

## 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.-C.: Based on record review at 12 p.m., S1 failed to provide documentation of the following orientation requirements for staff:

- S5's first day working is 10/11/2022 and failed to have completed the DCFS Mandated Reporter Training within 7 calendar days of first day working;
- S14's first day working is 8/9/2022 and failed to have completed the DCFS Mandated Reporter Training within 7 calendar days and LDE Key Training Module 2 within 30 days of first day working;
- S17's first day working is 4/4/2022 and failed to complete the DCFS Mandated Reporter Training within 7 calendar days of first day working. S17 completed the training on 6/9/2022;
- S19's first day working is 10/11/2022 and failed to complete the DCFS Mandated Reporter Training within 7 calendar days of first day working. S19 completed the training on 11/7/2022; and
- 29's first day working is 10/7/2022 and failed to have completed the LDE Key Training Module 1 within 7 calendar days of first day working and Modules 2, and 3 within 30 days of first day working.

Corrective Action Plan: Effective 11/7/2022, S1 stated she will complete all staff orientation trainings during the first two days of working in the center

## Statement of Deficiencies

and prior to entering the classroom, to ensure compliance with this regulation.

### 1917.C.: Medication Sent to Center

Not Met

1917.C.: C. All medication shall be sent to the center in its original container, shall not have an expired date, and shall be clearly labeled with the name of the child to ensure that medication is for individual use only.

#### Finding:

1917.C.: Based on record review at 4 p.m., the Diphenhydramine on file for C1, three-years-old, expired on 8/2021.

Corrective Action Plan: Effective 11/7/2022, S1 stated she will document medication expirations on a white board as visual reminder and request prescription refills and new medications from the parent prior to the expirations, to ensure compliance with this regulation.

### 1917.K.: Emergency Medication Plan and Records

Not Met

1917.K.: Emergency Medications

1. Children who require emergency medications, such as an EpiPen or Benadryl, shall have a written plan of action that shall be updated as changes occur or at least every six months, and shall include:

- method of administration;
- symptoms that indicate the need for the medication;
- actions to take once symptoms occur;
- description of how to use the medication; and e. signature of parent and date of signature.

2. Medication administration records for emergency medication shall be maintained and include the following:

- symptoms that indicated the need for the medication;
- actions taken once symptoms occurred;
- description of how medication was administered;
- signature of administering staff member; and
- phone contact with the parent after administering emergency medication.

#### Finding:

1917.K.: Based on record review at 4 p.m., S1 failed to have a current written plan of action to administer an EpiPen and Diphenhydramine to C1 and C2, three-years-old. C1's written plan of action is dated 4/5/2022 and needed to be updated no later than 10/5/2022. C2's emergency medication written plan of action is dated 12/21/2022 and needed to be updated no later than 7/21/2022.

Corrective Action Plan: Effective 11/7/2022, S1 stated she and S2 will keep a calendar reminder on a posted white board and paper calendar listing when the authorizations are due to expire. S1 will request and obtain updated plans of action, prior to expiration, to ensure compliance with this regulation.

### 1921.E.: Tornado Drills

Not Met

1921.E.: Tornado drills shall be conducted at least once per month in the months of March, April, May, and June at various times of the day necessary to include all children and shall be documented.

#### Finding:

1921.E.: Based on record review/interview at 3 p.m., S1 failed to have documentation of a tornado drill that was conducted at least once during the month of March 2022.

Corrective Action Plan: Effective 11/7/2022, S1 stated she will delegate the job duty of conducting drills to another staff person and it will be scheduled and placed on a calendar, to ensure compliance with this regulation.

### 2107.C.: Daily Transportation Visual Vehicle Check

Not Met

2107.C.: For daily transportation services, the vehicle shall have a visual passenger check made at the completion of each trip or route, prior to the staff member exiting the vehicle.

#### Finding:

2107.C.: Based on record review at 3 p.m., S1 failed to have documentation that a visual passenger check was conducted at the completion of each trip on 10/7/2022, 10/11/2022-10/12/2022, 10/14/2022, 10/19/2022, and 11/2/2022.

## ***Statement of Deficiencies***

Corrective Action Plan: Effective 11/7/2022, S1 stated she will conduct a retraining at next scheduled staff meeting on 11/17/2022 and attendance will be documented. A review of required actions and documentation will be completed with all drivers and bus aides, to ensure compliance with this regulation.

---

### **2109.B.: Non-vehicular Excursions - Records**

**Not Met**

2109.B.: Centers shall maintain records of all non-vehicular excursion activities to include the date, time, list of children, staff, and other adults, and type of activity.

#### **Finding:**

2109.B.: Based on record review/interview at 2 p.m., there failed to be a documented excursion log listing S5 and S7, and 12, three-year-old children, in attendance for a fire truck activity in the parking lot on 10/21/2022 from 9:20 a.m. to 9:31 a.m. S1 stated there was a miscommunication among staff and this is why documentation was incomplete.

Corrective Action Plan: Effective 11/7/2022, S1 stated she will make packets and will include all documents for each class to use, prior to the excursions being conducted, to ensure compliance with this regulation.

---