

Statement of Deficiencies

1103.A.-C.: Critical Incidents and Required Notifications

Not Met

1103.A.-C.: A. 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. of this Part;
5. allegations or suspicion of child abuse or neglect by center staff;
6. an accident involving the transportation of children;
7. any child given the wrong medication or an overdose of the correct medication;
8. any loss of power over two hours while children are in care;
9. a physical altercation between adults in the presence of children on the premises;
10. reportable infectious diseases and conditions outlined in LAC 51:II.105;
11. 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. Prioritization of Notifications. The following shall be notified immediately and in the order listed below as applicable:

1. emergency personnel when dealing with any medical incident.
2. law enforcement.
3. parent.

C. The following, as applicable, shall be notified via email within 24 hours of the incident, or no later than the next business day if the incident occurred on a Friday or on a recognized state holiday:

1. LDOE. This written notification shall be made for all of the critical incidents identified above, shall be made on the LDOE critical incidents report form, and shall contain all information requested on the form.
2. DCFS. Report all incidents that might constitute child endangerment including examples provided in mandated reporting training.
3. LDH. Report all incidents related to LDH regulations such as safety and sanitation issues as well as infectious diseases and conditions.
4. OSFM. Report all incidents related to OSFM regulations.
5. Any other appropriate agencies, including but not limited to, local or city fire marshal or the Department of Environmental Quality.

Finding:

1103.B.3.: Based on record review/interviews on 11/13/2023 at 2:47 p.m., S2 failed to immediately notify the parent of the following critical incident: On 10/30/2023 at 10:55 a.m., S22 used a prohibited method of discipline on C1 (a one-year-old), as C1 was subjected to physical/corporal punishment and verbal abuse. S2 notified O1 (C1's parent) on 10/30/2023 at 3:40 p.m.

Corrective Action Plan: Effective 12/13/2023, S1 stated she will notify the parent, the Department, and all appropriate agencies immediately after being notified of an allegation or critical incident, to ensure compliance with the 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, 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.: Based on record review/interview on 11/13/2023 at 4:03 p.m., although the center has a behavior management policy, S22 failed to follow the policy as S22 used a prohibited method of discipline as on 10/30/2023 at 10:55 a.m., C1 (a one-year-old) was subjected to physical/corporal punishment when S22 aggressively guided C1. S22 also yelled out loud as she aggressively placed C1 on the floor by the front desk S22 was

Statement of Deficiencies

suspended for 7-days due to failing to follow the center's behavior management policy, and was terminated on 11/21/2023.

Corrective Action Plan: Effective 12/13/2023, S1 stated she will conduct quarterly trainings, or as needed, with all staff on the behavior management policy to ensure compliance with the regulation.

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, children with disabilities, and children with special health care 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 on 12/13/2023 at 4:15 p.m., S1 failed to have documentation that S7 (DOH 9/25/23) completed the LDE Key Orientation Training Modules 1 - 3, and S27 (DOH 11/30/23) completed the LDE Key Orientation Training Modules 1 and DCFS Mandated Reporter Training. S3 stated the staff took the trainings, but failed to print them after completion. S1 stated the staff will retake the trainings by the end of week.

Corrective Action Plan: Effective 12/13/2023, S1 stated staff will not be able to start working until training certificates are on file to ensure compliance with the regulation.

Statement of Deficiencies

1811.A.&B.: Requests for CCCBC-Based Determinations of Eligibility

Not Met

1811.A.&B.: A. An early learning center or an entity identified in §1809 shall request and obtain from the department a new CCCBC-based determination of eligibility for child care purposes for each required person:

1. prior to the person being present or performing services at the center when children are present; and
2. not less than once during a five-year period.

B. An early learning center or an entity identified in §1809 shall not be required to request and obtain from the department a new CCCBC-based determination of eligibility for child care purposes for a required person, and instead shall be able to request and obtain from the department the person's CCCBC-based determination of eligibility provided to another in-state child care provider or entity identified in §1809, if:

1. a child care provider within the state or an entity requested and obtained a CCCBC-based determination of eligibility for child care purposes from the department for the person within the past five years, while the person was seeking employment or employed by a in-state child care provider or seeking to provide or providing services at an early learning center in Louisiana for an entity;
2. the department provided to the initial requesting child care provider or entity a CCCBC-based determination indicating the person was eligible for child care purposes; and
3. the person is still employed by a child care provider within the state, or is still providing services in an early learning center within the state for an entity, or has been separated from a child care provider within the state or an entity for less than 180 consecutive days.

Finding:

1811.A.&B. Based on record review on 12/13/2023 at 4:10 p.m., S1 failed to have documentation of an eligible CCCBC, prior to the person being present at the center, for the following:

- S5's (DOH 7/24/18) CCCBC expired on 7/13/2023, and S5 was present at the center between 7/13/2023 - 12/13/2023. S5 left the center at 4:15 p.m.
- S6's (DOH 1/31/05) CCCBC expired on 6/8/23, and S6 was present at the center on 6/8/23 - 6/9/23; 6/12/23 - 6/16/23; 6/19/23 - 6/20/23. S6 obtained an eligible CCCBC on 6/21/23.
- S23's (DOH 7/1/18) CCCBC expired on 9/12/23, and S23 was present at the center on 9/12/23 - 9/15/23; 9/18/23 - 9/21/23. S23 obtained an eligible CCCBC on 9/22/23.
- S18's (DOH 8/10/20) CCCBC expired on 10/16/23, and S18 was present at the center on 10/16/23; 10/18/23 - 10/20/23; 10/23/23 - 10/27/23; and 10/30/23 - 11/1/23. S18 obtained an eligible CCCBC on 11/2/23.

Corrective Action Plan: Effective 12/13/2023, S1 stated she will not allow any staff to work, if their previous CCCBC has expired, to ensure compliance with the 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/interviews on 11/13/2023 at 2:30 p.m., S22 failed to properly lift C1 (one-year-old) under both arms on 10/30/2023. S22 used her right arm to lift C1 up by the right arm out of a chair.

Corrective Action Plan: Effective 12/13/2023, S1 stated she will re-train all staff, during the quarterly staff meetings or as needed, about proper lifting techniques to ensure compliance with the regulation.

1915.A.: Health Services - Observation

Not Met

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 record review/interviews on 11/13/2023 at 2:30 p.m., S1 failed to have documentation of observations and an explanation from the parent or child on 10/30/2023. C1 (a one-year-old) had a scratch on the top of the nose upon arrival, however, documentation shows that nothing was observed.

Corrective Action Plan: Effective 12/13/2023, S1 stated she will re-train all staff, during the quarterly staff trainings or as needed, to ensure all incidents and behaviors are documented correctly, to ensure compliance with the regulation.

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 record review/interviews on 11/13/2023 at 3:05 p.m., S1 failed to have documentation of behavior reports for C1. S15 and S22 stated C1 has daily behavior incidents during diaper changings where C1 hits, kicks, and screams at the teacher. However, there are no prior behavior reports on file.

Corrective Action Plan: Effective 12/13/2023, S1 stated she will re-train all staff, during the quarterly staff trainings and as needed, to ensure all incidents and behaviors are documented correctly, to ensure compliance with the regulation.
