

Comments

Building

Main

Main

Back Right

Barn

Total # Children this Date: 49

A 1 day letter and a CBC Affidavit was left on this date.

Playground

Plan of Improvement: Developed This Date 02/23/2020

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).

0

0

Total Capacity @35 sq. ft.: 98

Total Capacity @35 sq. ft.: 98

Playground

Occupancy

0

0

Playground

Compliance

С

С

ft.: 118

ft.: 118

18

11

Total Capacity @25 sq.

Total Capacity @25 sq.

С

С

26

NA

С

NA

|--|

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>

Adaugo Chigbu, Program Official

Date

Ashley Cunningham, Consultant

Date

Melissa McFarlin, Consultant

Date

C C C C C C C C C C C C C C C C C C C	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 Findings Report				
Date: 2/24/2020	VisitType: Licensing Study	Arrival:	9:30 AM	Departure:	2:30 PM
CCLC-37110			R	egional Consultan	nt
Young World Child	I Care & Learning Center	A	Ashley Cunningham		
	ckum Road Lilburn, GA 30047 Gwinnet @YoungworldCLC.COM	Fa	Phone: (866) 374-9389 Fax: (866) 375-0880 Ashley.Cunningham@decal.ga.gov		
Mailing Address Same			Jo	oint with: Melissa M	lcFarlin
591-1-103 Activitie	mation is associated with a Licensing	j Study.	Activi	ities and Equ	
Technical Assistan 591-1-103(2) - Plea an expired date and	ce lse ensure that all lesson plans are curre others without any dates.	ent. The co	nsultant ob	served one lesson	plan with
Correction Deadline	e: 2/24/2020				
591-1-112 Equipm	ent & Toys(CR)				Not Met
Technical Assistant 591-1-112(1) - The child was sitting in th used for feedings. Th and advised that the	consultant observed a blue and white h e high chair at the time of the observation he provider removed the high chair from high chair would not be used for future	igh chair in on, the cons the classro	sultant ask	ed that the high cha	air not be
Correction Deadline	<i>₽: ∠124/2</i> 020				

Finding

591-1-1-.12(2) requires that all equipment and furniture be free from hazardous conditions such as, but not limited to, sharp rough edges or toxic paint; and be kept clean. It was determined based on the consultant's observation in the Back Left classroom in the rear of the classroom near the children's storage caddy that the drawer on the plastic storage compartment was broken and had sharp edges exposed at the top of the caddy, which poses as a safety hazard.

POI (Plan of Improvement)

The Center will ensure that equipment and furniture are used by the age-appropriate group of children.

Correction Deadline: 2/24/2020

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

Comment

Center does not provide swimming activities.

Met

Children's Records

Records with Missing/Incomplete Components: 0

Child #1

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

Records Reviewed: 1

Comment

Records were observed to be complete and well organized for five out of five records.

591-1-1-.06 Bathrooms

Comment

Bathrooms observed to be clean and well maintained.

591-1-1-.19 License Capacity(CR)

Comment

Licensed capacity observed to be routinely met by center.

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

Finding

591-1-1-.25(13) requires that potentially hazardous equipment, materials and supplies be stored in a locked area inaccessible to children. It was determined based on the consultant's observation that in the Back Left classroom the staff bathrooms at the back left of the room stored hazards accessible to the children. In the first bathroom there was Lysol sitting on the back of the toilet and in the second bathroom there were cleaning supplies, sunscreen and bug spray stored on the door caddy.

POI (Plan of Improvement)

The staff stated the bathrooms are not used by children and the consultant advised there should be a lock on the door. The Center will identify all hazardous items and keep them in a locked area inaccessible to children. The Center will inform all Staff about hazardous items and the safe storage of those items.

Correction Deadline: 2/24/2020

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

591-1-1-15 Food Service & Nutrition

Center menu meets USDA guidelines.

Comment

Comment

Playground not observed on this date due to inclement weather. The playground will be thoroughly checked at the next regulatory visit.

Food Service

Not Met

Met

Met

Facilit

Met

Met

Not Met

Met

Finding

591-1-1.15(2) requires that a signed written feeding plan for children less than one (1) year of age shall be obtained from Parent(s) and that instructions from the Parent(s) shall be updated regularly as new foods are added or other dietary changes are made. The feeding plan shall be posted in the child's assigned room and must include the child's feeding schedule, the amount of formula or breast milk to be given, instructions for the introduction of solid foods, the amount of food to be given and notation of any type(s) of commercially premixed formula which may not be used in an emergency because of food allergies. It was determined based on the consultant's review of children's records that an infant in the 1L classroom did not have a current feeding plan on file.

POI (Plan of Improvement)

The Center Director will develop and implement a plan to obtain and post the completed feeding plan as part of the enrollment process and to have parents update the plans on a regular basis that will include center staff involved with enrollment and those working in the infant classrooms.

Correction Deadline: 2/24/2020

Technical Assistance

591-1-1.15(3) - The consultant observed that there was no thermometer in the 1L classroom. The consultant advised that a thermometer should be placed in the refrigerator to ensure the breast milk and formula is stored at 40 degrees Fahrenheit or less.

Correction Deadline: 2/24/2020

591-1-1-.18 Kitchen Operations

Technical Assistance

Comment

Kitchen appears clean and well organized.

Technical Assistance

591-1-1-.18(5) - Please ensure that you add a thermometer in the freezer to monitor the temperature.

Correction Deadline: 2/24/2020

	Health and Hygiene
591-1-110 Diapering Areas & Practices(CR)	Met
Comment	
Staff state proper knowledge of diapering procedures.	
591-1-117 Hygiene(CR)	Met
Comment	
Discussed proper hand washing observed throughout the center with staff.	
591-1-120 Medications(CR)	Met
Comment	
The Provider currently does not dispense/administer medication.	
	Safety
591-1-105 Animals	Met
Comment	
Center does not keep animals on premises.	
591-1-1.11 Discipline(CR)	Met
Comment	
Staff were observed to maintain a positive learning environment on this date. C appropriate redirection and disciple techniques with the infant staff.	consultant discussed age-

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

A current/completed inspection was observed for all vehicles used in transporting children this date.

Comment

Complete documentation of transportation observed.

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

Finding

591-1-1-.30(1)(a) requires a crib that is safety approved in compliance with Consumer Product Safety Commission (CPSC) and American Society of Testing and Materials International (ASTM) safety standards be provided for each infant. It was determined based on the consultant's observation that in the 1L classroom three cribs were not in compliance with Consumer Product Safety Commission (CPSC) and American Society of Testing and Materials International (ASTM) safety standards be provided for each infant. It was determined based on the consultant's observation that in the 1L classroom three cribs were not in compliance with Consumer Product Safety Commission (CPSC) and American Society of Testing and Materials International (ASTM) safety standards in that two cribs had a manufacture date of October 30, 2010 and there was one crib with no compliance information available. The cribs were the arched metal portable cribs.

POI (Plan of Improvement)

The Center removed the cribs from the classroom while the consultant was on site. They will provide a crib that is safety approved in compliance with CPSC and ASTM safety standards for each infant.

Correction Deadline: 3/5/2020

Records Reviewed: 5 Records with Missing/Incomplete Components: 3 Staff # 1 Not Met Date of Hire: 03/03/2014 "Missing/Incomplete Components" .14(2)-CPR missing, 14(2)-First Aid Missing, 33(4)-Food Prep Training Missing 4 hrs. Staff # 2 Not Met Date of Hire: 03/03/2014 "Missing/Incomplete Components" .14(2)-CPR missing, 14(2)-First Aid Missing Staff # 3 Met Date of Hire: 08/20/2018 Staff # 4 Met Staff # 5 Not Met Date of Hire: 12/03/2019 "Missing/Incomplete Components" .09-Criminal Records Check Missing

Georgia Department of Early Care and Learning v1.03

Sleeping & Resting Equipment

Staff Records

Met

Met

Not Met

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

Not Met

Finding

591-1-1-.09(1)(a) requires that a Center ensure that every actual and potential Director, Employee and Provisional Employee of a Child Care Learning Center submit both a Records Check Application to the Department and Fingerprints to an authorized fingerprinting site. It was determined based on a review of staff records that staff member #11 was hired on December 3, 2019 and did not submit both a Records Check Application to the Department to the Department and Fingerprints to an authorized fingerprinting site.

POI (Plan of Improvement)

IMMEDIATE CORRECTION - The Center will ensure that every actual and potential Director, Employee and Provisional Employee of a Child Care Learning Center submit both a Records Check Application to the Department and Fingerprints to an authorized fingerprinting site as required. The program's owner or an officer/member of the corporation must view the A to Z Background Check video units pertaining to this records check rule and return the signed affidavit within one week from this visit date. The Center will ensure the CRC rules are maintained.

Correction Deadline: 2/24/2020

Finding

591-1-1-.09(1)(c) requires the Center to ensure that every Employee has a valid and current satisfactory Comprehensive Records Check Determination on file prior to being present at the Center while any child is present for care or before an individual age 17 or older resides in the Center. The Comprehensive Records Check Determination must have a Records Check Clearance Date that is no older than the preceding 12 months of the hire date; provided, however, if the Employee has had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, a new satisfactory Comprehensive Records Check Determination is required. It was determined based on a review of staff records that staff member #11 was hired on December 3, 2019 and did not have a valid and current satisfactory Comprehensive Records Check Determination on file prior to being present at the Center. The staff was observed in the 1L (infant) classroom doing floor play activities with the children.

POI (Plan of Improvement)

IMMEDIATE CORRECTION - The Center will ensure that every Employee has a valid and current satisfactory Comprehensive Records Check Determination on file prior to being present at the Center while any child is present for care or before an individual age 17 or older resides in the Center. The Comprehensive Records Check Determination must have a Records Check Clearance Date that is no older than the preceding 12 months of the hire date; provided, however, if the Employee has had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, a new satisfactory Comprehensive Records Check Determination is required. The program's owner or an officer/member of the corporation must view the A to Z Background Check video units pertaining to this records check rule and return the signed affidavit within one week from this visit date. The center will ensure the CRC rules are maintained.

Correction Deadline: 2/24/2020

Correction Deadline: 10/9/2019

Corrected on 2/24/2020 .09(1)(j) - Previous citation corrected and staff member is no longer employed at the center. 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 a review of staff records that the director did not have current 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: 3/25/2020

Finding

591-1-1-.14(1)(a) requires, in a Center that provides transportation, that either the driver or another Staff person present on the vehicle have current evidence of successful completion of a biennial training program in cardiopulmonary resuscitation (CPR) and a triennial training program in first aid offered by certified or licensed health care professionals or trainers and which dealt with the provision of emergency care to infants and children. It was determined based on a review of staff records that the driver of the vehicle did not have current CPR and First Aid training.

POI (Plan of Improvement)

The Center will verify proof of CPR/1st aid training and schedule Staff so that there is always a staff person on the vehicle with this training.

Correction Deadline: 2/24/2020

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 a review of staff records that staff #7 was hired on September 18, 2019 and did not have evidence that the CPR and First Aid training was completed within the first 90 (ninety) days of hire.

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: 3/25/2020

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 the consultant's observation that the first aid kit on the vehicle used for transportation was missing gauze, adhesive tape, band-aids, tweezers, and a cold pack, first aid instruction manual and the antiseptic cleaner 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: 3/5/2020

591-1-1-.33 Staff Training

Finding

591-1-1-.33(4) requires within the first year of employment, the Director and person with primary responsibility for food preparation shall have four clock hours of training in food nutrition planning, preparation, serving, proper dish washing and food storage. It was determined based on a review of staff records that the director did not have evidence that they completed the 4 (four) hour Food Prep training.

Not Met

POI (Plan of Improvement)

The Center will schedule food preparation training, as required, and follow up to ensure the training is completed.

Correction Deadline: 3/25/2020

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

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