



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: 11/15/2018 **VisitType:** Complaint Investigation & Monitoring Visit **Arrival:** 9:15 AM **Departure:** 12:30 PM

CCLC-112

YMCA Childcare Plus

6400 Habersham St. Savannah, GA 31405 Chatham County
 (912) 354-5480 Adrienne.Arkwright@ymcaofcoastalga.org

Regional Consultant

Kesha McNeal

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Mailing Address
 Same

Quality Rated: ★

<u>Compliance Zone Designation</u>			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.
11/15/2018	Complaint Closure	Good Standing	
11/15/2018	Complaint Investigation & Monitoring Visit	Good Standing	
09/19/2018	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
Gym	Gym-school age		0	0	C	109	C	NA	NA	
Gym	Room 9		0	0	C	20	C	NA	NA	
Total Capacity @35 sq. ft.: 129			Total Capacity @25 sq. ft.: 0							
Main	A-PreK	PreK	2	19	C	19	C	NA	NA	Transitioning, Circle Time, Story
Main	B-PreK	PreK	2	20	C	19	NC	NA	NA	Free Play, Transitioning
Main	C-Older Ones	Infants and One Year Olds	1	5	C	12	C	NA	NA	Feeding, Floor Play
Main	D		0	0	C	17	C	NA	NA	
Main	E-Threes	Three Year Olds	1	7	C	22	C	NA	NA	Transitioning, Centers
Main	F-Twos	Two Year Olds and Three Year Olds	2	13	C	20	C	NA	NA	Transitioning, Centers, Diapering
Main	G-Ones	One Year Olds	2	13	C	16	C	NA	NA	Floor Play, Free Play, Transitioning, Diapering
Main	H-Infants	Infants	1	3	C	10	C	NA	NA	Floor Play, Feeding, Transitioning
Total Capacity @35 sq. ft.: 135			Total Capacity @25 sq. ft.: 0							

Total # Children this Date: 80

Total Capacity @35 sq. ft.: 264

Total Capacity @25 sq.
ft.: 0

Building	Playground	Playground Occupancy	Playground Compliance
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Comments

The center director stated that no new staff has been hired since the last visit.

The purpose of the visit was to conduct a monitoring visit as well as complete a complaint investigation.

Plan of Improvement: Developed This Date 11/15/2018

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, <http://www.dec.state.ga.us/CCS/Regulations.aspx>, 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@dec.state.ga.us.

- 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.state.ga.us/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)



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: <https://qualityrated.decal.ga.gov/>
Request free technical assistance to help you earn your star rating by contacting the Quality Rated help desk at 855-800-7747 or qualityrated@decal.ga.gov

Adrienne Arkwright, Program Official

Date

Kesha McNeal, Consultant

Date



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Findings Report

Date: 11/15/2018 **VisitType:** Complaint Investigation & Monitoring Visit **Arrival:** 9:15 AM **Departure:** 12:30 PM

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The following information is associated with a Monitoring Visit:

Activities and Equipment

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

Not Met

Comment

A variety of equipment and toys were observed throughout the center.

Finding

591-1-1-.12(1) requires each Employee and child in attendance to use all indoor and outdoor furniture, activity materials, and equipment in a safe and appropriate manner and in accordance with the manufacturer's instructions, recommendations, and intended use. All equipment and furniture shall be used only by the age-appropriate group of children. It was determined based on the consultant's observation that an infant from classroom H was observed in a bouncy seat and not strapped in as required.

POI (Plan of Improvement)

The Center will ensure Staff are trained in and children are taught the proper use of all furniture, materials and equipment; will implement a plan for this information to be reviewed with both groups on an ongoing basis; and for monitoring proper and age-appropriate usage.

Correction Deadline: 11/15/2018

Technical Assistance

591-1-1-.12(2) - Please ensure that all equipment and furniture is free from hazardous conditions such as, but not limited to, sharp rough edges or toxic paint; and be kept clean. On this date the consultant observed a red chair in three three year old classroom that had tears located on the left and right side of the chair with exposed foam accessible to children.

Correction Deadline: 11/15/2018

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

Met

Comment

Center does not provide swimming activities.

Children's Records

Child # 1

Not Met

"Missing/Incomplete Components"

.08(3)-Address of Release Person Missing

591-1-1-.08 Children's Records**Not Met****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 records that one out of five children files were incomplete in that the address of release person was incomplete.

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 be implemented and followed.

Correction Deadline: 11/15/2018**Recited on 11/15/2018****Facility****591-1-1-.19 License Capacity(CR)****Met****Comment**

Licensed capacity observed to be routinely met by center.

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

No hazards observed accessible to children on this date.

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

Discussed maintenance of resilient surface. Please fluff and redistribute.

Comment

Playground observed to be clean and in good repair.

Food Service**591-1-1-.15 Food Service & Nutrition****Met****Correction Deadline: 9/19/2018****Corrected on 11/15/2018**

.15(2)(a) - previous citation observed corrected on this date.

Health and Hygiene

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

Proper diapering procedures observed.

591-1-1-.17 Hygiene(CR)	Met
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Correction Deadline: 11/15/2018

Corrected on 11/15/2018

.17(7) - previous citation observed corrected. Hand washing procedures were discussed.

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

The Provider currently does not dispense/administer medication.

Policies and Procedures

591-1-1-.21 Operational Policies & Procedures	Not Met
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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 the consultant's review and staff statement that the center did not document fire drills for the month(s) of: September 2018, and October 2018. It was further determined based on the consultant's review that the center did not document or conduct Lock down drill or Review emergency procedures every six months as required.

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: 11/30/2018

Recited on 11/15/2018

Safety

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

Age-appropriate discussion and/or redirection observed.

Comment

Staff were observed to maintain a positive learning environment on this date.

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

Center does not provide routine transportation.

Sleeping & Resting Equipment

591-1-1-.30 Safe Sleeping and Resting Requirements(CR)	Not Met
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Comment

Discussed SIDS and infant sleeping position.

Comment

The correct number of mats, sheets and blankets were observed on this date. Cleaning and disinfecting of mats was discussed with the director on this date.

Finding

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. It was determined based on the consultant's observation that three of three crib sheets were not tight fitting as required in classroom H.

POI (Plan of Improvement)

The center will ensure that each crib has an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant.

Correction Deadline: 11/15/2018

Correction Deadline: 9/19/2018

Corrected on 11/15/2018

.30(1)(b)1 - previous citation observed corrected in that the center purchased new mats that were two inches thick.

Staff Records

Records Reviewed: 19

Records with Missing/Incomplete Components: 4

Staff # 1	Met
Date of Hire: 02/24/2017	

Staff # 2	Met
Date of Hire: 03/06/2017	

Staff # 3	Not Met
Date of Hire: 06/22/2018	

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing

Staff # 4	Not Met
Date of Hire: 06/04/2018	

"Missing/Incomplete Components"

.24(1)-No Record,.14(2)-CPR missing,.14(2)-First Aid Missing,.33(3)-Health & Safety Certificate

Staff # 5	Not Met
Date of Hire: 07/02/2018	

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing

Staff # 6	Met
Date of Hire: 08/01/2018	

Staff # 7	Met
Date of Hire: 10/26/2017	

Staff # 8	Met
Date of Hire: 11/08/2017	

Staff # 9	Met
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Records Reviewed: 19**Records with Missing/Incomplete Components: 4**

Date of Hire: 04/05/2013

Staff # 10 Met

Date of Hire: 07/25/2018

Staff # 11 Met

Date of Hire: 06/26/2018

Staff # 12 Met

Date of Hire: 08/16/2018

Staff # 13 Met

Date of Hire: 07/13/2017

Staff # 14 Not Met

Date of Hire: 04/10/2018

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing,.33(3)-Health & Safety Certificate

Staff # 15 Met

Date of Hire: 06/22/2015

Staff # 16 Met

Date of Hire: 03/01/2018

Staff # 17 Met

Date of Hire: 08/19/2018

Staff # 18 Met

Date of Hire: 03/04/2010

Staff # 19 Met

Date of Hire: 01/10/2017

Staff Credentials Reviewed: 19

591-1-1-.09 Criminal Records and Comprehensive Background Checks(CR)**Met****Comment**

Consultant requested to view all Criminal Record checks for employees hired after last visit. Director stated that there have been no new hires since last visit

Comment

Criminal record checks were observed to be complete.

591-1-1-.09 Criminal Records Check(CR)**Met****Correction Deadline: 9/19/2018**

Corrected on 11/15/2018

.09(1)(d) - previous citation observed corrected on this date.

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 the consultant's review that one staff member did not complete first aid and CPR training within 90 days of their hire date.

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: 11/25/2018

Recited on 11/15/2018

591-1-1-.24 Personnel Records

Not Met

Finding

591-1-1-.24(1) requires the center to maintain a personnel file on the Director, all Employees, Provisional Employees, Personnel, Staff, Students-in-Training, Volunteers, Clerical, Housekeeping, Maintenance, and other Support Staff for the duration of the term of employment plus one calendar year, and it shall contain the following: identifying information to include: name, date of birth, social security number, current address and current telephone number; employment history; as applicable to the position held: evidence of education and qualifying work experience; evidence of all training required by these rules which shall include: title of training, date of training, trainer's signature, location of training and number of clock hours obtained; a statement completed by the staff member that the information provided is true and accurate; any other records required by these rules; and as applicable to the position held, evidence of required orientation including date and signature of person providing the orientation; It was determined based on review of staff files that three staff files were incomplete.

POI (Plan of Improvement)

The Center will secure required information for all Personnel. The Center will ensure that complete information is in the personnel file for all Directors, Employees, Provisional Employees, Personnel, Staff, Students-in-Training, Volunteers, Clerical, Housekeeping, Maintenance and other Support Staff.

Correction Deadline: 11/25/2018

Recited on 11/15/2018

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 the consultant's review that two staff members did not complete health and safety training within ninety 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: 11/25/2018

Recited on 11/15/2018

Correction Deadline: 10/19/2018

Corrected on 11/15/2018

.33(4) - Previous citation observed corrected.

Correction Deadline: 10/19/2018

Corrected on 11/15/2018

.33(5) - Previous citation observed corrected.

Defer

591-1-1-.33(6)- Annual training will be reviewed at the next licensing study conducted in 2019.

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: 10/19/2018

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

Met

Comment

Discussed that all lead staff must enroll in an approved education program within 6 months of hire and complete degree within 18 months.

Comment

Staff observed to be compliant with applicable laws and regulations.

Staffing and Supervision

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

Met

Comment

Center observed to maintain appropriate staff:child ratios.

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

Met

Comment

Adequate supervision observed on this date.