



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: 7/25/2017 **VisitType:** Licensing Study **Arrival:** 2:30 PM **Departure:** 5:30 PM

CCLC-39244

Ms. BJ's Group Daycare and Early Learning

511 Jefferson Street Moultrie, GA 31768 Colquitt County
 (229) 985-7022 msbjs704@yahoo.com

Regional Consultant

Rena Keene
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Mailing Address

511 jefferson st
 moultrie, GA 31768

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. 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.
07/25/2017	Licensing Study	Good Standing	
02/23/2017	Monitoring Visit	Good Standing	
07/25/2016	Licensing Study	Good Standing	

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	Room A	One Year Olds and Four Year Olds	2	18	C	5	NC	NA	NA	Free Play, Outside
Main	Room B		0	0	C	3	C	NA	NA	
Main	Room C		0	0	C	4	C	NA	NA	
Main	Room D		0	0	C	4	C	NA	NA	
Total Capacity @35 sq. ft.: 12					Total Capacity @25 sq. ft.: 0		Building capacity limited by Fire Marshall Limitations			
Total # Children this Date: 18			Total Capacity @35 sq. ft.: 12		Total Capacity @25 sq. ft.: 0					

Building	Playground	Playground Occupancy	Playground Compliance
Main	A	62	C

Comments

The purpose of today's visit was to conduct a Licensing Study. Director stated that there have been no new hires since last visit and that all employees meet the required qualifications. No Liability Statement was posted and signed statements observed in children's records.

July 27, 2017: Revised report completed and sent to director.

Plan of Improvement: Developed This Date 07/25/2017

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(j)(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@dec.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://dec.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)

Bobbie Jackson, Program Official

Date

Rena Keene, Consultant

Date



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Findings Report

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The following information is associated with a Licensing Study:

Activities and Equipment

591-1-1-.12 Equipment & Toys(CR)

Met

Comment

Discussed-Add to Enhance Variety

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

Met

Comment

No Swimming Activities Provided

Children's Records

Records Reviewed: 5

Records with Missing/Incomplete Components: 1

Child # 4

Not Met

"Missing/Incomplete Components"

.08(a)-(f)-Doctor, Clinic, Phone Numbers

Finding

591-1-1-.08(1) requires the Center Staff to maintain a file for each child while such child is in care and for one year after that child is no longer enrolled. In order for the file to be complete, the file shall contain the following: child's name, birth date, sex, address, living arrangement, name of school if applicable; names of both Parents, home and work addresses, and home and work telephone numbers; name(s) and addresses of the person(s) to whom the child may be released including address, telephone numbers, relationship to child and to Parent(s), and other identifying information; name(s) and telephone number(s) of person(s) to contact in emergencies when the Parent cannot be reached; name and telephone number of the child's primary source of health care; and a statement regarding known allergies, physical problems, mental health disorders, mental retardation or developmental disabilities which limit the child's participation in the program. It was determined based on a review of children's records that five of the five records reviewed did not contain the relationship of persons to whom each child could be released. One of the five children's records did not contain the telephone number of the release persons. One of the five records reviewed did not contain the telephone number for the child's doctor. Additionally, a record could not be found for two additional children listed on the roll.

POI (Plan of Improvement)

Center staff will develop a plan that includes how to obtain all required information for currently enrolled children and how to ensure this is done for future enrollees as well. The plan will also include how and where to maintain files for the required amount of time. The plan will be implemented and followed. Any missing information for the children who are currently enrolled will be obtained and placed in the child's record.

Correction Deadline: 7/25/2017

Finding

591-1-1-.08(1)(b) requires Center Staff to maintain a file for each child that includes parental authorizations, including, but not limited to, written authorization for the Center to obtain emergency medical care for the child when the Parent is not available. It was determined based on a review of children's records that one of the five children whose records were reviewed did not have an authorization on file to obtain emergency medical care. Two additional children were present for whom no record could be located, and therefore no authorization for emergency medical care was on file for those children.

POI (Plan of Improvement)

The Center will develop and follow a system to place and maintain all types of parental authorizations in these files.

Correction Deadline: 7/25/2017

Finding

591-1-1-.08(6) requires the Center to maintain records of a child's daily arrival and departure for the twelve (12) preceding months that the Parent or person(s) authorized by the Parent documents, in written or electronic format, each time the Parent or authorized person drops off and picks up the child. The documentation shall include at least the date, the child's name, the arrival and departure times, and the signature or initials of the Parent or authorized person at the time of arrival and departure. These records shall be made available to the Department in printed or written form upon request. It was determined based on a review of the daily sign in and out sheets that the required documentation was not being maintained correctly for daily attendance. Eleven of the 17 children present had the parent's signature already placed on the form for remaining days in the week. One of the 17 children who was present for care was not signed in for the current day. The times that the children were signed in by the parent on today's date were not present for ten of the seventeen children for whom a parental signature was shown on the form.

POI (Plan of Improvement)

The Center will maintain arrival and departure records as required, will ensure the documentation includes all of the required information, and will provide the records to the Department when requested.

Correction Deadline: 7/25/2017

Evening Care

591-1-1-.32 Staffing/Supervision(CR)**Met****Comment**

591-1-1-.32(6) - Staffing and supervision of evening care was discussed. Director showed consultant the cots and sheets that are used for evening care.

Correction Deadline: 7/25/2017

Facility

591-1-1-.06 Bathrooms**Met****Comment**

Monitor for Necessary Supplies

591-1-1-.19 License Capacity(CR)**Not Met****Finding**

591-1-1-.19(1) requires a Center to provide 35 square feet of usable space per child, which will determine the Center's License capacity. It was determined based on consultant's observation that 19 children were present in a space licensed for 12 children. Eight of the children present were the director's children.

POI (Plan of Improvement)

The Center will limit the number of children in this space to the licensed capacity.

Correction Deadline: 7/25/2017

591-1-1-.25 Physical Plant - Safe Environment(CR)**Not Met****Finding**

591-1-1-.25(12) requires that heating and cooling equipment be protected to prevent children from touching it. It was determined based on consultants' observation that cooling equipment was not inaccessible to the children. A fan was observed to be on top of a desk in the child care area being used during visit.

POI (Plan of Improvement)

To ensure that children's contact with the unit is prevented, the center will keep heating and cooling equipment stored in an area that is not accessible to the children. When heating and cooling equipment is in use, it shall be placed safely on a surface that is out of the reach of children.

Correction Deadline: 7/25/2017**Recited on 7/25/2017****Correction Deadline: 2/23/2017****Corrected on 7/25/2017****.25(13) - No hazards were observed inside the center to be accessible to the children.**

591-1-1-.25 Physical Plant-Structural/Mechanical**Not Met****Finding**

591-1-1-.25(4) requires the Center to maintain the temperature in the range of 65 to 85 degrees Fahrenheit and to ventilate the Center be ventilated either by mechanical or natural means for the purpose of providing fresh air and controlling unpleasant odors. Facilities which do not have a functioning central heating and air-conditioning system shall make fifty percent (50%) of all required windows operable for ventilation. Any openings used for ventilation shall be screened. It was determined based on consultant's observation that the air conditioning unit was not working during visit and there was not adequate screened windows to maintain a temperature range between 65 and 85 degrees Fahrenheit. Consultant was unable to measure the temperature inside the building, but the local temperature was recorded to be 87 degrees Fahrenheit on a Weather Center app. The visit was conducted on a July day with hot, humid conditions that were uncomfortable.

POI (Plan of Improvement)

The Center will add screen(s), if needed. The designated person(s) will check frequently to ensure the Center's temperature is maintained at 65 to 85 degrees Fahrenheit, will monitor to ensure that either natural or mechanical ventilation provides fresh air and controls unpleasant odors, and that any openings used for ventilation are screened.

Correction Deadline: 7/25/2017

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

Not Met

Correction Deadline: 2/23/2017

Corrected on 7/25/2017

.26(4) - The fencing was observed to be safe. (See playground hazards)

Finding

Previously Cited: 591-1-1-.26(7) requires that climbing and swinging equipment be anchored and have a resilient surface beneath the equipment. The fall-zone from such equipment must be adequately maintained by the Center to assure continuing resilience. It was determined based on consultants' observation that there was inadequate resilient material underneath and in the fall zone of the "monkey bars" type climber. The resilient material measured less than two inches deep.

591-1-1-.26(8) requires climbing and swinging equipment to have a resilient surface beneath the equipment and the fall zone from such equipment must be adequately maintained by the Center to assure continuing resilience. It was determined based on consultant's observation that the resilient surface in the fall zone of the trapeze climber was inadequate. Mulch was observed to be directly beneath the equipment, but did not extend far enough to create a safe fall zone. A minimum depth of six inches of resilient material is required for this equipment.

POI (Plan of Improvement)

Previously Cited: The Center will ensure that climbing and swinging equipment is anchored. The Center will develop and/or follow a plan for routine inspections of the resilient surface and for replacing when needed.

The Center will add additional resilient surfacing to the fall zones where needed and check daily, adding resilient surfacing as needed to maintain adequate resilience.

Correction Deadline: 8/2/2017

Recited on 7/25/2017

Finding

Previously Cited: 591-1-1-.26(8) requires the playground to be kept clean, free of litter and hazards. It was determined during the visit on July 25, 2017, based on consultant's observation that hazards were accessible to children on the playground due to the gate to the area surrounding the heating and air conditioning unit not being secured. The fenced area enclosing the heating and air conditioning unit contained the following items that were hazardous to the children: a roll of chain link fence, a hoe, a yard rake, a hay rake and a large shovel.

A n open padlock was attached to the gate, but the gate had been opened by one of the children in order to retrieve a ball and left open.

POI (Plan of Improvement)

The gate to the fence enclosing the the heating and air conditioning unit will be kept locked and not accessible to the children. The playground will be monitored daily to ensure that no hazards are accessible to children.

Correction Deadline: 7/25/2017

Recited on 7/25/2017

Food Service

Comment

No menu was posted, but director stated that the following was served for lunch on day of visit: noodles and weiners, broccoli and cheese, rolls, peaches and milk.

591-1-1-.18 Kitchen Operations**Not Met****Technical Assistance**

591-1-1-.18 - Please ensure that food items are stored in airtight containers. Sugar, flour, carrots and grits were observed stored in the refrigerator in opened bags that were not sealed.

Finding

591-1-1-.18(5) requires the refrigeration of all perishable and potentially hazardous foods at 40 degrees Fahrenheit or below and served promptly after cooking. Freezer temperature shall be maintained at zero (0) degrees Fahrenheit or below. It was determined based on consultant's observation that the freezer used by the center for food service showed that the temperature was 12 degrees Fahrenheit, and therefore was not cold enough for safe food storage.

POI (Plan of Improvement)

The Center will refrigerate foods as required, will train Staff on proper refrigerator and freezer temperature settings and monitor the settings. Food will be served promptly after cooking.

Correction Deadline: 7/25/2017

Health and Hygiene

591-1-1-.10 Diapering Areas & Practices(CR)**Not Met**

Correction Deadline: 2/23/2017

Corrected on 7/25/2017

.10(3)(c) - No items were observed in the one crib being used by the center.

Finding

Previously Cited: 591-1-1-.10(3)(a) requires that if diapers are changed on a diaper changing surface, the surface shall be smooth, non porous, and equipped with a guard or rails to prevent falls. Between each diaper change, the diaper change surface shall be cleaned with a disinfectant and dried with a single-use disposable towel. It was determined based on observation and staff statements that required diaper changing procedures were not being following. Prior to changing the diaper of an infant, the employee placed a blanket on the diaper-changing surface and placed the infant on top of the blanket. This employee who was left alone in charge of the children while the director left for her employment with the Colquitt County Board of Education to drive the school bus was not knowledgeable and familiar with diapering requirements. Although the director was leaving as consultants arrived for the Monitoring Visit, she remained on site to assist the other employee in diaper changing. Following the diaper change, it was observed that the employee did not clean the surface prior to applying disinfectant and additionally, when the disinfecting solution was applied to the diaper-changing surface, it was immediately wiped and not allowed to stay on the surface as prescribed by best practices.

591-1-1-.10(4) requires that if diapers are changed on a diaper changing surface, the surface shall be smooth, non porous, and equipped with a guard or rails to prevent falls. Between each diaper change, the diaper changing surface shall be cleaned with a disinfectant and dried with a single-use disposable towel. It was determined that the required diapering facilities were not currently available due to the sink in the infant area was broken. Director stated that she was currently using the top of a storage shelf unit and the surface was observed to be not non-porous. A hole was observed in the corner of the table and the surface was not smooth and cleanable. Director further stated that she was using pads to lay children on while being diapered, but the pads examined were lined, but were not non-porous, although they were disposable.

POI (Plan of Improvement)

Previously Cited: The director will ensure that any staff responsible for the sole care of children are knowledgeable in diapering practices and can perform these duties on her own when left to do so. Staff was advised that best practices dictate that following a diaper change, the surface is cleaned with soap and water, and after being cleaned is disinfected by applying a disinfecting solution and allowing it to stay on the surface a minimum of ten seconds prior to drying the surface and removing the disinfecting solution. It is recommended that the solution be left on at least two minutes when feasible for maximum effectiveness, but ten seconds will suffice if other children have to be changed. Additionally, staff will ensure that the only non-porous surfaces are used for diapering unless the infant is changed in his/her own crib.

The Center will ensure there is a smooth, nonporous changing surface that has a guard or rails for safety in each classroom that houses children wearing diapers. Center Staff will be trained and have adequate supplies to properly clean the diaper changing surface between each diaper change.

Correction Deadline: 8/1/2017

Recited on 7/25/2017

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

Not Met

Finding

591-1-1-17(7) requires that children wash their hands with liquid soap and warm running water upon arrival for care, when moving from one child care group to another, upon re-entering the child care area after outside play, before and after eating meals and snacks, handling or touching food, playing in water; after toileting and diapering, playing in sand, touching animals or pets, and contact with bodily fluids and after contamination by any other means. It was determined based on consultant's observation that children were not washing their hands as required. Children were observed to come inside from the playground and not wash their hands. Several children poured water to drink and did not wash their hands prior to doing so after coming in from the outside.

POI (Plan of Improvement)

The Center will train Staff on required handwashing for children and Staff will ensure children's hands are washed when required. The Director will monitor for compliance.

Correction Deadline: 7/25/2017

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

Met

Comment

Discussed-Documentation/Procedures - Director stated that she does not administer medication to children at the center.

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 that a fire drill was not conducted for the month of June, 2017.

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: 7/30/2017

591-1-1-.27 Posted Notices**Not Met****Finding**

591-1-1-.27 requires each Center to post in a designated area for public viewing near the front entrance the following: the Center's current License or Permit; a copy of these rules; a copy of the current communicable disease chart; a statement allowing Parent(s) access to all child care areas upon notifying any staff member of his or her presence; names of persons responsible for the administration of the Center in the administrator's absence; the dated current week's menu for meals and snacks; emergency plans for severe weather, fire, and other emergency situations; a statement requiring visitors to check in with Staff when entering the Center; no smoking signs; and a notice provided by the Department which advises Parents of their right to review a copy of the Center's most recent licensure evaluation report upon request to the Center Director. The Center shall provide any Parent with a copy of this evaluation report upon request. It was determined based on consultant's observation that the following notices were not posted:

- * The current week's menu
- * Visitor's notice
- * Person in charge in director's absence

POI (Plan of Improvement)

The Center will post the notices as required and ensure they remain posted.

Correction Deadline: 7/25/2017

Safety

591-1-1-.05 Animals**Met****Comment**

No Animals Kept

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**

No Routine Transportation Provided

Sleeping & Resting Equipment

591-1-1-.30 Safe Sleeping and Resting Requirements(CR)**Technical Assistance****Comment**

Discussed-SIDS/Infant Sleeping Position

Technical Assistance

591-1-1-.30(1)(a)3 requires that each crib shall have only an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant. A crib was observed that was not in use during visit and it was not covered with a tight-fitting sheet. Please ensure that any crib used for an infant is covered with a tight fitting sheet where no excess material can be pulled.

Correction Deadline: 7/25/2017

Staff Records

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 a review of staff records that one employee did not have a current fingerprint check on file. This employee had a preliminary records check and was required to obtain a new check by January 1, 2017. A one-day letter was left with the director.

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: 7/25/2017

591-1-1-.14 First Aid & CPR**Not Met****Finding**

591-1-1-.14(1) requires the Center Director and, at any given time, at least fifty percent (50%) of the caregiver Staff to successfully complete a biennial training program in cardiopulmonary resuscitation (CPR) and a triennial training program in first aid. The first aid training must be done by certified or licensed health care professionals or trainers and must deal with the provision of emergency care to infants and children. The Center shall maintain current evidence of the successful completion of such training which shall be available to the Department for inspection. It was determined at least 50 percent of the staff was not certified in CPR and First Aid. Only one of three employees had the required training and two are required to complete the CPR and First Aid training.

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 and that evidence of successful completion of the training is on file available for inspection.

Correction Deadline: 8/24/2017**Correction Deadline: 3/25/2017****Corrected on 7/25/2017****.14(2) - One employee was on site with current CPR and First Aid certification.**

591-1-1-.33 Staff Training**Not Met****Technical Assistance**

591-1-1-.33 - Please be sure that training certificates are dated to determine the number of training hours obtained each calendar year.

Finding

591-1-1-.33(3) requires each staff member with direct care responsibilities to complete health and safety training at the time of employment that will count toward required annual training: Staff employed prior to September 30, 2016 will complete the training by December 29, 2016 and Staff employed after September 30, 2016 will complete the health and safety training within the first 90 days of employment. It was determined based on a review of staff records and staff statements that two of three staff who were hired prior to September 30, 2016 had not obtained the required health and safety training.

POI (Plan of Improvement)

The Center will develop and implement a plan to schedule and track this training for all employees based on their hire dates.

Correction Deadline: 8/24/2017

591-1-1-.31 Staff(CR)

Technical Assistance

Technical Assistance

591-1-1-.31 - Please be sure that caregiver staff meet all required qualifications based on age and experience.

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-Adequate Supervision