

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: 5/20/2022 Arrival: 11:30 AM Departure: 12:10 PM VisitType: Licensing Study

Paramore Preschool Academy

1293 2nd Ave SW Cairo, GA 39828 Grady County

(229) 377-9776 lafonne2@msn.com

Mailing Address

CCLC-35742

Same

Quality Rated:

Regional Consultant

Cresia Jackson

Phone: (229) 238-2958 Fax: (229) 238-2957

cresia.jackson@decal.ga.gov

Compliance Zone Designation			
Licensing Study	Good Standing	s	
Monitoring Visit	Good Standing	þ	
Monitoring Visit	Good Standing	s	
	Licensing Study Monitoring Visit	Licensing Study Good Standing Monitoring Visit Good Standing	

Compliance Zone Designation - A summary measure of a program's 12 month monitoring nistory, 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.

Ratios/License Capacity

Building	Room	Age Group	Staff	Children	NC/C	Max 35 SF.	35 SF. Comp.		25 SF. Comp.	Notes
Main	Room A (3-12 yrs)	Three Year Olds and Four Year Olds	1	12	С	32	С	NA	NA	Lunch
Main	Room B		0	0	С	20	С	NA	NA	
Main	Room C (2 yrs)	One Year Olds and Two Year Olds	1	9	С	17	С	NA	NA	Nap
Main	Room D (Infants- 1 yr)	Infants	1	5	С	6	С	NA	NA	Nap
		Total Capacity @35 sq. ft.: 75	5		Total C ft.: 0	apacity @	25 sq.			
Total # Cl	hildren this Date: 26	Total Capacity @35 sq. ft.: 75	5		Total C ft.: 0	apacity @	25 sq.			

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground	34	C

Comments

The purpose of the visit was for on-site license study.

Plan of Improvement: No Plan Developed

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.decal.ga.gov/CCS/RulesAndRegulations.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





Important Quality Rated/CAPS Update:

As January 1, 2022, child care providers must be Quality Rated to receive Childcare and Parent Services (CAPS). Newly licensed, or new to CAPS providers may be eligible for the new CAPS/QR Provisional Status, allowing for scholarships while working toward a star rating.

Contact the Quality Rated help desk at 855-800-7747 or qualityrated@decal.ga.gov for more information. Free techincal assistance is available!

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), do the following:	
1) Log into DECAL KOALA www.decalkoala.com with the userid for your program 2) On the home page scroll down to the Inspection Reports and select 'Refute Citation' for the visit report in dispute 3) Select the specific rule number(s) that you are refuting, add the reason for disagreement regarding the rule citation, and upload supporting documentation 4) Submit the refutation in DECAL KOALA to Child Care Services (CCS) within 10 business days of the completion date.	

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)

Annie Brown, Program Official	Date	Cresia Jackson, Consultant	Date



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Findings Report

Date: 5/20/2022 Arrival: 11:30 AM Departure: 12:10 PM VisitType: Licensing Study

CCLC-35742 **Regional Consultant**

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The following information is associated with a Licensing Study:

Activities and Equipment

591-1-1-.03 Activities Met

Comment

Center will ensure that the lesson plans are updated.

Correction Deadline: 5/20/2022

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

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

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

Met

Comment

Center does not provide swimming activities.

Children's Records

Records Reviewed: 1 Records with Missing/Incomplete Components: 0

Child #1 Met

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 consultant review, that the center failed to complete the administrative review by uploading files for review.

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.

Correction Deadline: 5/20/2022

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

Center appears clean and well maintained.

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

Not Met

Finding

591-1-1-.26(6) requires that playground equipment provide an opportunity for the children to engage in a variety of experiences and shall be age-appropriate. For example, toddlers shall not be permitted to swing in swings designed for School-age Children. The outdoor equipment shall be free of lead-based paint, sharp corners and shall be regularly maintained in such a way as to be free of rust and splinters that could pose significant safety hazard to the children. All equipment shall be arranged so as not to obstruct supervision of children. It was determined based on consultant observation the the equipment to include the red bus, blue, yellow, and red slide is chipping paint and exposing rust. It was further determined the swing chains were exposing rust.

POI (Plan of Improvement)

The Center will provide a variety of age-appropriate equipment that is arranged so as not to obstruct supervision of children. Staff will check the equipment daily to ensure that the equipment is free of hazards, rust and splinters.

Correction Deadline: 5/30/2022

Health and Hygiene

591-1-1-.07 Children's Health

Not Met

Finding

591-1-1-.07(5) requires Center Staff to not permit children to wear around their necks or attach to their clothing pacifiers or other hazardous items. It was determined based on consultant observation that an infant had a pacifier attached to his clothing.

POI (Plan of Improvement)

The Center will instruct Staff regarding this safety requirement.

Correction Deadline: 5/20/2022

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

Met

Comment

Staff state proper knowledge of diapering procedures.

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

Met

Comment

Proper hand washing observed throughout the center.

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

Met

Comment

The Provider currently does not dispense/administer medication.

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 based on consultant review, that the center failed to complete the administrative review by uploading files for review.

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: 5/25/2022

591-1-1-.29 Required Reporting

Not Met

Finding

591-1-1-.29(5) requires the administrator of a Center to submit the annual report within 30 days when the Department requests an annual report. It was determined based on consultant review, that the center failed to complete the administrative review by uploading files for review.

POI (Plan of Improvement)

The Center will complete and submit the report as required.

Correction Deadline: 6/19/2022

Safety

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

Met

Comment

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

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

Met

Comment

Center does not participate in field trips at this time.

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

Met

Comment

Center does not provide routine transportation.

Sleeping & Resting Equipment

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

Not Met

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 staff statement the crib sheets are not changed daily or more often as required by the department.

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: 5/20/2022

Records Reviewed: 3

Records with Missing/Incomplete Components: 0

Staff # 1

Met

Staff # 2

Met

Staff # 3

Met

Staff Credentials Reviewed: 0

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

Met

Comment

Criminal record checks were observed to be 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, that the center failed to complete the administrative review by uploading files for review.

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: 6/19/2022

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 consultant review, that the center failed to complete the administrative review by uploading files for review.

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: 5/25/2022

Finding

.24(2) requires Personnel files to also contain daily attendance records or other employee payroll records for the Employee for the preceding six (6) month period which may be stored away from the Center provided that the Center notifies the Department of its intention to store these records off-site, provides the Department with the name, address and phone number of the custodian of these records and allows the Department, at its discretion, to have access to these records at the custodian's location immediately or access at the Center within seven (7) business days of a Department representative's request. The Department may, at its discretion, accept photocopies of the requested records which are provided within seven (7) business days of the Department representative's request for the same;. It was determined based on consultant review, that the center failed to complete the administrative review by uploading files for review.

POI (Plan of Improvement)

Within seven business days, the Center will submit photocopies of requested records or have these available at the Center for review. The Center will ensure the Department's access to personnel records according to these rules.

Correction Deadline: 5/27/2022

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 orientation training within the first 90 days of employment. The state-approved training hours obtained will count toward required first year training hours. The training must address the following health and safety topics: prevention and control of infectious diseases (including immunizations); prevention of sudden infant death syndrome and use of safe sleeping practices; administration of medication, consistent with standards for parental consent; prevention of and response to emergencies due to food and allergic reactions; building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic; prevention of shaken baby syndrome, abusive head trauma and child maltreatment; emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility); handling and storage of hazardous materials and the appropriate disposal of bio contaminants; precautions in transporting children; recognition and reporting of child abuse and neglect; and child development. It was determined based on consultant review, that the center failed to complete the administrative review by uploading files for review.

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 and will ensure that the training includes all required components as required.

Correction Deadline: 6/19/2022

Finding

591-1-1-.33(6) requires that evidence of orientation and training shall be documented in the Personnel file of each Staff member and shall be available to the Department for inspection. It was determined based on consultant review, that the center failed to complete the administrative review by uploading files for review.

POI (Plan of Improvement)

The Center will develop and implement procedures to review staff records for documentation of training and orientation, to obtain and place missing documentation in staff records, and to file such documents in staff records on an ongoing basis.

Correction Deadline: 5/30/2022

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

Finding

591-1-1-.31(1)(c) requires that a copy and/or written verification of the credential or degree awarded to the Director by the technical college, university, school or Department-approved trainer listed in 591-1-1-.31(1)(b)2. (i) through (xiii) be maintained by the Center in the Director's file and such documentation shall be available for inspection by Department staff upon request. It was determined based on consultant review, that the center failed to complete the administrative review by uploading files for review.

POI (Plan of Improvement)

The Center will obtain the written verification from the Director, place it in the Director's file, and provide it to the Department if requested.

Correction Deadline: 5/20/2022

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

Staff observed to provide direct supervision and be attentive to children's needs.