

# Bright from the Start Georgia Department of Early Care and Learning 2 Martin Luther King Jr. Drive SE, 670 East Tower Atlanta, GA 30334

Phone: (404) 657-5562 WWW.DECAL.GA.GOV

VisitType: Complaint Investigation Arrival: 11:50 AM Departure: 3:45 PM **Date:** 11/16/2018

Follow Up

**CCLC-4288** 

# Flint River Learning Christian Center

317 Flint River Road Jonesboro, GA 30238 Clayton County (770) 210-1923 Frlcc24@yahoo.com

**Mailing Address** 317 Flint River Rd Jonesboro, GA 30238

Quality Rated: >

# **Regional Consultant**

Ruby Norman

Phone: (770) 405-7959 Fax: (404) 591-5187 laura.davis@decal.ga.gov

Comp	Compliance Zone Designation					
11/16/2018	Complaint Investigation Follow Up	Good Standing				
08/28/2018	Licensing Study	Good Standing				
05/17/2018	Licensing Study	Good Standing				

Compliance Zone Designation - A summary measure of a program's 12 month monitoring history, as it pertains to child care health and safety rules. The three compliance zones are good standing, support, and deficient.

Good Standing - Program is demonstrating an acceptable level of performance in meeting the rules.

Support

Program performance is demonstrating a need for improvement in meeting

**Deficient** 

Program is not demonstrating an acceptable level of performance in meeting

#### Ratios/License Capacity

Building	Room	Age Group	Staff	Children	NC/C	Max 35 SF.	35 SF. Comp.	Max 25 SF.	25 SF. Comp.	Notes
Main	1st left Infants	Infants and One Year Olds	1	5	С	9	С	NA	NA	Feeding
Main	A/S left side back		0	0	С	9	С	NA	NA	
Main	A/S left side front	Three Year Olds and Four Year Olds	1	11	С	19	С	NA	NA	Lunch
Main	B-2nd Rt	Two Year Olds	2	11	С	13	С	18	С	Music,Transitioni
Main	Back Right 3's & 4's		0	0	С	17	С	NA	NA	
Main	C Front Right		0	0	С	12	С	NA	NA	
		Total Capacity @35 sq. ft.: 7	9		Total C	apacity @	25 sq.			

Capacity @25 sq.

Total # Children this Date: 27 Total Capacity @35 sq. ft.: 79

Total Capacity @25 sq.

**Playground Playground Building Playground** Occupancy Compliance

#### **Comments**

1 day letter was left. Discussed with the director the new CRC Policy. Discussed with the director that staff with no CBC complete could not be on the premisis.

Plan of Improvement: Developed This Date 11/16/2018

Any rule violation which subjects a child to injury or life-threatening situation or any rule violations previously cited but not corrected, may result in the imposition of an adverse enforcement action. Serious or continued noncompliance may also jeopardize participation in one or more DECAL program(s).



Please refer to the website, <a href="http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx">http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx</a>, for information regarding October 1, 2018 rule changes about Criminal Records Checks that may affect your facility. In summary,

- New records checks will be required to be completed if a staff member experiences a six month break in service from the child care industry
- New clearance is required at least once every five years
- Any staff member solely responsible for supervising children will be required to have completed a comprehensive background clearance
- · All staff members are required to have completed at least a national fingerprint based clearance check
- Any staff member with only the national fingerprint based clearance, must be under constant and direct supervision of a staff member with a satisfactory comprehensive records check clearance
- Facilities are required to use DECAL KOALA for Criminal Records Checks, including to verify portability of an employee

O.C.G.A. Section 42.1.12(i)(2) requires Bright from the Start: Georgia Department of Early Care and Learning to notify licensed child care programs on accessing and retrieving from the Georgia Bureau of Investigation's (GBI) website a list of the names and addresses of all registered sexual offenders. Please see GBI's website located at http://gbi.georgia.gov to access the Georgia Sex Offender Registry.

#### Refutation Process:

You have the right to refute any of the citations noted in this report with which you disagree. To refute a citation(s), e-mail the following information to CCSRefutations@decal.ga.gov.

- 1) Facility name, license number and visit date
- 2) Your name, title/relationship to the facility, e-mail address & up to two phone number(s) where you can be reached
- 3) Specific rule number(s) that you are refuting, along with your concerns or questions regarding the rule citation

Refutations must be submitted to Child Care Services (CCS) within 10 business days of the completion date.

A sample form for submitting a refutation can be found at: <a href="http://decal.ga.gov/ChildCareServices/RefutationInformation.aspx">http://decal.ga.gov/ChildCareServices/RefutationInformation.aspx</a>

Your refutation will be forwarded to the appropriate CCS manager, who will follow up with you about your concerns. If you have any questions about this process, contact our office at 404-657-5562.

Bright from the Start recommends that all licensed child care providers carry liability insurance coverage sufficient to protect its clients. If you do not have this liability insurance, you are required to post a notice with ½ inch letters in a conspicuous location in the program, notify the parent or guardian of each child in care in writing, obtain their signature to acknowledge receipt and maintain this written acknowledgment on file at the program at all times while the child attends the program and for 12 months after the child's last date of attendance. (O.C.G.A. Section 20-1A-4)





# **Important New Deadlines:**

Your program must be Quality Rated by December 31, 2020 in order to continue to receive Childcare and Parent Services (CAPS).

Get started today! Sign up by completing a short online application: <a href="https://qualityrated.decal.ga.gov/">https://qualityrated.decal.ga.gov/</a>
Request free technical assistance to help you earn your star rating by contacting the Quality Rated help desk at 855-800-7747 or <a href="mailto:qualityrated@decal.ga.gov">qualityrated@decal.ga.gov</a>

anaviya Dawson, Program Official	Date	Ruby Norman, Consultant	Date



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# **Findings Report**

Date: 11/16/2018 VisitType: Complaint Investigation Arrival: 11:50 AM Departure: 3:45 PM

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The following information is associated with a Complaint Investigation Follow Up:

# **Policies and Procedures**

# 591-1-1-.21 Operational Policies & Procedures

**Not Met** 

#### **Finding**

591-1-1-.21(3) requires that the Center conduct drills for fire, tornado and other emergency situations. The fire drills will be conducted monthly and tornado and other emergency situation drills will be conducted every six months. The Center shall maintain documentation of the dates and times of these drills for two years. It was determined based on a review of records that a fire drill was not conducted in August and September 2018.

#### POI (Plan of Improvement)

The Center will hold the drills as required and keep the documentation of the drills on file for two years.

Correction Deadline: 11/19/2018

Recited on 11/16/2018

Safety

591-1-1-.36 Transportation(CR)

Met

Correction Deadline: 8/28/2018

Corrected on 11/16/2018

.36(4)(c) - Previous citation corrected, a fire extinguisher was observed on the vehicle on this date.

**Sleeping & Resting Equipment** 

# 591-1-1-.30 Safe Sleeping and Resting Requirements(CR)

**Not Met** 

#### **Finding**

591-1-1-.30(1)(b)1 requires that cots and mats are of sound construction and of sufficient size to accommodate comfortably the size and weight of the child; and that mats are in good repair, washable, covered with a waterproof material and at least two inches (2") thick. It was determined based on observation that eight mats were frayed and two mats were torn exposing foam in Classroom A/S left side front and ten frayed mats exposing foam in Classroom B-2nd Rt.

#### POI (Plan of Improvement)

The Center will ensure that cots and mats are of sound construction and of sufficient size to accommodate the size and weight of the child and mats are in good repair, washable, covered with a waterproof material and is at least two inches thick.

Correction Deadline: 11/23/2018

Recited on 11/16/2018

Correction Deadline: 8/28/2018

#### Corrected on 11/16/2018

.30(2) - Previous citation corrected, there were no infants observed sleeping in bouncy seat or any other equipment not approved for sleeping on this date.

**Staff Records** 

# **Records Reviewed: 12** Records with Missing/Incomplete Components: 5 Staff # 1 Met Date of Hire: 09/05/2018 Staff # 2 Not Met Date of Hire: 11/05/2018 "Missing/Incomplete Components" .24(1)-Evidence of Orientation Missing, .09-Criminal Records Check Missing Staff #3 Not Met Date of Hire: 11/14/2018 "Missing/Incomplete Components" .09-Criminal Records Check Missing, 24(1)-Evidence of Orientation Missing Staff #4 Met Date of Hire: 08/24/2016 Staff #5 Met Date of Hire: 11/10/2007 Staff #6 Not Met Date of Hire: 06/08/2012 "Missing/Incomplete Components" .14(2)-CPR missing,.14(2)-First Aid Missing Staff #7 Met

Records Reviewed: 12 Rec

Records with Missing/Incomplete Components: 5

Date of Hire: 11/07/2010

Staff # 8 Met

Date of Hire: 10/23/2013

Staff # 9 Met

Date of Hire: 01/01/2003

Staff # 10 Not Met

Date of Hire: 11/13/2018

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing,.31(2)(b)2.-Staff Qualifications-Education Missing,.09-Criminal

Records Check Missing

Staff # 11 Not Met

Date of Hire: 10/09/2018

"Missing/Incomplete Components"

.09-Criminal Records Check Missing,.24(1)-Evidence of Orientation Missing

Staff # 12 Met

Date of Hire: 09/23/2010

Staff Credentials Reviewed: 12

#### 591-1-1-.09 Criminal Records and Comprehensive Background Checks(CR)

**Not Met** 

#### **Finding**

591-1-1-.09(1)(a) requires that a Center ensure that every actual and potential Director, Employee and Provisional Employee of a Child Care Learning Center submit both a Records Check Application to the Department and Fingerprints to an authorized fingerprinting site. It was determined based on a review of records that one provisional employee did not have a satisfactory national or comprehensive determination complete and no documentation of submission of fingerprints. It was further determined that two staff and the director did not have a satisfactory national or comprehensive determination complete, but had documentation of fingerprint submission.

#### POI (Plan of Improvement)

The Center will ensure that every actual and potential Director, Employee and Provisional Employee of a Child Care Learning Center submit both a Records Check Application to the Department and Fingerprints to an authorized fingerprinting site as required.

Correction Deadline: 11/16/2018

#### **Finding**

591-1-1-.09(1)(d) requires the Center to ensure that every Provisional Employee has a valid and current satisfactory Fingerprint Records Check Determination on file prior to being present at the Center while any child is present for care or before an individual age 17 or older resides in the Center and must be supervised at all times by a Director or Employee with a valid and current satisfactory Comprehensive Records Check Determination. The Fingerprint Records Check Determination must have a Records Check Clearance Date that is no older than the preceding 12 months of the hire date; provided, however, if the Provisional Employee has had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, a new satisfactory Fingerprint Records Check Determination is required. It was determined based on a review of records that there was one staff with a satisfactory fingerprint records check determination on file not supervised by a staff with satisfactory comprehensive record check determination. The staff was present with five children in the 1st left classroom.

# POI (Plan of Improvement)

The Center will ensure that every Provisional Employee has a valid and current satisfactory Fingerprint Records Check Determination on file prior to being present at the Center while any child is present for care or before an individual age 17 or older resides in the Center and must be supervised at all times by a Director or Employee with a valid and current satisfactory Comprehensive Records Check Determination. The Fingerprint Records Check Determination must have a Records Check Clearance Date that is no older than the preceding 12 months of the hire date; provided, however, if the Provisional Employee has had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, a new satisfactory Fingerprint Records Check Determination is required.

Correction Deadline: 11/16/2018

# 591-1-1-.09 Criminal Records Check(CR)

Met

Correction Deadline: 8/28/2018

#### Corrected on 11/16/2018

.09(1)(a) - Previous citation corrected, the department no longer accepts local criminal records checks as of October 1, 2018.

#### 591-1-1-.14 First Aid & CPR

Not Met

# **Finding**

591-1-1-.14(2) requires a Staff member who is trained in CPR and first aid to be on the premises and on any field trip whenever any child is present. In addition, Staff who provide direct care to children must satisfactorily obtain certification in first aid and CPR by December 29, 2016 if employed prior to September 30, 2016 and within 90 days of their hire date if employed after September 30, 2016. It was determined based on a review of records that one staff did not have CPR and First Aid training as required.

#### POI (Plan of Improvement)

The Center will develop a schedule to ensure there is always a staff person with current first aid and CPR training present and will develop and implement a plan to ensure all staff members have satisfactorily completed first aid and CPR training by the specified date.

Correction Deadline: 11/30/2018

# Recited on 11/16/2018

# **591-1-1-.33 Staff Training**

**Not Met** 

#### Defer

591-1-1-.33(6)-Previous citation deferred, annual training for 2018 will be reviewed at next Licensing Study.

#### **POI** (Plan of Improvement)

The Center will plan and schedule the required 10 hours of annual training each year and follow up to ensure the training is completed.

Correction Deadline: 6/16/2018

# **Finding**

591-1-1-.33(7) requires that evidence of orientation and training be documented in the Personnel file of each Staff member and be available to the Department for inspection. It was determined based on a review of records that four staff did not have evidence of orientation on file.

# POI (Plan of Improvement)

The Center will develop and implement procedures to review staff records for documentation of training and orientation, to obtain and place missing documentation in staff records, and to file such documents in staff records on an ongoing basis.

Correction Deadline: 11/26/2018