliance with this regulation.

## Statement of Deficiencies

### 1719.A.-C.: Orientation Training

Not Met

1719.A.-C.: A. Within seven calendar days of the first day present at the center, and prior to assuming sole responsibility for any children, each staff member shall receive center-specific orientation to the policies and practices of the center that at a minimum shall include information on the center:

1. child abuse identification and reporting, including phone numbers for mandatory reporting and suspected child abuse and neglect;
2. location of emergency exits and emergency preparedness plans;
3. handling of emergencies due to food/allergic reactions;
4. location of first-aid supplies;
5. list of children with allergies and special needs;
6. identification of critical staff including but not limited to staff trained in CPR and first aid and staff who can administer medicine;
7. child release policies and restrictions;
8. child-to-staff ratio policies;
9. daily schedules;
10. opening policy;
11. closing policy; and
12. transportation policy and vehicle inspection procedures.

B. Within seven calendar days of the first day present at the center, and prior to assuming sole responsibility for any children, each staff member shall complete the LDE Key Training Module 1 and the DCFS online Mandated Reporter Training. Key Training Module 1 shall at a minimum include information on the following:

1. general emergency preparedness, including natural disasters and man-caused events;
2. professionalism;
3. health and safety, which includes: daily observations, supervision regulations, daily attendance, child to staff ratios, improper discipline, prohibited discipline, prevention of shaken baby syndrome, prevention of abusive head trauma and child maltreatment, food safety, choking risks recognition and reporting of child abuse and neglect;
4. administration of medication consistent with standards for parental consent;
5. prevention and response to emergencies due to food and allergic reactions;
6. appropriate precautions in transporting children, if applicable;
7. public health policies, prevention and control of infectious diseases, including immunization information;
8. handling and storage of hazardous materials and the appropriate disposal of bio-contaminants;
9. pediatric first aid and cardiopulmonary resuscitation (CPR);
10. prevention of sudden infant death syndrome and use of safe sleep practices;
11. outdoor play practices;
12. environmental safety; and
13. building and physical premises safety, including identification of and protection from hazards, bodies of water and vehicular traffic;
14. child release practices; and
15. critical incident practices and licensing regulations

C. Within 30 calendar days of the first day present at the center and prior to assuming sole responsibility for any children, each staff member shall complete the LDE Key Orientation Training Modules 2 and 3, that at a minimum shall include information on the following:

1. child development;
2. child guidance;
3. learning activities;
4. health and safety; and
5. early learning development standards.

#### Finding:

1719.B.: Based on record review at 1 p.m., S1 failed to have documentation that S16 (DOH 8/16/2023) and S20 (DOH: 8/16/2023), received orientation within seven days of the first day present at the center and prior to having sole responsibility for any children. Both S16 and S20 failed to complete and have documentation for verification of the DCFS Mandated Reporter Training.

Corrective Action Plan: Effective 9/7/2023, S1 stated going forward she will make sure all new hires complete the orientation requirements within the specified time frames, to ensure compliance with this regulation.

### 1723.A.&B.: CPR Certification - Infant/Child

Not Met

1723.A.&B.: A. Infant and child CPR. All staff members on the premises of a center and accessible to children shall have current certification in infant and child CPR through training approved by the department.

B. Adult CPR. All staff members on the premises of a center and accessible to children shall have current certification in adult CPR through training approved by the department.

CPR Certification

## Statement of Deficiencies

**Finding:**

1723.A.&B.: Based on record review at 11 a.m., S1 failed to have documentation that 1 of 19 staff on the premises and accessible to children have current certification in infant, child, and adult CPR through training approved by the Department. S19 failed to have a current certification. A class has not yet been scheduled.

Corrective Action Plan: Effective 9/7/2023, S1 stated she will enroll all staff lacking a current certification in a Department-approved CPR training course to be completed on or by 10/7/2023. S1 will review staff files quarterly to ensure all staff have current certifications, to ensure compliance with this regulation.

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**1723.C: Pediatric First Aid**

**Not Met**

1723.C: C. All staff members on the premises of a center and accessible to children shall have current certification in pediatric first aid through training approved by the department.

**Finding:**

1723.A.&B.: Based on record review at 11 a.m., S1 failed to have documentation that 1 of 19 staff on the premises and accessible to children have current certification in pediatric first aid through training approved by the Department. S19 failed to have a current certification. A class has not yet been scheduled.

Corrective Action Plan: Effective 9/7/2023, S1 stated she will enroll all staff lacking a current certification in a Department-approved PFA training course to be completed on or by 10/7/2023. S1 will review staff files quarterly to ensure all staff have current certifications, to ensure compliance with this regulation.

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**1911.I.&J.: Proper Lifting of a Child**

**Not Met**

1911.I.&J.: I. Staff members shall adhere to proper techniques for lifting a child.  
J. Staff members shall not lift a child by one or both arms.

**Finding:**

1911.I.&J.: Based on record review/interviews at 1 p.m., staff failed to use proper lifting techniques when lifting a child. On 8/29/2023, at approximately 9:20 a.m., S19 lifted C1, 1-year-old, using one arm (wrist area) to lift him up off the floor and move him in that manner from the highchair to a nearby rocking chair to prevent him from biting another child who was sitting in the highchair. S19 stated she acted on impulse and realized her error of using improper lifting after the fact. S19 was written up as a result of her actions and violating center policy.

Corrective Action Plan: Effective 9/7/2023, S1 stated she has retrained staff and worked one-on-one with implementing proper technique, to ensure understanding and compliance with this regulation.

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