



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: 4/13/2022 **VisitType:** Licensing Study **Arrival:** 11:15 AM **Departure:** 1:15 PM

CCLC-51941

Kidzroom University Childcare LLC

1833 South Stone Mountain Lithonia Road Lithonia, GA 30058 DeKalb County
 (678) 752-8698 kidzroomuniversity@gmail.com

Mailing Address
 Same

Regional Consultant

Lisa Pitts

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 Fax: (706) 314-7903
 lisa.prather@decal.ga.gov

Joint with: Crystal Miller

Quality Rated: ★

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.
04/13/2022	Licensing Study	Good Standing	
07/08/2021	Monitoring Visit	Good Standing	
03/01/2021	Licensing Study	Good Standing	

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	Rm. B- 2yrs	Two Year Olds	1	4	C	9	C	NA	NA	Transitioning
Main	Rm. C- 3yrs	Three Year Olds	1	3	C	10	C	NA	NA	Transitioning
Main	Rm. D- PreK		0	0	C	10	C	NA	NA	
Main	Rm. E- 5yrs		0	0	C	10	C	NA	NA	
Main	Rm. F- 5yrs-6yrs		0	0	C	10	C	NA	NA	
Main	Rm. H- 7yrs-8yrs		0	0	C	10	C	NA	NA	
Main	Rm. I- 8yrs-9yrs		0	0	C	10	C	NA	NA	
Main	Rm. J- 9yrs-12yrs		0	0	C	10	C	NA	NA	
Main	Rm.A- 18mth - 24mth	Infants	2	5	C	9	C	NA	NA	Floor Play
Main	Rm.G- 6yrs-7yrs		0	0	C	10	C	NA	NA	
Total Capacity @35 sq. ft.: 98					Total Capacity @25 sq. ft.: 0					
Total # Children this Date: 12			Total Capacity @35 sq. ft.: 98			Total Capacity @25 sq. ft.: 0				

Building	Playground	Playground Occupancy	Playground Compliance
Main	A- 18mth- 4yrs (grassy area)	23	C
Main	Playgd- 4yrs-12yrs (back)	151	C

Comments

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.dec.state.ga.us/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@dec.state.ga.us for more information. Free technical 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 1/2 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)

Adriane Martin, Program Official

Date

Lisa Pitts, Consultant

Date

Crystal Miller, Consultant

Date



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Findings Report

Date: 4/13/2022 VisitType: Licensing Study Arrival: 11:15 AM Departure: 1:15 PM

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The following information is associated with a Licensing Study:

Activities and Equipment

591-1-1-.03 Activities

Not Met

Finding

591-1-1-.03(1) requires the Center to provide a daily planned program of varied and developmentally appropriate activities to promote social, emotional, physical, cognitive, language and literacy growth. Center Staff shall use a variety of teaching methods to accommodate the needs of the children's different learning styles. It was determined based on observation that two out of the three classrooms did not have lesson plans for the consultant to review.

POI (Plan of Improvement)

The Center will plan a program that includes a variety of developmentally appropriate activities that are provided daily, train Staff to use various teaching methods, and monitor both.

Correction Deadline: 4/13/2022

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

Not Met

Finding

591-1-1-.12(4) requires that equipment and furniture is secured if it is of a weight or mass that could cause injury from tipping, falling, or being pulled or pushed over. It was determined based on observation that three classrooms did not have the shelves anchored to prevent a possible injury.

POI (Plan of Improvement)

The Center will ensure that the identified equipment or furniture and any other such existing or future items are secured adequately and will have a system for checking these for stability.

Correction Deadline: 4/13/2022

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

Met

Comment

No pool observed during visit walk through.

Children's Records

Records Reviewed: 5

Records with Missing/Incomplete Components: 0

Child # 1	Met
Child # 2	Met
Child # 3	Met
Child # 4	Met
Child # 5	Met

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 review of records that center staff did not have evidence of a complete file for four of four records reviewed. It was determined based consultant's review that five out of the five children's records were not uploaded for the consultant to 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: 4/18/2022

Recited on 4/13/2022

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 the requested sign in and out sheets for the week of April 11th through April 15th were not uploaded for the consultant to review.

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: 4/13/2022

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)

Technical Assistance

Technical Assistance

591-1-1-.25(11) - The consultant and director discussed repairing crack tiles throughout the center.

Correction Deadline: 5/13/2022

Technical Assistance

591-1-1-.25(8) - The consultant and director discussed having all electrical outlets covered.

Correction Deadline: 4/13/2022

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

Not Met

Technical Assistance

591-1-1-.26 - The consultant and director discussed maintenance of resilient surface. Please fluff and redistribute.

Finding

591-1-1-.26(4) requires that playgrounds be protected from traffic or other hazards by a (4) four foot high fence or other barrier approved by this Department. Fencing material shall not present a hazard to children and shall be maintained so as to prevent children from leaving the playground area by any means other than through an approved access route. Fence gates shall be kept closed except when persons are entering or exiting the area. It was determined based on the consultant's observation that the fences had the following issues:

- The link and chain fence located on the front left had a gap measuring at 12 and half inches wide.
- The link and chain fence located on the middle right had protruding screws measuring over two threads.
- The wooden fence located on the back of the play area had a missing board causing a gap measuring at four and a half inches wide.

The wooden fence located on the back of the play area had nails protruding inward along the bottom of the fence.

POI (Plan of Improvement)

The Center will routinely check the fence to determine if it is in good repair and remains at least 4 feet high, and will repair any hazards. The Center will train Staff to identify and report any fence hazards and to keep the fence gates closed when not in use.

Correction Deadline: 4/13/2022

Technical Assistance

591-1-1-.26(6) - The consultant and director discussed to call the electrical company to come out and connect the loose wiring that was laying near the electrical pole.

Correction Deadline: 4/23/2022

Food Service

591-1-1-.15 Food Service & Nutrition

Not Met

Technical Assistance

591-1-1-.15 - The consultant and director discussed to ensure that bottles are covered and fully labeled with child's full name.

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 that there was not an infant feeding plan uploaded for the consultant to review.

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: 4/13/2022

Finding

591-1-1-.15(5) requires that the Center provide a menu listing all meals and snacks to be served during the current week except for School-age Centers where the food may be provided by the Parent(s) by agreement between the School-age Center and the Parent(s). Substitutions shall be recorded on the posted menu and menus shall be retained at the Center for six (6) months. It was determined based on the consultant's observation that the menus requested for the week of April 11th through April 15th were not uploaded for the consultant to review.

POI (Plan of Improvement)

The Center will list all of the current week's meals and snacks and all substitutions on the menu and keep past menus on file for six months and will implement a system to monitor this.

Correction Deadline: 4/13/2022

591-1-1-.18 Kitchen Operations

Not Met

Finding

591-1-1-.18(7) requires each Center to have a designated space for storage of food and kitchen items and that the area be kept clean and free of accumulation of dust, dirt, food particles and grease deposits. It was determined based on the consultant's observation that the refrigerator was not properly clean in that brown residue was observed at the bottom of the refrigerator.

POI (Plan of Improvement)

The Center will designate an area for the storage of these items, will thoroughly clean the space, if needed, develop and implement a plan to train Staff, as needed, and inspect the storage area daily.

Correction Deadline: 4/13/2022

Technical Assistance

591-1-1-.18(8) - The consultant and director discussed that the department requires that containers of food be stored above the floor on clean surfaces protected from splash and other contamination. Containers for food storage other than the original container or package in which the food was obtained shall be impervious and non-absorbent, have tight-fitting lids or covers and labeled as to contents.

Correction Deadline: 4/13/2022

Health and Hygiene

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

Please ensure lids remain on trash containing organic waste.

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

Met

Comment

The Provider currently does not dispense/administer medication.

Policies and Procedures

Finding

591-1-1-.21(1)(p) requires the Center to have a 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. It was determined based on the consultant's review that the requested emergency readiness plan was not uploaded for the consultant to review.

POI (Plan of Improvement)

The Center will write or revise an emergency plan that includes all of the required items.

Correction Deadline: 4/18/2022

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 observation that the center did not conduct drills for the following:

- Fire drills for February and March.
- Smoke detector for January through March.
- Tornado drills for January through March.
- Fire Extinguisher for January through March.

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: 4/18/2022

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)

Met

Correction Deadline: 8/31/2021

Corrected on 4/13/2022

.30(1)(b)3 - Previous citations corrected. Sheets were observed on this date.

Correction Deadline: 8/31/2021

Corrected on 4/13/2022

.30(1)(b)4 - Previous citations corrected. Light coverings were observed on this date.

Records Reviewed: 6

Records with Missing/Incomplete Components: 6

<p>Staff # 1</p> <p><u>"Missing/Incomplete Components"</u></p> <p>.24(1)-Evidence of Orientation Missing,.14(2)-CPR missing,.14(2)-First Aid Missing,.33(3)-Health & Safety Certificate</p>	<p>Not Met</p>
<p>Staff # 2</p> <p><u>"Missing/Incomplete Components"</u></p> <p>.24(1)-Evidence of Orientation Missing,.14(2)-CPR missing,.14(2)-First Aid Missing,.33(3)-Health & Safety Certificate,.33(5)-10 Hrs. Annual Training</p>	<p>Not Met</p>
<p>Staff # 3</p> <p><u>"Missing/Incomplete Components"</u></p> <p>.14(2)-CPR missing,.14(2)-First Aid Missing,.33(3)-Health & Safety Certificate,.31(2)(b)2.-Staff Qualifications-Education Missing,.24(1)-Evidence of Orientation Missing</p>	<p>Not Met</p>
<p>Staff # 4</p> <p><u>"Missing/Incomplete Components"</u></p> <p>.14(2)-CPR missing,.14(2)-First Aid Missing,.33(3)-Health & Safety Certificate,.31(2)(b)2.-Staff Qualifications-Education Missing,.33(5)-10 Hrs. Annual Training,.33(4)-Food Prep Training Missing 4 hrs.</p>	<p>Not Met</p>
<p>Staff # 5</p> <p><u>"Missing/Incomplete Components"</u></p> <p>.09-Criminal Records Check Missing</p>	<p>Not Met</p>
<p>Staff # 6</p> <p><u>"Missing/Incomplete Components"</u></p> <p>.24(1)-Evidence of Orientation Missing,.14(2)-CPR missing,.14(2)-First Aid Missing,.33(3)-Health & Safety Certificate,.31(2)(b)2.-Staff Qualifications-Education Missing</p>	<p>Not Met</p>

Staff Credentials Reviewed: 1

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 observation that an independent contractor ,working as a therapist but work in the center five days a week did not submit finger prints to the department as required.

POI (Plan of Improvement)

IMMEDIATE CORRECTION - The Center will make sure all independent contractors submit finger print to 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 to ensure the CRC rules are maintained.

Correction Deadline: 4/13/2022

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 observation that an independent contractor ,working as a therapist but work in the center five days a week did not have a valid satisfactory Comprehensive Records Check Determination on file for the consultant to review.

POI (Plan of Improvement)

IMMEDIATE CORRECTION - The Center will [] 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. 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 [] to ensure the CRC rules are maintained.

Correction Deadline: 4/13/2022

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 the center did not upload CPR and first aid certification for the staff for the consultant to review.

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: 5/13/2022

591-1-1-.33 Staff Training**Not Met****Finding**

591-1-1-.33(1) requires all Employees and Provisional Employees to receive Initial Center orientation prior to assignment to children or task. It was determined based on the consultant's review that center staff did not uploaded staff's orientation documents for the consultant to review.

POI (Plan of Improvement)

The Center will develop and provide orientation for all new Staff prior to their staff's assignment to children or task.

Correction Deadline: 4/13/2022

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 the consultant's review that center staff did not upload health and safety training certificates for the consultant to 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: 5/13/2022

Finding

91-1-1-.33(5) requires that every calendar year after the first year of employment, all supervisory and caregiver Personnel, except independent contractors, Students-in-Training and volunteers shall attend ten (10) clock hours of diverse training which is task-focused in on-going health, safety and early childhood or child development related topics and which is offered by an accredited college, university or vocational program or other Department-approved source. The annual ten (10) clock hours of training shall be chosen from the following fields: child development, including discipline, guidance, nutrition, injury control and safety; health, including sanitation, disease control, cleanliness, detection and disposition of illness; child abuse and neglect, including identification and reporting, and meeting the needs of abused and/or neglected children; and business related topics, including parental communication, recordkeeping, etc.; provided however that such business related training shall be limited to no more than two (2) of the required ten (10) clock hours of training. Records of completion of such training shall be maintained, as required by these rules. It was determined based on the consultant's review that the center staff did not upload documentation of center staff completing ten hours of annual training for the year of 2021 for the consultant to review.

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: 5/13/2022

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 the consultant's review that the center staff did not upload the director's credential for the consultant to 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: 4/13/2022

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 the consultant's review that lead teacher's credentials were not uploaded for the consultant to review.

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: 4/13/2022

Staffing and Supervision

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

Comment

Center observed to maintain appropriate staff:child ratios.

Correction Deadline: 7/8/2021

Corrected on 4/13/2022

.32(4) - Previous citations corrected. All children were housed in appropriate age groups.

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

Comment

Adequate supervision observed on this date.