

## 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.C. Based on record review at 12:49 p.m., S1 failed to have documentation that 2 of 5 staff, S7 (DOH 9/21/2021) and S10 (DOH 10/19/2021), received additional orientation within thirty days of date of hire. S2 stated the additional training was conducted, however, wasn't documented on the orientation sheet. S2 stated they will conduct additional training with S7 and S10 by the end of week.

Corrective Action Plan: Effective 11/30/2021, S2 stated she, S1, and S3 will conduct monthly trainings with all staff. She will set a reminder to document all new hire trainings within 7 and 30 days of hire, to prevent being cited the deficiency again.

### 1911.E.: Daily Reports for Infants

Not Met

1911.E.: Daily Reports for Infants. Written or electronic reports that include the liquid intake, food intake, disposition, bowel movements and eating and sleeping patterns shall be given to the parents of infants on a daily basis. Reports shall be kept current throughout the day.

#### Finding:

1911.E. Based on record review at 12:01 p.m., S10 failed to complete daily written or electronic reports for 2 of 2 infants. S10 stated she changed the infants since their arrival, however, failed to document it. Corrected at 12:59 p.m.

## Statement of Deficiencies

Corrective Action Plan: Effective 11/30/2021, S2 stated she will conduct trainings with all infant teachers to ensure they are aware they must document all infant changings, food intake, sleep, etc. when the occurrence happens to prevent being cited the deficiency again.

### 1919.A.&B.: Food Service and Nutrition - Menu

**Not Met**

1919.A.&B.: A. All meals and snacks provided by the center, and their preparation, service and storage, shall meet the requirements for meals of the U. S. Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP), 7 CFR 226.20, and LAC 51:XXIII.

B. The weekly menu shall:

1. be planned for each day of the week and list the specific food items served;
2. be prominently posted, written or electronically, by the first day of each week and remain posted throughout the week; and
3. have substitutions or additions posted, written or electronically, on or near the menu.

#### Finding:

1919.A.&B.2. Based on record review/observations at 12:02 p.m., the current weekly menu listing specific food items served for each day of the week was not prominently posted, written or electronically, by the first day of each week and remain posted throughout the week. The Specialist observed the following being served for lunch: Baked Fish, Mashed Potatoes, Spinach, Dinner Roll, and Milk. There was no fruit option served. S9 stated the menu was called in from the other center, but she didn't have a menu available. S3 provided a copy of the menu at 12:23 p.m.

Corrective Action Plan: Effective 11/30/2021, S2 stated that on Fridays, prior to leaving for the day, she will check to ensure the menu for the upcoming week is posted in the kitchen to prevent being cited the deficiency again.

### 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 at 1:03 p.m., S1 failed to have documentation of tornado drills that were conducted at least once per month during the months of March and April 2021. S2 stated the drills were done, however there is no documentation. S2 stated they will conduct another tornado drill within the next week.

Corrective Action Plan: Effective 11/30/2021, S2 stated she will set a reminder that a tornado drill must be conducted, and documented, at least once a month between March - June annually to prevent being cited the deficiency again.