

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

| Date: 4/11/2017 Visit | Type: Licensing Study | Arrival: | 11:20 AM | Departure: | 1:05 PM |
|--|---|--------------|----------|--|---------|
| FR-000009246 | | | Regio | onal Consulta | nt |
| Stokes, Pamela R | | | Steph | nen Knighton | |
| 909 E. BROOKWOOD PL (229) 244-5242 pam_stok | ACE Valdosta, GA 31601 Lov kes65@yahoo.com | wndes County | Fax: | e: (770) 342-79 (678) 891-5990 cummings@de |) |
| Mailing Address | - | | | | |

909 EAST BROOKWOOD PLACE Valdosta, GA 31601

| Compliance Zone Designation | | gnation | 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 | | | |
|-----------------------------|------------------|---------------|--|--|--|--|
| 04/11/2017 | Licensing Study | Good Standing | standing, support, and deficient. | | | |
| 10/17/2016 | Monitoring Visit | Good Standing | Good Standing - Program is demonstrating an acceptable level of performance in meeting the rules. | | | |
| 03/30/2016 | Licensing Study | Good Standing | Support - Program performance is demonstrating a need for improvement in meeting rules. | | | |
| | | | Deficient - Program is not demonstrating an acceptable level of performance in meeting the rules. | | | |

Ratios/License Capacity

| Age Ranges | Children Present | Child For Pay | CAPS | Not for Pay | Provider Children |
|----------------------|------------------|---------------|------|-------------|-------------------|
| Infant (0-11 mos) | 2 | 2 | 0 | 0 | 0 |
| 1 & 2 Years | 6 | 6 | 0 | 1 | 0 |
| 3 & 4 Years | 2 | 3 | 0 | 0 | 0 |
| School Age(5+) Years | 0 | 3 | 0 | 2 | 0 |
| Total Under 13 Years | 10 | 14 | 0 | 3 | 0 |
| Total Under 18 Years | 10 | | | | |
| Objetiere Drasset 40 | Total | Childron, 17 | | | |

Children Present: 10

Caregivers/Helpers Present: 2

Total Children: 17

Total Caregivers/Helpers: 2

More than 6 for pay

6 for pay present & no-pay present does not have a notorized no-pay statement

Comments

Plan of Improvement: Developed This Date 04/11/2017

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).



Reminder: <u>All</u> employees of child care programs must be fingerprinted before **January 1**, 2017. For instructions and to submit records check applications online, please visit <u>www.decalkoala.com</u>. You are encouraged not to wait and to complete the process as soon as possible.



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: http://decal.ga.gov/ChildCareServices/RefutationInformation.aspx

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)

Pamela Stokes, Program Official

Date

Stephen Knighton, Consultant

Date

| OF C. F. O. F. C. F. A. F. F. C. F. A. F. | 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 Findings Report | | | | |
|---|--|------------------|-----------------|---|--|
| A Contraction | | - | - | | |
| Date: 4/11/2017 VisitTyp | be: Licensing Study | Arrival: | 11:20 AM | Departure: 1:05 PM | |
| FR-000009246 | | | - | onal Consultant | |
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| Mailing Address 909 EAST BROOKWOOD PLACE Valdosta, GA 31601 | | | | | |
| The following information is | associated with a Licen | sing Study: | | | |
| | | | Activit | ties and Equipment | |
| Comment Discussed-SIDS/Infant Sleepin 290-2-307 Swimming Pools Comment No Swimming Activities Provid | & Water-related Activition | es(CR) | | Met | |
| | | | | Children's Records | |
| Records Reviewed: 17 | | Records wit | h Missing/In | complete Components: 8 | |
| Child # 2 | | | Not Met | | |
| "Missing/Incomplete Cor | nponents" | | | | |
| | 8)(1)(c),Physician & Emerc lo Liability Insurance Form | | nformation - (. | 08)(1)(b),Infant Feeding | |
| Child # 3 | | | Not Met | | |
| "Missing/Incomplete Cor | nponents" | | | | |
| Immunization Form - (.08 Liability Insurance Form | 8)(1)(c),Physician & Emerç | gency Contact Ir | nformation - (. | 08)(1)(b),Proof of No | |
| Child # 4 | | | Not Met | | |
| "Missing/Incomplete Cor | nponents" | | | | |
| Proof of No Liability Insu | rance Form | | | | |
| Child # 6 | | | Not Met | | |

"Missing/Incomplete Components"

Physician & Emergency Contact Information - (.08)(1)(b), Proof of No Liability Insurance Form

Child #8

"Missing/Incomplete Components"

Physician & Emergency Contact Information - (.08)(1)(b), Dad Work # Missing -(.08)(1)(a), Proof of No Liability Insurance Form

Child # 10

"Missing/Incomplete Components"

Physician & Emergency Contact Information - (.08)(1)(b), Proof of No Liability Insurance Form

Child # 11

"Missing/Incomplete Components"

Dad Work # Missing -(.08)(1)(a), Proof of No Liability Insurance Form

Child #13

"Missing/Incomplete Components"

Immunization Form - (.08)(1)(c), Physician & Emergency Contact Information - (.08)(1)(b), Infant Feeding Plan - (.10)(4), Proof of No Liability Insurance Form

290-2-3-.08 Children's Records

Finding

290-2-3-.08(1)(a) requires the Home to maintain a file for each Child that includes the Child's name, birth date, Parent's name, Home and business addresses and telephone numbers. It was determined based on a review of records that the provider did not have information completed for several enrolled children.

POI (Plan of Improvement)

The Home Provider will secure the missing information, and to ensure that children's records are completed for future enrollees, the provider will ensure that all enrollment records have all required information.

Correction Deadline: 4/11/2017

Finding

290-2-3-.08(1)(c) requires the Home to maintain a file for each Child that includes evidence of age-appropriate immunizations or a signed affidavit against such immunizations; enrollment in the home may not continue for more than 30 day without such evidence. It was determined based on a review of records that the provider did not have such evidence for several enrolled children.

POI (Plan of Improvement)

The Home Provider will ensure that an immunization record/signed affidavit is on file for each enrolled Child.

Correction Deadline: 4/11/2017

Finding

290-2-3-.08(2)(c)18 requires notification of the absence of a liability insurance policy sufficient to protect its clients. If the Home is not covered by liability insurance sufficient to protect its clients, the Home must notify the Parent of each Child under the care of the program in writing. Each Parent must acknowledge receipt of such notice, and a copy of the acknowledgement shall be kept in the Child's file. It was determined, based on a review of Children's records, that none of the enrolled children had evidence of signed No Liability Signature Forms.

Records with Missing/Incomplete Components: 8

Not Met

Not Met

Not Met

Not Met

Not Met

The Home Provider will obtain and maintain documentation.

Correction Deadline: 4/11/2017

290-2-3-.08 Parental Authorization(CR)

Comment

Parent Authorizations Obtained/Completed

290-2-3-.11 Physical Plant - Safe Environment(CR)

Comment

Observation-No Hazards Accessible

290-2-3-.13 Physical Plant-Structural/Mechanical(CR)

Comment

Home Clean, Free of Hazards

290-2-3-.13 Playgrounds(CR)

Comment

Outside Area Clean, Well Maintained

290-2-3-.10 Food Service & Nutrition

Finding

290-2-3-.10(4) requires that for the feeding of children under one year old the Home Provider must secure from Parents infant formula and a feeding plan. It was determined based on a review of records that the Home Provider did not have infant feeding plans for two infants in care.

POI (Plan of Improvement)

The Home Provider will ensure that infant formula and a feeding plan is secured for children under one year old.

Correction Deadline: 4/11/2017

Finding

290-2-3-.10(5) requires that infant formula bottles be labeled with the individual child's name. Any unused formula or milk shall be discarded or returned to the Parent at the end of the day. It was determined based on observation that all infant bottles were not labeled with the child's name and date.

POI (Plan of Improvement)

The Home will check bottles each day to determine if they are already labeled with the Child's name and will label those that are not. The Home will dispose of any unused formula or milk or return it to the Parent at the end of the day.

Correction Deadline: 4/11/2017

290-2-3-.04 Application Requirements(CR)

Finding

290-2-3-.04(1)(d)requires a person that provides care for more than six children for pay, as defined in the rules, to make application to the Department for a license to operate as a Child Care Learning Center. It was determined based on observation that the provider cared for eight unrelated children for pay, one related child for pay and one related child for no pay on this date.

Georgia Department of Early Care and Learning v1.03

Not Met

Licensure

Food Service

Not Met



Met

Met

Met

POI (Plan of Improvement)

The Home caring for more than six children shall reduce number of children in care to six. The Home will submit an application for a Child Care Learning Center and receive a license to operate from the Department before caring for more than six children for pay.

Correction Deadline: 4/11/2017

| | Safety and Discipline |
|--------------------------------|-----------------------|
| | |
| 290-2-311 Discipline(CR) | Met |
| Comment | |
| Pleasant Interactions Observed | |
| 290-2-311 First Aid Kit | Met |
| Comment | |
| Observed Kit Complete | |
| 290-2-311 Transportation(CR) | Met |
| Comment | |
| No transportation. | |
| | Staff Records |
| | Staff Recor |

290-2-3-.21 Criminal Records Check(CR)

Finding

290-2-3-.21(1)(a) requires the Home to ensure that the Provider, every actual and potential Employee and Provisional Employee has a Satisfactory Records Check Determination before the individual is present at the Home while any child is present at the Home. It was determined based on a review of records that two adult employees living in the home did not have a fingerprint determination letter on file as required.

POI (Plan of Improvement)

Correction Deadline: 4/11/2017

The Home Provider will obtain the required satisfactory records check determination(s). The Home will ensure that the Provider, every actual and potential Employee and Provisional Employee has a Satisfactory Records Check Determination. The Provider, Employees, and Provisional Employees MUST have a Satisfactory Records Check Determination to reside in and be at the Home when a child is present for care.

| 290-2-307 First Aid & CPR | Met |
|---|-----|
| Comment 290-2-307(5) - Provider has current CPR and First-aid that expires in October 2018. | |
| Correction Deadline: 5/11/2017 | |
| 290-2-307 Independent Contractors(CR) | Met |
| Comment | |
| No Independent contractors | |
| 290-2-307 Other Staff Direct Contact with Children(CR) | Met |
| Comment No additional staff | |

Not Met

290-2-3-.07 Staff Training

Comment

Health/Safety training reminder

290-2-3-.07 Students-in-Training(CR)

Comment

No Students-in-training

290-2-3-.07 Volunteers(CR)

Comment

No Volunteers

Staff:Child Ratios and Supervision

290-2-3-.07 Staff:Child Ratios(CR)

Finding

290-2-3-.07(7) requires the Home to ensure that the total number of Children unrelated to the provider in the Family Child Care Learning Home, for pay or not for pay, cannot exceed six children, except during two designated hours approved by the Department. It was determined based on observation that the provider cared for more than six unrelated children for pay.

POI (Plan of Improvement)

The Home will reduce the number of unrelated children, both for pay and not for pay, so that the total number of unrelated children in care does not exceed the number of children as specified in these rules.

Correction Deadline: 4/21/2017

290-2-3-.07 Supervision(CR)

Comment

Observed-Adequate Supervision

Met

Met

Not Met

Met