

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. 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 department and other appropriate agencies 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.-D.: Critical Incidents and Required Notifications: Based on record review/Interview(s) on 11/12/2020 at approximately 11:00am, the staff failed to immediately notify the guardian of C1, and also failed to notify within 24 hours of the incident the Department, emergency personnel, and Child Welfare of the following critical incident: C1, 1 year old, pulled a hanging cord of a bottle warmer causing the warmer to fall on her head and hot water to spill down her back, causing burns on her back. Staff never contacted C1's guardians to notify them of the accident.

Corrective Action Plan: Effective 11/12/2020, S1 stated she will contact all appropriate agencies and guardians in the future to endure this deficiency is not recited.

1503.A.-C.: General Liability Insurance Policy

Not Met

1503.A.-C.: A. A center shall maintain in force at all times current commercial liability insurance for the operation of the center to ensure medical coverage for children in the event of accident or injury.

- B. A center is responsible for payment of medical expenses of a child injured while in the center's care.
- C. Documentation of commercial liability insurance shall consist of the insurance policy or current binder that includes the name of the early learning center, physical address of the center, name of the insurance company, policy number, period of coverage and explanation of the coverage.

Finding:

1503.B. General Liability Insurance Policy: Based on interviews on 11/12/2020 at approximately 11:30am, the provider failed to be responsible for payment of medical expenses of a child injured while in the provider's care. C1, 1 year old, was burned on the back by hot water that spilled from a bottle warmer while in the centers care on 11/9/2020. S1 stated she did not offer the family of C1 the centers insurance information because she was not aware she needed to do so.

Corrective Action Plan: Effective 11/12/2020, acting director stated she will offer insurance to any child injured in the centers care to ensure this deficiency is not recited.

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, pinching, 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.: Behavior Management Policy: Based on observations on 11/17/2020 at 9:45am, Specialist observed S2 grab C2 on his arm, close to

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his wrist firmly, and shook his arm while fussing at him. S1 completed an incident report for C2 and attempted to contact C2's mother while Specialist was in center. S1 completed a written warning for S2.

Corrective Action Plan: Effective 11/17/2020, stated that on 11/19/2020, they will have a staff meeting to review safety procedures, supervision and how to talk to children to ensure this deficiency does not get recited.

1515.A.3.: Releasing of Children

Not Met

1515.A.3.: Written authorization signed and dated by the parent noting the first and last names of individuals to whom the child may be released other than the parents, including any other early learning centers, transportation services, and any person or persons who may remove the child from the center.

- The parent may further authorize additional individuals via a text message, fax or email to the center in unplanned situations and follow it with a written authorization.
- A child shall never be released to anyone unless authorized in writing by the parent.
- Any additions and deletions to the list of authorized individuals shall be signed and dated by the parent.
- The center shall verify the identity of the authorized person prior to releasing the child.

Finding:

1515.A.3.: Releasing of Children: Based on record review/interview on 11/12/2020, the Provider released C1 to several persons not authorized by the guardians. C1's master card only has O2 and O3 listed as persons that C1 can be released to. Specialist reviewed children daily attendance logs and observed out of 24 days, 23 of those days, C1 was released to someone other than O2 or O3.

Corrective Action Plan: Effective 11/12/2020, S1 stated that she is new to the center and did not know only O2 and O3 could pick up. S1 will review all children's files to become aware of who can pick up each child.

1707.A.1.&2.: Required Staffing - Director or Director Designee

Not Met

1707.A.1.&2.: Director or Director Designee. Each center shall have a qualified director or qualified director designee.

- The director or director designee shall be an on-site, full-time staff person at the center during the daytime hours of operation (prior to 9 p.m.). When the director is not an on-site full-time employee at the licensed location, there shall be a qualified director designee who is an on-site full-time employee at the licensed location.
- The director or director designee shall be responsible for planning, managing, and controlling the center's daily activities, as well as responding to parental concerns and ensuring that minimum licensing requirements are met.

Finding:

1707.A.1.: Required Staffing - Director or Director Designee: Based on Record Review/observation on 11/12/2020 at approximately 10:45am, the center failed to have a qualified Director who is an on-site full time staff person at the center during the day time hours of operation (prior to 9:00 p.m.) and responsible for planning, managing, and controlling the center's daily activities, as well as responding to parental concerns and ensuring that minimum licensing requirements are met. S1 is the acting director, however, S1 has not been qualified by Licensing to be a Director.

Corrective Action Plan: Effective 11/12/2020, S1 stated they will submit correct paperwork to the Department to qualify her as a director, to ensure this deficiency is not recited.

1713.A.&B.&C.: Supervision

Not Met

1713.A.&B.&C.: A: Children shall be supervised at all times in the center, on the playground, on field trips, on non-vehicular excursions, and during all water activities and water play activities.

B: Children shall not be left alone in any room, (except the restroom as indicated in Subsection G of this Section or when being provided services by therapeutic professionals, as defined in §103), outdoors, or in vehicles, even momentarily, without staff present.

C: A staff person shall be assigned to supervise specific children whose names and whereabouts that staff person shall know and with whom the staff person shall be physically present. Staff shall be able to state how many children are in their care at all times.

Finding:

1713.A.&C.: Supervision: Based on interview with S3 on 11/12/2020, at approximately 11:15am, children were not under supervision at all times as S3's back was turned to C1 and S5 could not see C1 from where she was feeding another child. C1 pulled the hanging cord of a bottle warmer, causing the bottle warmer to fall off of the mini fridge, spill hot water on her back, burning C1's lower back.

Corrective Action Plan: Effective 11/17/2020, S1 stated that the room was rearranged and the changing table was moved to another area where the teacher can see the whole room when changing a diaper.

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1719.A.&B.: Orientation Training

Not Met

1719.A.&B.: 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 orientation to the policies and practices of the center that at a minimum shall include:

1. child abuse identification and reporting;
2. emergency preparation;
3. licensing regulations; and
4. safe sleep practices.

B. Within 30 calendar days of date of hire, each staff member shall receive orientation to the additional policies and practices of the center that at a minimum shall include:

1. child development;
2. child guidance;
3. learning activities;
4. health and safety;
5. shaken baby prevention; and
6. CPR and first aid, as applicable.

Finding:

1719.A. Orientation Training: Based on Record Review on 11/12/2020 at approximately 9:00am, S1 failed to have S6's orientation within seven calendar days completed. S6 was hired on 10/27/2020 and on 11/12/2020, it had not been completed. S1 also failed to sign S5's orientation paper stating it had been reviewed. S5 is no longer employed by the center.

On 11/17/2020, S1 failed to have an orientation page for two new hires, S7 and S8, both hired on 11/17/2020. S1 printed out orientation pages for S7 and S8, and will begin orientation for both today.

Corrective Action Plan: Effective 11/17/2020, S1 stated that she will complete orientation training within the first week of work to ensure this deficiency is not recited.

1723.A.&B.: CPR Certification

Not Met

1723.A.&B.: A. Infant and child CPR. Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in infant and child CPR through training approved by the department.

B. Adult CPR. Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in adult CPR through training approved by the department.

Finding:

1723.A.&B.: CPR Certification: Based on Record Review on 11/12/2020, at 10:45am, S1 failed to have documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in infant and child CPR through training approved by the department. 1 of 6 staff had documentation of this certification.

Record Review on 11/17/2020 at 9:15am, showed that 0 of 6 staff present have CPR training. S4's last day working was 11/12/2020, and was terminated on 11/16/2020.

Corrective Action Plan: Effective 11/12/2020, S1 stated that she will call to schedule staff to get training.

1723.C.: Pediatric First Aid

Not Met

1723.C.: Pediatric First Aid. Fifty percent of staff members on the premises of a center and accessible to children, or at least four staff on the premises and accessible to children, whichever is less, shall have current certification in pediatric first aid through training approved by the department.

Finding:

1723.C.: Pediatric First Aid: Based on Record Review on 11/12/2020, at 10:45am, S1 failed to have documentation that at least fifty percent (50%) of all staff on the premises and accessible to the children or at least four staff on the premises and accessible to children, whichever is less, have current certification in Pediatric First Aid through training approved by the department. 1 of 6 staff had documentation of this certification.

Record Review on 11/17/2020 at 9:15am, showed that 0 of 7 staff present have Pediatric First Aid training. S4's last day working was 11/12/2020, and was terminated on 11/16/2020.

Corrective Action Plan: Effective 11/12/2020, S1 stated that she will call to schedule staff to get training.

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1725.A.-C.: Medication Management Training

Not Met

1725.A.-C.: A. All staff members who administer medication shall have medication administration training.

B. Whether the center is administering medication or not, each early learning center shall have at least two staff members trained in medication administration and at least one on the premises. A staff member who is a licensed practical nurse (LPN) or registered nurse (RN) with a valid nursing license shall be considered to have medication administration training.

C. Such training shall be completed every two years with an approved child care health consultant.

Finding:

1725.A.-C.: Medication Management Training: Based on record review on 11/12/2020, at 10:45am, S1 failed to have at least two staff members trained in medication administration whether the early learning center administers medication or not. S4 was the only staff with documentation of the training.

Record Review on 11/17/2020 at 9:15am, showed that no staff have Medication Management training. S4's last day working was 11/12/2020, and was terminated on 11/16/2020.

Corrective Action Plan: Effective 11/12/2020, S1 stated that she will call to schedule staff to get training.

1901.M.: Strings and Cords

Not Met

1901.M.: Strings and cords, including but not limited to those found on equipment, window coverings, televisions and radios, shall be inaccessible to children under age 4.

Finding:

1901.M.: Strings and Cords: Based on interview(s) on 11/12/2020 and 11/13/2020: Strings and cords were accessible to children under age 4. C1, 1 year old, pulled a hanging cord to a bottle warmer causing the bottle warmer to fall off the top of a mini fridge, onto C1's head, which caused the hot liquid to spill onto her and burn her back.

Corrective Action Plan: Effective 11/9/2020, S1 removed the bottle warmer from the infant class room, placing it in the kitchen. Now all bottles are heated up in the kitchen.

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.: Proper Lifting of a Child: Based on observations on 11/12/2020, at approximately 10:30am, Specialist observed S4 failed to lift a child using proper lifting techniques, Staff lifted a child using one or both arms. S4 was observed lifting a 2 year old up from the ground by his left wrist in a rough manner.

Corrective Action Plan: Effective 11/12/2020, S1 will talk with staff about proper lifting techniques.

1915.D.: Health Services - Delay Seeking Care

Not Met

1915.D.: The center shall not delay seeking care while attempting to contact a parent if emergency medical attention is required.

Finding:

1915.D. Health Services - Delay Seeking Care: Based on interviews on 11/12/2020 at approximately 11:30am, S1, S3 and S5 failed to seek medical attention for C1 after being burned by hot water from a bottle warmer falling on her back. S1 did not attempt to contact C1's guardians, and did not think she needed to get emergency medical attention for C1.

Corrective Action Plan: Effective 11/12/2020, S1 stated she will seek emergency medical attention when needed to ensure this deficiency is not recited.