

Statement of Deficiencies

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. Based on record review on 12/21/2020 when specialist arrived at 2:30 pm, 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, had current certification in infant and child CPR through training approved by the Department. 1 of 4 staff present had the certification. At 5:20 pm, S3 left causing the center to have 0 of 4 staff with the certification.

The center provides care for children eight years and older and did not have documentation that at least one staff member on the premises, accessible to children, was currently certified in Adult CPR through training approved by the department. 1 (S3) of 4 staff present had the certification. At 5:20pm, S3 left causing the center to have 0 of 4 staff with the certification.

This was not corrected during inspection, as staff was not able to locate documentation of the certification. There needed to be 2 of 4 staff present with the certification to meet the requirement.

Corrective action plan: Effective 12/21/2020, S1 stated that within 30 days she will make sure that all staff who do not currently have certification completes the required training to ensure this is not cited again.

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. Based on record review at 2:30 pm, 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, had current certification in Pediatric First Aid through training approved by the Department. 1 of 4 staff present had the certification. At 5:20pm, S3 left causing the center to have 0 of 4 staff with the certification.

This was not corrected during inspection as staff was not able to locate documentation of this certification. There needed to be 2 of 4 staff present with the certification to meet the requirement.

Corrective action plan: Effective 12/21/2020, S1 stated that within 30 days she will make sure that all staff who do not currently have certification completes the required training to ensure this is not cited again.

1807.B.: CCCBC-Based Determinations of Eligibility for Volunteers and Staff

Not Met

1807.B.: B. Volunteers and Staff. An early learning center shall obtain a CCCBC-based determination of eligibility for child care purposes from the department for each volunteer, staff member, or employee of any kind, and shall have documentation of said determination available at all times for inspection upon request by the Licensing Division.

Finding:

1807.B. Based on record review/interviews at 4:00 pm, S1 failed to have a CCCBC-based determination of eligibility for child care purposes from the Department for S2, teacher/staff in charge, prior to her being present at the center. S2's orientation record shows she was hired on 09/01/2020. Per S1, S2 previously worked at a daycare and she thought she had an eligible CCCBC. Based on review of the staff daily attendance log, S2 was present in the center during September 2020, October 2020, November 2020, December 2020, and was present during inspection on 12/21/2020. This was not corrected during inspection. S2 left the center @ 5:00pm. S2 shall not return to the center until she has an eligible CCCBC.

Corrective Action Plan: Effective 12/21/2020, S1 stated she will make sure that all staff has an eligible CCCBC based determination prior to working to

Valley of Hope Center for Kidz
2936 Greenwood Road
Shreveport, LA 71109

Date - 12/21/2020
License # - 51465
Action Code - 26 - FOLLOW-UP to COMPLIANCE

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ensure that this deficiency will not be re-cited.
