

## 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.A.-C. Based on record review/interview at 1:23 p.m., S1 failed to notify the Department and LDH within 24 hours of the following critical incident: S1 was notified that 5 children, ages infant through 2-years-old, tested positive for Respiratory Syncytial Virus (RSV) between 10/12/2023 and 10/31/2023.

CORRECTIVE ACTION PLAN: Effective 11/20/2023, S1 will re-train all staff on reporting requirements for critical incident reporting to ensure compliance with this regulation.

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### 1515.E.: Maintaining Health-Related Policies

Not Met

1515.E.: An early learning center shall provide a written copy of all health-related policies established by the center, including policies regarding accidents, allergic reactions, fever, illness, immunizations, infection, and injuries, to the parent or guardian of each child attending or enrolled the early learning center.

#### Finding:

1515.E. Based on record review at 2:02 p.m., although the center has a health-related policy, the center failed to follow the policy by posting a notice that children were exposed to Respiratory Syncytial Virus (RSV) while at the center.

CORRECTIVE ACTION PLAN: Effective 11/20/2023, S1 will review health-related policies with all staff and will post a notice when any child contracts a infectious disease at the center to ensure compliance with this regulation.

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### 1723. F.: CPR/Pediatric First Aid within 90 days

Not Met

1723. F.: Within 90 calendar days from the date of hire and prior to assuming sole responsibility for any children, each staff member shall have current certification in pediatric first aid and CPR. During this period, caregivers and teachers who provide direct care for children must be supervised until training is completed.

#### Finding:

1723. F. Based on observation and record review at 11 a.m., S5, date of hire 11/6/2023, failed to have current certification in pediatric first aid and CPR within 90 calendar days from the date of hire and prior to assuming sole responsibility for any children. Specialist observed S5 alone in a classroom supervising 7 children, ages 1-year-old and 2-years-old.

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CORRECTIVE ACTION PLAN: Effective 11/20/2023, S1 will schedule CPR/FA as soon as possible for all new staff as soon as hired. She will have new staff shadow staff with the required training until they receive CPR/FA to ensure compliance with this regulation.

### 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 interview/record review at 1:53 p.m., S1 failed to have documentation of illness for C1 on 10/11/2023. S1 called to notify O1 that C1 was ill, but failed to have documentation of the contact.

CORRECTIVE ACTION PLAN: Effective 11/20/2023, S1 stated she will use the department form to document illnesses going forward to ensure compliance with this regulation.