Date - 09/20/2022 License # - 51418 Action Code - 16 - FOLLOW-UP to FOLLOW-UP

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. a child left unsupervised for any amount of time;
- 4. use of prohibited behavior management as described in § 1509.A.8.b;
- 5. allegations or suspicion of child abuse or neglect by center staff;
- 6. an accident involving the transportation of children; or
- 7. 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 LDE and other appropriate agencies, such as DCFS, LDH and the Office of State Fire Marshal, as applicable, 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.-B.: Based on record review/interview at 12 p.m., S1 failed to immediately notify O1 of the following critical incident: On 9/6/2022 at approximately 4:35 p.m., O2 witnessed S14 (Date of Hire: 6/16/2022) pick up C4 (Infant) in a non-aggressive way but with one arm. S1 documented on the Critical Incident Report that she became aware of the incident on 9/7/2022 at 12:41 p.m. by a social media post. O1 was notified of the improper lifting of C4 on 9/8/2022 at 11:34 a.m.

Corrective Action Plan: Effective 9/20/2022, S13 stated that under new leadership, the parents will always receive immediate notification as required, all staff responsible for reporting are fully trained and there will be no delay in reporting to the parents, to ensure 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
- early learning development standards.

Finding:

1719.B.-C.: Based on record review at 12 p.m., S1 failed to provide documentation that all staff completed the required orientation within seven and thirty calendar days of first day present and/or prior to assuming sole responsibility for any children.

- -S5's first day present is 8/29/2022 and failed to have documentation of a completed LDE Key Training Modules 1-3, prior to assuming sole responsibility for children; and
- -S15's first day present is 5/31/2022 and failed to have documentation of a completed DCFS Mandated Reporter Training.

Corrective Action Plan: Effective 9/20/2022, S13 stated she will have all new staff will complete the orientation trainings on their first day present in the center. If staff have completed trainings prior to working in the center, she will obtain and maintain copies of certificates in the center, to ensure compliance with this regulation.

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Statement of Deficiencies

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

Finding:

1723.A.&B.: Based on observation/record review at 11:30 a.m., S1 failed to have documentation that all staff on the premises and accessible to children have current certification in infant, child, and adult CPR through training approved by the Department.

Corrective Action Plan: Effective 9/20/2022, S13 stated all new hire staff will be scheduled to complete this training within their first week of hire. A calendar reminder will be set for all expiring certifications to be scheduled and completed one month prior, to ensure compliance with this regulation.

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.C.: Based on observation/record review at 11:30 a.m., S1 failed to have documentation that all staff on the premises and accessible to children have current certification in Pediatric First Aid through training approved by the Department.

Corrective Action Plan: Effective 9/20/2022, S13 stated all new hire staff will be scheduled to complete this training within their first week of hire. A calendar reminder will be set for all expiring certifications to be scheduled and completed one month prior, to ensure compliance with this regulation.

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/interview at 12 p.m., S14 failed to properly lift a child using proper lifting techniques. On 9/6/2022 at approximately 4:35 p.m., O2 witnessed S14 pick up C4 (Infant) in a non-aggressive way but with one arm. S14 stated she was seated on the floor, holding another infant in her lap, and with one hand, grabbed C4 under his armpit on one side of his body, and scooped him up out of the floor seat into her lap. S1 documented on the Critical Incident Report that S14 was placed on a thirty-day probation.

Corrective Action Plan: Effective 9/20/2022, S13 stated she will conduct random demonstrations in the classrooms with staff and provide verbal reminders to staff. S13 will locate visual aid on proper lifting and post in the classrooms, to ensure compliance with this regulation.