

Statement of Deficiencies

1501.A.: Operations

Not Met

1501.A.: A center shall operate within the licensed capacity, age range, hours of operation and other specific services designated on its license.

Finding:

1501.A.: Operations: Based on observation/record review at 3 p.m., S1 failed to operate within the licensed capacity listed on the Center's license. The center's license list a capacity of 33 children for Building One and Specialist observed there were 39 children present in the building.

Corrective Action Plan: Effective 11/29/2021, S1 stated she will make sure she is keeping count of all of the children in each building to ensure the capacity is not exceeded, to ensure this deficiency is not re-cited.

1509.A.12.a.-d.: Monitoring Policy for Provisionally Employed Staff

Not Met

1509.A.12.a.-d.: Monitoring policy for provisionally employed staff members:

- a. Each center shall develop and implement a written policy describing the monitoring procedures that shall be used at the center when staff members are employed on a provisional basis due to an incomplete CCCBC-based determination of eligibility for child care purposes;
- b. The monitoring policy shall include all requirements for the monitoring of provisionally employed staff members set forth in §1811.D;
- c. The center shall post a copy of the policy in the center in a place visible to all parents and staff;
- d. The center shall provide copies of the written policy to each parent/legal custodian of enrolled children, center staff member and provisionally employed staff member, and the center shall obtain signed documentation from each that a copy of the policy has been received.

Finding:

1509.A.12.a.-d.: Monitoring Policy for Provisionally Employed Staff: Based on record review at 4 p.m., S1 failed to develop, implement, post, and provide signed copies of a written monitoring policy to all staff and parents for a provisionally employed staff with an incomplete CCCBC-based determination of eligibility for child care purposes. Specialist observed S15 received a Provisional status on 10/6/2021, and was hired and worked in the center from 10/12/2021 to 11/17/2021.

Corrective Action Plan: Effective 11/29/2021, S1 stated she will read the CCCBC status more clearly when received. She will complete all documentation requirements prior to having provisionally employed staff begin working, to ensure this deficiency is not re-cited.

1711.A.&B.&D.&G.: Child to Staff Ratio

Not Met

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 four children are present.
 2. Only those staff members directly providing care, supervision or guidance to children shall be counted in the child to staff ratios.
- C. The department's form noting required child-to-staff ratios shall be posted in each room included in the center's licensed capacity.
- D. Minimum child-to-staff ratios for type II and type III centers are as follows.

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

- 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 two, three, four and five.
 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 five and older.

Finding:

1711.A.&B.&D.&G.: Child to Staff Ratio: Based on observation at 2:56 p.m., S1 failed to meet the required child to staff ratio for children. Specialist observed five, 1-year-old children, and five infants with S1. S1 stated S14 stepped out of the classroom because she was needed in the back classroom. Ratio was corrected when S14 returned to the classroom. The required ratio for children of this age is 5 children per 1 staff person. Specialist observed two, 2-year-old children, and sixteen, 3-year-old children, with S8. Ratio was corrected when S3 was observed in the classroom at 3:08 p.m. The required ratio for children of this age is 12 children per 1 staff person. Specialist observed four, 5-year-old children, and fourteen, 4-year-old children, with S7. Ratio was corrected when S2 entered the classroom. The required ratio for children of this age is 17 children per 1 staff person. One additional staff person was needed at all times in each classroom to meet ratio.

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Corrective Action Plan: Effective 11/29/2021, S1 stated she will review ratio requirements with all staff no later 11/30/2021, and have them sign that they do understand and require staff to notify her of when an additional staff person is needed. S1 will monitor break times for staff, to ensure this deficiency is not re-cited.

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.A.-C.: Orientation Training: Based on record review at 3:40 p.m., S1 failed to have documentation that S14 received orientation within seven days of the first day present at the center and prior to having sole responsibility for any children, and the additional orientation within thirty days of date of hire. S1 failed to have documentation of S14's orientation form and certificates of completion for the LDE Key Orientation Training Modules 1, 2, and 3. Staff attendance record documented 10/25/2021 as S14's first day present and signed into the center. Technical Assistance previously provided on 10/7/2021.

Corrective Action Plan: Effective 11/29/2021, S1 stated she will have all new hires come in one hour earlier than their scheduled time to work so that one module can be completed on that day. All new hires will complete a module each day in their first three days of working, to ensure this deficiency is not re-cited.

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1721.A.-C.: Continuing Education Training

Not Met

1721.A.-C.: A. Early learning centers shall provide opportunities for continuing education of staff members who are left alone with children, or who have supervisory or disciplinary authority over children.

1. Staff members of early learning centers, excluding foster grandparents, shall obtain a minimum of 12 clock hours of continuing education per center anniversary year.

B. Staff members of type I, type II and type III centers who are neither left alone with children, nor have supervisory or disciplinary authority over children, shall obtain a minimum of three clock hours of continuing education in job related topics per center's anniversary year.

C. Continuing education for all types of centers shall be conducted by trainers approved by the department. The department shall keep a registry of approved trainers.

Finding:

1721.A.-C.&E.: Continuing Education Training: Based on record review at 3:45 p.m., S1 failed to have documentation that S2 received a minimum of 12 clock hours of training annually and S9 received a minimum of 3 clock hours annually in the topics found in §1719(A) and (B). S2 needed an additional 1.5 hours and S9 needed 3 hours and the additional 3 hours of training by a child care health consultant to meet their minimum requirement.

Corrective Action Plan: Effective 11/29/2021, S1 stated she will set calendar reminders every quarter to review staff files for clock hours obtained. Three months prior to the center's annual expiration, she will review hours needed with individual staff and schedule trainings accordingly, to ensure this deficiency is not re-cited.

1811-D.2.&3.: Provisional Employment for Staff Members of Early Learning Centers

Not Met

1811-D.2.&3.: 2. A provisionally-employed staff member may be counted in child to staff ratios, but must be monitored at all times in accordance with the following.

a. A monitor of a provisionally-employed staff member must be an adult staff member for whom the center has a CCCBC-based determination of eligibility for child care purposes, (or prior to October 1, 2018, a satisfactory CBC), who is designated by the center to monitor a specific provisionally-employed staff member.

b. The center must designate a monitor for each provisionally-employed staff member present at the center.

c. The monitor shall be physically present at the center at all times when the provisionally-employed staff member is present at the center.

d. Monitors must remain within close enough physical proximity of their designated provisionally-employed staff members to be able intervene at any time if intervention is needed.

e. A monitor shall perform at least one visual observation of each designated provisionally-employed staff member every 30 minutes.

f. The center may designate one monitor for up to a maximum of five provisionally-employed staff members at any given time.

g. At least one monitor must be physically present at all times in any room during naptimes if a provisionally-employed staff member is present.

3. The center shall have a log, either handwritten or in electronic form, or other written documentation of the monitoring of provisionally-employed staff members that identifies each provisionally-employed staff member, the designated monitor for each, and the times of the visual observations.

Finding:

1811-D.2.&3.: Provisional Employment for Staff Members of Early Learning Centers: Based on record review at 3:45 p.m., S1 failed to perform at least one visual observation of the designated provisionally-employed staff, S15, every 30 minutes. S15 received a Provisional Employment status on 10/6/2021, and was hired and began working in the center on 10/12/2021. S15 worked in the center 21 times between the dates of 10/12/2021 and 11/17/2021 without documentation of a monitoring being conducted.

Corrective Action Plan: Effective 11/29/2021, S1 stated she will print out the log from the Licensed Center's Library and properly document on the log, to ensure this deficiency is not re-cited.

1907.E.2.: Cribs Free of Toys and Other Soft or Loose Bedding

Not Met

1907.E.2.: Cribs shall be free of toys and other soft or loose bedding, including comforters, blankets, sheets, bumper pads, pillows, stuffed animals and wedges when the child is in the crib.

Finding:

1907.E.2.: Cribs Free of Toys and Other Soft or Loose Bedding: Based on observation/record review at 2:57 p.m., S1 failed to keep the center's cribs free of toys or other soft or loose bedding (including comforters, blankets, sheets, bumper pads, pillows, stuffed animals and wedges) while the child was in the crib. Specialist observed C1 (infant) asleep in a crib with a folded fleece blanket under his head, a stuffed animal with an attached pacifier near his face, and a blanket covering his body. S1 corrected by removing the items out of the crib.

Corrective Action Plan: Effective 11/29/2021, S1 stated she will continue to remind staff that nothing can be placed in the crib. S1 will continue to monitor and correct when needed, to ensure this deficiency is not re-cited.

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1909.G.: Infant - Bibs

Not Met

1909.G.: Bibs shall not be worn by any child while asleep.

Finding:

1909.G.: Infant - Bibs: Based on observation at 2:57 p.m., S1 allowed a bib to be worn by a child while asleep. Specialist observed C1 (infant) asleep in a crib wearing a bib. S1 corrected.

Corrective Action Plan: Effective 11/29/2021, S1 stated she will review with staff that bibs will be removed after feeding. Staff will remove and snap to the bed rail prior to an infant being placed in a crib, to ensure this deficiency is not re-cited.
