The Little Schoolhouse Child Development Center
3843 General Meyer Avenue
New Orleans, LA 70114

Date - 02/03/2020
License # - 15995
Action Code - 16 - FOLLOW-UP to FOLLOW-UP

Statement of Deficiencies

1507.A.: Daily Attendance Records - Children   **Not Met**

1507.A.: A daily attendance record for children shall be maintained that shall:
1. include the child's first and last name, arrival and departure times, and first and last name of person or entity to whom the child is released;
2. accurately reflect children on the center premises at any given time; and
3. be used to sign in and out if a child leaves and returns to the center during the day.

Finding:

1507.A. Based on record review: At approximately 10:35am, S1 failed to have a daily attendance record for children that accurately reflect the children on the child care premises at any given time as 22 children were present and 19 children were signed in on the log. S1 stated she was not present, and S2 does not know how to access the ProCare system. Corrected at 10:39am by S1 upon her arrival.

Corrective Action Plan: S1 stated she will train S2 to be able to pull up the ProCare system to also check to verify that everyone is checked in.

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:

NEW 1723.A. Based on record review: At approximately 10:29am, S1 failed to have documentation that at least fifty percent (50%) of all staff or at least four staff on the premises and accessible to children, have current certification in infant and child CPR through training approved by the department. 1 of 4 staff present, S2, had documentation of this certification.

Corrective Action Plan: S1 stated she will schedule to have staff complete the training by 2/28/20.

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:

NEW 1723.C. Based on record review: At approximately 10:29am, S1 failed to have documentation that at least fifty percent (50%) of all staff or at least four staff on the premises and accessible to children, have current certification in pediatric first aid training approved by the department. 1 of 4 staff present, S2, had documentation of this certification.

Corrective Action Plan: S1 stated she will schedule to have staff complete the training by 2/28/20.

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:

NEW 1807.B. Based on record review: At approximately 10:19am, S1 failed to obtain a CCCBC-based determination of eligibility for child care purposes from the department for each staff member, S8, prior to the person being present at the center or performing services. Staff sign in records show that S8's first day working at the center was 1/27/2020 from 9:00am to 2:00pm, however S8's CCCBC date of eligibility was 1/28/2020. S1 stated S8 completed paperwork, and only observed S2 and S9 on 1/27/2020, and was never alone. However, there is no documentation supporting that statement.

Corrective Action Plan: S1 stated she will wait until staff member's CCCBC clear prior to allowing staff to work in the future.