

Date: 11/20/2018 VisitType: Monitoring Visit

Arrival: 12:40 PM

Departure: 2:15 PM

Regional Consultant Chrische Walker

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FR-000007262

Garcia, Noemicia A

2624 Old Norcross Rd Tucker, GA 30084 DeKalb County (404) 396-2557 noemiciagarcia@yahoo.com

Mailing Address





| | | | 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 | | | | |
|------------|------------------|---------------|--|--|--|--|--|
| 11/20/2018 | Monitoring Visit | | standing, support, and deficient. | | | | |
| 04/05/2018 | Licensing Study | Good Standing | Good Standing - Program is demonstrating an acceptable level of performance in meeting the rules. | | | | |
| 10/05/2017 | Monitoring Visit | 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

| Age Ranges | Children Present | Child For Pay | CAPS | Not for Pay | Provider Children |
|---|------------------|---------------|------|-------------|-------------------|
| Infant (0-11 mos) | 1 | 1 | 0 | 0 | 0 |
| 1 & 2 Years | 3 | 5 | 0 | 0 | 0 |
| 3 & 4 Years | 0 | 0 | 0 | 0 | 0 |
| School Age(5+) Years | 0 | 0 | 0 | 0 | 0 |
| Total Under 13 Years | 4 | 6 | 0 | 0 | 0 |
| Total Under 18 Years | 4 | | - | | |
| hildren Present: 4 Total Children: 6 | | | | | |
| Caregivers/Helpers Present: 2 Total Caregivers/Helpers: 5 | | | | | |

<u>Comments</u> The purpose of today's visit was to conduct a Monitoring Visit and to follow up from the previous study on April 5, 2018.

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, <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, 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@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>

Noemicia Garcia, Program Official

Date

Chrische Walker, Consultant

Date

| | 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: 11/20/2018 VisitType: Monitoring V | /isit Arrival: | 12:40 PM | Departure: | 2:15 PM | | | |
| FR-000007262 | | - | nal Consulta | nt | | | |
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| 2624 Old Norcross Rd Tucker, GA 30084 De (404) 396-2557 noemiciagarcia@yahoo.com | Kalb County | Fax: (| e: (770) 359-51 678) 891-5618 he.walker@de | 5 | | | |
| Mailing Address Same | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| The following information is associated wit | h a Monitoring Visit: | A | | | | | |
| | | Activiti | es and Ed | quipment | | | |
| 200.2.2.42 Equipment and Supplies(CD) | | | | Met | | | |
| 290-2-312 Equipment and Supplies(CR) Comment | | | | INIEL | | | |
| A variety of equipment and toys were observe | d. | | | | | | |
| 290-2-319 Infant-Sleeping Safety Requirer | nents(CR) | | | Met | | | |
| Comment Discussed SIDS and infant sleeping position. | | | | | | | |
| Comment Pleasant naptime environment observed. | | | | | | | |
| 290-2-307 Swimming Pools & Water-related | d Activities(CR) | | | N/A | | | |
| Comment | | | | | | | |
| Home does not provide swimming activities. | | | | | | | |
| | | (| Children's | Records | | | |
| | | | | | | | |
| Records Reviewed: 4 | Records wi | th Missing/Inc | omplete Com | ponents: 0 | | | |
| Child # 1 | | Met | | | | | |
| Child # 2 | | Met | | | | | |
| Child # 3 | | Met | | | | | |
| Child # 4 | | Met | | | | | |

290-2-3-.08 Children's Records

Technical Assistance

290-2-3-.08(1) - Please ensure that new enrolled children's forms are completed with the child's physician's' information.

Correction Deadline: 11/20/2018

Technical Assistance

290-2-3-.08(2) - Please ensure to maintain current and updated immunization records for the children.

Correction Deadline: 11/20/2018

| | Facility |
|---|-------------------------|
| | |
| 290-2-311 Physical Plant - Safe Environment(CR) | Me |
| Comment | |
| An operable and appropriately sized fire extinguisher was observed in the home this d | late. |
| 290-2-313 Physical Plant-Structural/Mechanical(CR) | Met |
| Comment | |
| The Home appears clean and free from hazards. | |
| 290-2-313 Playgrounds(CR) | Met |
| Comment | |
| Discussed maintenance of resilient surface. Please fluff and redistribute. | |
| | alth and Hygiene |
| | aith and nygiene |
| | |
| 290-2-311 Children's Health and Hygiene(CR) | Met |
| Comment | |
| The provider stated proper knowledge of hand washing procedures. | |
| 290-2-311 Diapering Areas & Practices(CR) | Met |
| | |
| Comment The provider stated appropriate diapering procedures. | |
| The provider stated appropriate diapening procedures. | |
| 290-2-311 Medications(CR) | Met |
| | |
| Correction Deadline: 4/5/2018 | |
| Corrected on 11/20/2018 | |
| .11(1)(d) - The previous citation has been corrected on this date. The consultant | |
| medication on site on this date. The provider stated that medication is not being date. | administered as of this |
| | |
| | Licensure |
| | |
| 290-2-304 Application Requirements(CR) | Met |
| | |

Appropriate number of children observed in Family Child Care Learning Home this date. The consultant observed four unrelated children for compensation on this date.

Safety and Discipline

290-2-3-.11 Discipline(CR)

Comment

Pleasant interactions observed between the provider and children in care.

290-2-3-.11 Transportation(CR)

Comment

The provider does not provide routine transportation.

290-2-3-.21 Criminal Records and Comprehensive Background Checks(CR)

Comment

Provider provided one file for employees hired since last visit.

290-2-3-.07 Staff Qualifications(CR)

Comment

Staff observed to be compliant with applicable laws and regulations.

Staff:Child Ratios and Supervision

290-2-3-.07 Staff:Child Ratios(CR)

Comment

Appropriate ratios were observed on this date.

290-2-3-.07 Supervision(CR)

Comment

The Provider was observed directly supervising and being attentive to the needs of the children.

N/A

Staff Records

Met

Met

Met

Met