



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: 8/3/2017 **VisitType:** Licensing Study **Arrival:** 10:45 AM **Departure:** 1:35 PM

CCLC-38846

God's Way Learning Academy

115 Martin Luther King Drive Dublin, GA 31021 Laurens County
 (478) 595-0807 fefepowell1968@gmail.com

Regional Consultant

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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.
08/03/2017	Licensing Study	Good Standing	
03/23/2017	POI Follow Up	Good Standing	
01/12/2017	Monitoring Visit	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.

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	Four Year Olds and Six Year Olds and Over	1	15	C	20	C	NA	NA	Lunch, Transitioning, Story
Main	B	Two Year Olds	1	10	C	19	C	NA	NA	Lunch, Centers
Main	C	Infants and One Year Olds	1	6	C	15	C	NA	NA	Nap, Snack, Lunch, Free Play
Main	D	Three Year Olds and Four Year Olds	1	7	C	15	C	NA	NA	Centers, Lunch
Total Capacity @35 sq. ft.: 69					Total Capacity @25 sq. ft.: 0		Building capacity limited by Centers Request			
Total # Children this Date: 38			Total Capacity @35 sq. ft.: 69			Total Capacity @25 sq. ft.: 0				

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground A	94	C

Comments

Plan of Improvement: Developed This Date 08/03/2017

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@decga.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://decga.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)

Felicia Powell, Program Official

Date

Brandi Mangino, Consultant

Date



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Findings Report

Date: 8/3/2017 **VisitType:** Licensing Study **Arrival:** 10:45 AM **Departure:** 1:35 PM

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The following information is associated with a Licensing Study:

Activities and Equipment

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

Technical Assistance

Technical Assistance

Consultant discussed reorganizing the puzzles in Room D so they are not a falling hazard, in addition the speaker on the shelf in Room B.

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 # 5

Not Met

"Missing/Incomplete Components"

.08(a)-(f)-Emergency Contact information Missing

591-1-1-.08 Children's Records

Technical Assistance

Technical Assistance

Consultant discussed enrollment forms as one was missing a phone number and address for a release person.

Correction Deadline: 8/3/2017

Facility

591-1-1-.19 License Capacity(CR)**Met****Comment**

Licensed Capacity Routinely Met

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

Consultant discussed the piece of flooring in front of the toilet in the first hallway restroom not being secure.

Correction Deadline: 9/2/2017**Technical Assistance**

Consultant discussed keeping hazard inaccessible as baby wipes were in a backpack in Room B and they pose a suffocation hazard, in addition a toilet brush was in the restroom in Room B.

Correction Deadline: 8/3/2017

591-1-1-.26 Playgrounds(CR)**Not Met****Comment**

Discussed-Fluff/Redistribute Surface.

Technical Assistance

Consultant discussed filling in the hole near the back fence line so it does not pose a tripping hazard.

Correction Deadline: 8/13/2017**Finding**

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 resilient. It was determined based on consultants observation that the teether totter did not have adequate resilience surfacing.

POI (Plan of Improvement)

The Center will add additional resilient surfacing to the fall zones where needed and check daily, adding resilient surfacing as needed to maintain adequate resilient. The center has a base but not an adequate amount.

Correction Deadline: 8/13/2017

Health and Hygiene

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

Staff Stated Proper Knowledge

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

Observed-Staff Remind Children Wash Hand

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

Discussed-Documentation/Procedures as the center has not dispensed any medication since the last visit.

Safety

591-1-1-.11 Discipline(CR)**Met****Comment**

Observed-Discussion/Redirection

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)**Met****Comment**

Correct number of mats; disinfecting discussed

Staff Records

591-1-1-.09 Criminal Records Check(CR)**Met****Comment**

Criminal Records Check complete

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 based on consultant review of records that no staff were properly trained in first aid an CPR when both classes were taken online.

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: 9/2/2017**Finding**

591-1-1-.14(3) requires the Center to have a first aid kit in each building of the Center and in any vehicle used by the Center for transportation of children, that contains scissors, tweezers, gauze pads, adhesive tape, thermometer, band-aids, assorted sizes, antibacterial ointment, insect-sting preparation, an antiseptic cleansing solution, triangular bandages, rubber gloves, protective eye wear, a protective face mask, and a cold pack. The first aid kit, together with a first aid instruction manual which must be kept with the kit at all times, shall be stored so that it is not accessible to children but is easily accessible to Staff. It was determined based on consultant observation that the center has an incomplete first aid kit when the following items were missing:

- protective eye wear
- triangular bandage
- insect sting
- cold pack
- rubber gloves
- antibacterial ointment as the one in the kit was expired

POI (Plan of Improvement)

Center Staff will provide any missing first aid kits, add any missing items to each first aid kit and will develop and use a plan for checking the kits and replacing missing items in each kit in the future. First aid kits and instruction manuals will be stored so that they kits are not accessible to children but are easily accessible to Center Staff.

Correction Deadline: 8/13/2017

591-1-1-.33 Staff Training**Not Met****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 records that one staff member did not complete the required health and safety orientation within 90 days of employment.

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: 9/2/2017

591-1-1-.31 Staff(CR)**Not Met****Finding**

591-1-1-.31(2)(c) requires the Center to maintain a copy and/or written verification of the credential or degree awarded to the lead teacher that is required by these rules in the lead teacher's file, to make the document available for inspection and to provide the document to Department staff upon request. It was determined based on a review of records that the center has one lead teacher that does not meet the requirements in that the staff member does not have a degree or credential.

POI (Plan of Improvement)

The Center will review lead teacher records to ensure the required documentation is on file and will obtain and file it if not found.

Correction Deadline: 8/3/2017

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-Adequate Supervision