



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: 5/9/2017 **VisitType:** Monitoring Visit **Arrival:** 2:35 PM **Departure:** 4:45 PM

CCLC-3997

Jenkins Memorial Enrichment Learning Center

4218 Windsor Spring Road Hephzibah, GA 30815 Richmond County
 (706) 790-1040 barbaracofer0@gmail.com

Regional Consultant

Melyn Smith
 Phone: (706) 855-3455
 Fax: (706) 434-7640
 melyn.smith@dec.al.gov

Mailing Address
 Same

Compliance Zone Designation			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.
05/09/2017	Monitoring Visit	Good Standing	
09/07/2016	LS POI Follow Up	Good Standing	
06/13/2016	Licensing Study	Good Standing	

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 rules.
Deficient - Program is not demonstrating an acceptable level of performance in meeting the rules.

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	A- Main Classroom	Six Year Olds and Over	3	11	C	34	C	NA	NA	Snack
Main	B- Hallway Classroom		0	0	C	14	C	NA	NA	
Main	C- Music Room		0	0	C	0	C	NA	NA	
Total Capacity @35 sq. ft.: 48					Total Capacity @25 sq. ft.: 0					
Total # Children this Date: 11			Total Capacity @35 sq. ft.: 48			Total Capacity @25 sq. ft.: 0				

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground	49	C

Comments

Plan of Improvement: Developed This Date 05/09/2017

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



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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)

Barbara Cofer, Program Official

Date

Melyn Smith, Consultant

Date



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Findings Report

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The following information is associated with a Monitoring Visit:

Activities and Equipment

591-1-1-.35 Swimming Pools & Water-related Activities(CR) **Met**

Comment

No Swimming Activities Provided

Facility

591-1-1-.25 Physical Plant - Safe Environment(CR) **Met**

Comment

Observation-Center Clean/Well Maintained

Comment

Observation-No Hazards Accessible

591-1-1-.26 Playgrounds(CR) **Met**

Comment

Observation-Clean/Good Repair

Health and Hygiene

591-1-1-.10 Diapering Areas & Practices(CR) **Met**

Comment

The program does not enroll diapered children.

591-1-1-.17 Hygiene(CR) **Met**

Comment

Observed-Proper Hand Washing Throughout

591-1-1-.20 Medications(CR) **Met**

Comment

Observed-Complete Documentation

Safety

591-1-1-.11 Discipline(CR)

Met

Comment

Observed-Positive Learning Environment

591-1-1-.13 Field Trips(CR)

Met

Comment

No Field Trips at This Time

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

Met

Comment

Observed-Complete Documentation

Sleeping & Resting Equipment

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

Met

Comment

The program does not enroll infants nor do they have a nap/rest period.

Staff Records

Records Reviewed: 11

Records with Missing/Incomplete Components: 11

Staff # 1

Not Met

Date of Hire: 06/01/2008

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(2)-Health & Safety Certificate

Staff # 2

Not Met

Date of Hire: 08/02/2012

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(2)-Health & Safety Certificate

Staff # 3

Not Met

Date of Hire: 04/25/2016

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(2)-Health & Safety Certificate,.09-Criminal Records Check Missing

Staff # 4

Not Met

Date of Hire: 05/24/2014

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(2)-Health & Safety Certificate

Staff # 5

Not Met

Date of Hire: 04/22/2014

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(2)-Health & Safety Certificate

Staff # 6

Not Met

Date of Hire: 10/18/2016

"Missing/Incomplete Components"

.33(2)-Health & Safety Certificate

Staff # 7

Not Met

Date of Hire: 05/23/2014

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(2)-Health & Safety Certificate

Staff # 8

Not Met

Date of Hire: 09/07/2016

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(2)-Health & Safety Certificate

Staff # 9

Not Met

Date of Hire: 04/04/2004

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(2)-Health & Safety Certificate,.09-Criminal Records Check Missing

Staff # 10

Not Met

Date of Hire: 12/31/2012

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(2)-Health & Safety Certificate,.09-Criminal Records Check Missing

Staff # 11

Not Met

Date of Hire: 01/21/2016

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(2)-Health & Safety Certificate,.09-Criminal Records Check Missing

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

Not Met

Finding

591-1-1-.09(1)(d) requires each Employee and Center Director hired on or after January 1, 2014 to have a satisfactory Fingerprint Records Check Determination with a Records Check Clearance date that is within 12 months of their hire date. In order for the Department to issue a satisfactory Fingerprint Records Check Determination, each Employee and Director must submit both a Fingerprint Records Check Application to the Department and Fingerprints to an authorized fingerprinting site. It was determined, based on a review of records, that two employees hired after January 1, 2014 were observed to be lacking a satisfactory Fingerprint Records Check Determination as required.

POI (Plan of Improvement)

The Center will ensure that each director and employee hired after January 1, 2014 has a satisfactory Fingerprint Records Check Determination dated within 12 months of the hire date and will submit the required documents to obtain the determination if they have not already done so.

Correction Deadline: 5/10/2017

Recited on 5/9/2017

Finding

591-1-1-.09(1)(e) requires every Employee hired before January 1, 2014 have either a satisfactory Preliminary Records Check Determination or a satisfactory Fingerprint Records Check Determination on file and requires that Employees hired before January 1, 2014 that have only a satisfactory Preliminary Records Check Determination on file to obtain a Fingerprint Records Check Determination before January 1, 2017. It was determined, based on review of records, that two staff hired before January 1, 2014 were lacking evidence of satisfactory Fingerprint Records Check Determinations as required on this date. It was further determined that the two staff did have satisfactory Preliminary Records Check Determinations on file.

POI (Plan of Improvement)

The Center will ensure that every employee hired before January 1, 2014 has a satisfactory preliminary determination or satisfactory fingerprint determination on file and will have a plan to ensure that these employees obtain a Fingerprint Records Check Determination before January 1, 2017.

Correction Deadline: 5/10/2017

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

Not Met

Finding

591-1-1-.14(1) requires the Center Director to successfully complete a biennial training program in cardiopulmonary resuscitation (CPR) and a triennial training program in first aid that is conducted by certified or licensed health care professionals and deals with the provision of emergency care to infants and children. In addition, at least fifty percent (50%) of the caregiver Staff shall have completed such training at any given time. It was determined, based on review of records, that the Center was lacking evidence that the director and at least fifty percent of the caregiver Staff have completed a biennial training in CPR and a triennial training in first aid on this date.

POI (Plan of Improvement)

The Center director and at least 50% of the caregiver Staff will complete the needed training. The director will send written verification to the consultant upon completion and will develop a plan to ensure that at least 50% of the caregiver Staff have completed this training at any given time.

Correction Deadline: 6/8/2017

591-1-1-.33 Staff Training

Technical Assistance

Technical Assistance

591-1-1-.33(2)(a)-(i) - Please ensure all staff have completed the mandatory Health and Safety Orientation Training.

Correction Deadline: 6/8/2017

Staffing and Supervision

591-1-1-.32 Staff:Child Ratios and Group Size(CR)

Met

Comment

Observed-Appropriate Staff:Child Ratios

591-1-1-.32 Supervision(CR)

Met

Comment

Observed-Direct Supervision/Attentive Staff