

Date: 2/27/2019	VisitType: Licensing Study	Arrival:	11:20 AM	Departure: 2:50 PM
CCLC-37107			Regi	onal Consultant
In His Arms Pool	er		Kesh	na McNeal
110 Pipemakers 0 (912) 272-0567 lip	Circle, Suite 106 Pooler, GA 31322 Ch ski@aol.com	atham County	Fax:	ne: (866) 359-1672 (866) 359-7490 a.mcneal@decal.ga.gov
Mailing Address				

1511 walthour rd savannah, GA 31410

#### Quality Rated: No

			<b>Compliance Zone Designation</b> - 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	
02/27/2019	Licensing Study	Good Standing	standing, support, and deficient.	
09/07/2018	Complaint Closure	Good Standing	Good Standing - Program is demonstrating an acceptable level of performance in meeting the rules.	
09/07/2018	Complaint Investigation & Monitoring Visit POI Follow Up	Good Standing	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-infant	Infants and One Year Olds	2	13	C	8	NC	NA	NA	Nap,Diapering,F eeding,Transition ing
Main	B-1-2 years	One Year Olds	2	16	С	16	С	NA	NA	Nap,Transitionin g
Main	C-2 1/2 years	Two Year Olds	2	16	С	20	С	NA	NA	Nap,Transitionin g,Lunch
Main	D-3-4 years	Three Year Olds and Four Year Olds	3	29	С	41	С	NA	NA	Transitioning,Lun ch,Nap
		Total Capacity @35 sq. ft.: 85	5		Total C ft.: 0	apacity @	25 sq.			
Total # Cl	hildren this Date: 74	Total Capacity @35 sq. ft.: 85	5		Total C ft.: 0	apacity @	25 sq.			

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground	44	C

 $\label{eq:comments} \underbrace{\textsc{Comments}}_{\textsc{Director}} \textsc{provided four file(s) for employees hired since last visit.}$ 

The consultant left the center a copy of the emergency prepardness plan and a sample copy of Safe Sleep Practices Policy.

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).

<ul> <li>Please refer to the website, <u>http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx</u>, for information regarding October 1, 2018 rule changes about Criminal Records Checks that may affect your facility. In summary,</li> <li>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</li> <li>New clearance is required at least once every five years</li> <li>Any staff member solely responsible for supervising children will be required to have completed a comprehensive background clearance</li> <li>All staff members are required to have completed at least a national fingerprint based clearance check</li> </ul>
<ul> <li>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</li> <li>Facilities are required to use DECAL KOALA for Criminal Records Checks, including to verify portability of an employee</li> </ul>

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)





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

Date

Date

OF GEOREGIA	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					
1776	Findings Report					
Date: 2/27/2019 V	isitType: Licensing Study	Arrival:	11:20 AM	Departure:	2:50 PM	
CCLC-37107 In His Arms Pooler			-	onal Consulta a McNeal	nt	
110 Pipemakers Circl∉ (912) 272-0567 lipski∉	e, Suite 106 Pooler, GA_31322 Cha ⊉aol.com	tham County	Fax: (	e: (866) 359-16 (866) 359-7490 a.mcneal@dec	)	
Mailing Address 1511 walthour rd savannah, GA 31410						
The following informa	ation is associated with a Licensi	ng Study:				
			Activit	ies and Eo	quipment	
591-1-112 Equipmen	t & Toys(CR)				Met	
<b>Comment</b> A variety of equipment	and toys were observed throughout	the center.				
591-1-135 Swimming	Pools & Water-related Activities	(CR)			Met	
<b>Comment</b> Center does not provid	e swimming activities.					
	_		(	Children's	Records	
Records Reviewed:	4	Records wit	th Missing/Inc	complete Com	ponents: 2	
Child # 1			Not Met			
"Missing/Incomple	<u>ete Components"</u>					
.08(1)(a)-Work Ad	ddress Missing,.08(3)-Address of Re	elease Persor	n Missing			
Child # 2			Met			
Child # 3			Not Met			
"Missing/Incomple	•					
.08(3)-Address of	Release Person Missing					
Child # 4			Met			

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

#### **Technical Assistance**

591-1-1-.08(1) - Please ensure that center staff maintains 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: Parents, home and work addresses, and addresses of the person(s) to whom the child may be released to.

#### Correction Deadline: 2/27/2019

#### 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 the consultant's review that six out of sixteen children were signed in for the one year old classroom, twelve out of thirty-two children were signed in the three and four year old classroom, one out of thirteen children were singed in the two year old classroom, and no children were signed in the infant classroom on this date.

#### 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: 2/27/2019

	Facility
591-1-119 License Capacity(CR)	Met
Comment	

Licensed capacity observed to be routinely met by center.

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

#### Comment

No hazards observed accessible to children on this date.

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

#### Comment

Discussed maintenance of resilient surface. Please fluff and redistribute.

#### **Technical Assistance**

591-1-1-.26(9) - Please ensure that all exposed concrete on the playground is inaccessible to children in care.

#### Correction Deadline: 2/27/2019

591-1-1-.18 Kitchen Operations

## **Food Service**

## Met

# Health and Hygiene

## 591-1-1.10 Diapering Areas & Practices(CR)

Kitchen appears clean and well organized.

#### Comment

Comment

Proper diapering procedures observed.

Met

Met

Technical Assistance

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

Not Met

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 the consultant's observation that children in room C did not wash their hands with liquid soap and warm running water after eating lunch.

#### 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: 2/27/2019

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

#### Comment

The Provider currently does not dispense/administer medication.

**Policies and Procedures** 

Technical Assistance

#### 591-1-1-.21 Operational Policies & Procedures

#### **Technical Assistance**

591-1-1-.21(1)(p) - Please ensure that the center has an updated written plan for handling emergencies, including but not limited to severe weather, loss of electrical power or water and death, serious injury or loss of a child, a threatening event, or natural disaster which may occur at the Center; to have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, and continuity of operations. The plan must apply to all children in care and include specific accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions and shall include assurance that no Center Personnel will impede in any way the delivery of emergency care or services to a child by licensed or certified emergency health care professionals. The updated written template was emailed to the center.

#### Correction Deadline: 3/4/2019

#### **Technical Assistance**

591-1-1-.21(1)(q) - Please ensure that the center has in their policies and procedures a description of the safe sleep practices followed by the Center that includes the following information: the initial placement of Infants on their backs to sleep; no cover or other soft items in crib; appropriate sleep clothing for Infants to be provided by Parent; individual crib, cot or mat and bedding provided and changing and cleaning practices for these items; Infants who fall asleep in other equipment, on the floor or elsewhere will be moved to a crib to sleep; and no swaddling or positioning devices used. A sample copy was left on site.

## Correction Deadline: 3/4/2019

# Safety

#### 591-1-1-.05 Animals

#### Comment

Center does not keep animals on premises.

#### 591-1-1.11 Discipline(CR)

#### Comment

Age-appropriate discussion and/or redirection observed.

#### Comment

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

Met

Met

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

#### Comment

Center does not participate in field trips at this time.

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

#### Comment

Center does not provide routine transportation.

# **Sleeping & Resting Equipment**

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

#### Comment

Pleasant naptime environment observed.

#### 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)2 requires that a crib mattress is firm, tight-fitting without gaps, at least 2 inches thick and covered with a waterproof, washable material. Before a change of occupant, each mattress shall be cleaned with a disinfectant. It was determined based on the consultant's observation that four out of seven crib mattress that were occupied were not tight- fitting without gaps.

## POI (Plan of Improvement)

The center will ensure that a crib mattress is firm, tight-fitting without gaps, at least

#### Correction Deadline: 2/27/2019

Records Reviewed: 10	Records with Missing/Incomplete Components: 2
Staff # 1	Met
Date of Hire: 06/10/2014	
Staff # 2	Met
Date of Hire: 05/19/2016	
Staff # 3	Met
Date of Hire: 01/15/2019	
Staff # 4	Met
Date of Hire: 06/10/2014	
Staff # 5	Not Met
Date of Hire: 09/02/2014	
"Missing/Incomplete Components"	
.33(5)-10 Hrs. Annual Training	
Staff # 6	Not Met
Date of Hire: 11/10/2018	
"Missing/Incomplete Components"	
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Met

Met

**Staff Records** 

Not Met

.33(3)-Health & Safety Certificate

Staff # 7 Date of Hire: 02/16/2017	Met
Staff # 8 Date of Hire: 12/26/2018	Met
Staff # 9 Date of Hire: 04/26/2018	Met
Staff # 10 Date of Hire: 03/02/2018	Met

#### Staff Credentials Reviewed: 10

591-1-109 Criminal Records and Comprehensive Background Checks(CR)	Met
<b>Comment</b> Criminal record checks were observed to be complete.	
<b>Comment</b> Director provided four file(s) for employees hired since last visit.	
591-1-114 First Aid & CPR	Met
<b>Comment</b> Complete first aid kits observed in center and on vehicles.	
<b>Comment</b> Evidence observed of 100% of center staff certified in First Aid and CPR.	
591-1-133 Staff Training	Not Met

#### 591-1-1-.33 Staff Training

#### 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 an employee hired after September 30, 2016 did not complete the health and safety training within the first 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: 3/29/2019

#### Finding

591-1-1-.33(6) requires, in the first year of employment and then by calendar year thereafter, all supervisory and caregiver Personnel, except independent contractors, Students-in-Training and volunteers to attend ten (10) clock hours of training which is task-focused in early childhood education or child development or subjects relating to job assignment and is offered by an accredited college, university or vocational program or other Department-approved source. It was determined based on the consultant's review that one staff member did not complete ten (10) clock hours of training for 2018.

#### **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: 3/29/2019

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

#### 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)

#### Comment

Center observed to maintain appropriate staff:child ratios.

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

#### Comment

Adequate supervision observed on this date.

Met

Met

Met