Statement of Deficiencies

1103-A-E: Critical Incidents and Required Notification

1103-A-E: 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

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.

E. Reporting deadlines may be adjusted in the event of a natural catastrophe and/or disaster, as determined by the Department.

Finding:

1103-A &D: Based on interview(s)/record review: The center failed to notify Licensing by written report within 24 hours of a critical incident as O3 and S1 stated that on the evening of October 3, 2017, O3 contacted S1 by phone and advised S1 that she had taken C3 to the emergency room as C3 had significant bruising on her back, neck and legs and indicated that S13 caused the bruising. Specialist found that the Critical Incident report was submitted to Licensing on October 5, 2017 but not within 24 hours or by the next business day.

Provider failed to notify Licensing by critical incident report of the following incident: On October 6, 2017, a meeting was held between S1, S13, S24 and O4 concerning O3 reporting that S13 had hit him once on the back of the head and in the stomach on a separate occasion. As of October 18, 2017, no Critical Incident report was received.

1507-E: Daily Attendance Records - Visitors

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 observations, interview and record review: The center failed to have an accurate visitors sign in sheet as Specialist observed 70 visitors present in the center and none were signed in at the time of Specialist arrival on 9:30 AM on October 26, 2017. S1 stated that the visitors with middle and high school students and their teachers visiting the center for Red Ribbon Week Activities. S1 ensured that all visitors signed in and out prior to their departure.

1509-A.1: Child Abuse and Neglect Policy

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.a.and b: Based on interviews: Center staff failed to report all suspected abuse to the Louisiana Child Protections Statewide Hotline as S24 stated that on October 6, 2017, there was a meeting held between S1, S13, S24 and O4 in regards to O3 reporting that S13 hit him on the back of the head on one occasion and in the stomach on a separate occasion. S24 indicated that this allegation was not reported as O4 seemed to be satisfied with the outcome of the meeting, so no further action was taken. Specialist reminded S24 that as madated reporters all allegations of abuse and neglect must be reported to child protection.

Not Met

Not Met

Statement of Deficiencies

1703.B: Visitors - CBC/Accompanied

1703.B: An early learning center shall obtain documentation of a satisfactory fingerprint based CBC for each visitor or independent contractor of any kind, prior to the person being present at the center or performing services for the center UNLESS the visitor or independent contractor WILL BE accompanied at all times while on the center premises by an adult, paid, staff member who is not being counted in child to staff ratios, and the center shall have copies of said documentation on-site at all times and available for inspection upon request by the Licensing Division.

1. Documentation of the paid, adult staff member not otherwise counted in child to staff ratios who accompanied a visitor or independent contractor at all times while the visitor or contractor was on the center premises shall include the date, arrival and departure time of the visitor or contractor, language stating that the visit or contractor was accompanied by the staff member at all times while on the premises, and the signature of both the contractor and the accompanying staff member.

Finding:

1703.B Based on observations/record review: The Provider failed to

1711-A-B-D-G: Child to Staff Ratio

1711-A-B-D-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.
- D. Minimum Child to Staff Ratios for Type II and Type III centers:

Ages of Children Infants under 1 year					Ratio 5:1
					5.1
1 year			7:	:1	
2 years					11:1
3 years		13:1			
4 years			15	5:1	
5 years			19):1	
6 years and up		23	8:1		

- 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:

1711-A-B-D-G Based on observations/interview(s): On October 11, 2017, the Provider failed to meet the required child to staff ratio for children of the following ages: 14 children age 3 years old with 1 staff, 14 children ages 3 through 4 with 1 staff, and 18 children ages 4 through 5 with 1 staff. In order to meet child to staff ratio, there should have been at least 2 staff present with each of these classes. Upon arrival Specialist observed S3, S4, and S5 in the front of the facility between the gym and the front desk completing other tasks. Specialist entered classroom #2 and found S9 and S5 supervising 14 children aged 3. S1 and S9 stated that S5 stepped away from the classroom to tend to another issue briefly (time frame unknown); however, no other staff was present with S9 in this classroom during that time. Specialist entered classroom # 4 and found S12 and S4 supervising a group of 14 children aged 4 through 5 years old. Specialist entered classroom #6 and found S15 and S3 supervising a group of 18 children ages 4 through 5. S1 stated that both S3 and S4 had been at the front assisting a parent at the time the Specialist arrived and no other staff was available to take their places during this time (exact time frame unknown). Specialist observed that child to staff ratio was met prior to departure.

1915-A: Health Services - Observation

1915-A: Observation. Upon arrival at the center, the physical condition of each child shall be observed for possible signs of illness, infections, bruises or injuries, and when something is observed, it shall be documented and such documentation shall include an explanation from the parent or child.

Finding:

1915-A Based on interview(s): S13 and S14 failed to document the physical condition of each child at the time something was observed as they each stated that on September 21, 2017, a large bruise was observed on the lower back of C2. Specialist requested to review the daily observations of this and found that the daily observations was not written in sequence as this observation was written in at the bottom of the page following observations documented on various dates from September 22 through October 2, 2017. Specialist inquired with S13 as to why this observation was not in sequence and S13 stated that she went back and documented this incident after the observation on October 2, 2017 was documented.

Not Met

Not Met

Not Met

Statement of Deficiencies

1915-B.&C: Health Services - Parental Notification

Not Met

1915-B.&C:

B. Reporting. Incidents, injuries, accidents, illnesses, and unusual behavior shall be documented and reported to the parent no later than when the child is released to the parent or authorized representative on the day of the occurrence.

C. Immediate Notification. The parent shall be immediately notified in the following circumstances:

- 1. blood not contained in an adhesive strip;
- 2. head or neck or eye injury;
- 3. human bite that breaks the skin;
- 4. animal bite;
- 5. impaled object;
- 6. broken or dislodged teeth;
- 7. allergic reaction skin changes (e.g. rash, spots, swelling, etc.);
- 8. unusual breathing;
- 9. symptoms of dehydration;
- 10. temperature reading over 101° oral, 102° rectal, or 100° axillary, or
- 11. injury or illness requiring professional medical attention.

Finding:

1915-B: Based on interviews: S13 and S14 failed to document unusual behavior no later than when the child was released to the parent as S13 and S14 stated that on October 3, 2017, C2 was not herself all day. S13 and S14 stated that C2 was dragging and seemed to have pain in her leg. Specialist requested to review the unusual behavior report of this incident and S13 and S14 stated that it was not documented.