

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

Cover Sheet

Date: 12/2/2021 Arrival: 7:00 AM Departure: 11:30 AM VisitType: Complaint Investigation &

Licensing Study

CCLC-39314

Little Folks Farm & Childcare

1392 GA Hwy. 56 East Lyons, GA 30436 Toombs County (912) 565-0262 lam4_@hotmail.com

Support

Good Standing

Good Standing

Mailing Address 1378 Ga Hwy 56 E, 10 Lyons, GA 30436

Quality Rated: *

12/02/2021

06/07/2021

12/02/2020



Complaint

Investigation & Licensing Study

Monitoring Visit

Licensing Study



Compliance Zone Designation

Regional Consultant

Connie Boatright

Phone: (912) 544-9701 Fax: (912) 544-9700

connie.boatright@decal.ga.gov

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.
Good Standing - Program is demonstrating an acceptable level of performance in meeting

the rules. Program performance is demonstrating a need for improvement in meeting

rules.

Support 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
Building 2	Chickens		0	0	С	10	С	NA	NA	Not In Use
Building 2	Goats		0	0	С	35	С	NA	NA	Not In Use
		Total Capacity @35 sq. ft.: 45	5		Total C ft.: 86	apacity @	25 sq.			
Main	Donkies - Left	Infants	1	5	С	12	С	17	С	Nap,Free Play,Floor Play
Main	Pigs - Right	Two Year Olds	1	10	С	13	С	NA	NA	Centers
Main	Ponies - Middle	Three Year Olds and Four Year Olds	1	15	С	16	С	NA	NA	Art
		Total Capacity @35 sq. ft.: 41			Total C ft.: 86	apacity @	25 sq.			
Total # C	hildren this Date: 30	Total Capacity @35 sq. ft.: 86	6		Total C ft.: 86	apacity @	25 sq.			

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground	38	C

Comments

Due to COVID - 19 no in person visit was completed for the AR and the VV. The AR was initiated on 11-24-2021 with an email sent to the provider. The AR was reviewed on 12-02-2021 and additional documents were requested via email. The AR was reviewed on 12-06-2021 and additional documents were requested a second time. The consultant completed an in person visit on 12-09-2021 and additional documents were requested a third time. During the in person visit, the center provider stated no medication is administered, no field trips or routine transportation is provided. The provider stated there is a total of 4 staff members and two new staff have been hired since the consultant's last visit. The AR was reviewed on 12-14-2021 and some of the previous requested documents had not been received and other were not legible. A formal plan of improvement was left with the provider with a due date of 12-31-2021.

Plan of Improvement: To Be Submitted 12/31/2021

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 New Deadlines:

Due to the ongoing COVID restrictions, the deadline to become Quality Rated for programs who want to continue to receive Childcare and Parent Services (CAPS), has been extended to at least December 31, 2021.

Get started today! Sign up by completing a short online application: https://qualityrated.decal.ga.gov/
Request free technical assistance to help you earn your star rating by contacting the Quality Rated help desk at 855-800-7747 or qualityrated@decal.ga.gov

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.

a Williams, Program Official	Date	Connie Boatright, Consultant	Date



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Findings Report

Date: 12/2/2021 VisitType: Complaint Investigation & Arrival: 7:00 AM Departure: 11:30 AM

Licensing Study

CCLC-39314

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The following information is associated with a Licensing Study Visit:

Activities and Equipment

591-1-1-.03 Activities Met

Comment

The consultant observed age appropriate activities through out the center.

Correction Deadline: 12/2/2021

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

Comment

Toys and equipment were observed to be clean and in good repair.

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: 1

Child # 1 Not Met

"Missing/Incomplete Components"

.08(1)-Parent Names, Work Numbers

591-1-108 Children's Records	Not Met
Finding 591-1-108(1) requires the Center Staff to maintain a file for each child while such child year after that child is no longer enrolled. In order for the file to be complete, the file sha child's name, birth date, sex, address, living arrangement, name of school if applicable; home and work addresses, and home and work telephone numbers; name(s) and address whom the child may be released including address, telephone numbers, relationship to and other identifying information; name(s) and telephone number(s) of person(s) to conwhen the Parent cannot be reached; name and telephone number of the child's primary and a statement regarding known allergies, physical problems, mental health disorders, developmental disabilities which limit the child's participation in the program. It was deterview of records that only one legible enrollment form was submitted when five enrollm requested on November 24, 2021, December 2, 2021, December 6, 2021 and December child's file that was submitted did not have the mother and father's work address and we required.	all contain the following: names of both Parents, esses of the person(s) to child and to Parent(s), tact in emergencies a source of health care; mental retardation or termined based on the ment forms were er 19, 2021. The one
Correction Deadline: 12/31/2021	
Technical Assistance 591-1-108(6) - The center will maintain records of a child's daily arrival and departure preceding months that the Parent or person(s) authorized by the Parent documents, in format, each time the Parent or authorized person drops off and picks up the child. The include at least the date, the child's name, the arrival and departure times, and the sign Parent or authorized person at the time of arrival and departure. These records shall be Department in printed or written form upon request. On December 3, 2021 twenty-two cand sixteen children were signed out.	written or electronic documentation shall ature or initials of the made available to the
Correction Deadline: 12/2/2021	
	Facility

591-1-1-.06 Bathrooms Met

Comment

Bathrooms observed to be clean and well maintained.

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

Met

Correction Deadline: 6/7/2021

Corrected on 12/2/2021

.19(1) - The previous citation was observed to be corrected during this visit. All classrooms in use were in compliance with policy for staff / child ratio.

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

Not Met

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 observation that the bathroom located on the left side of the diaper changing table had a toilet brush stored beside of the toilet and accessible to the children in care. Additionally, there was a bottle of Scrubbing Bubbles Bath Room Grime Fighter stored on top of the tank of the toilet, labeled Keep Out of Reach of Children and accessible to the children in care.

Correction Deadline: 12/20/2021

Recited on 12/2/2021

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

Met

Correction Deadline: 6/17/2021

Corrected on 12/2/2021

.26(6) - The previous citation was observed to be corrected during this virtual visit. The provider stated the beige sand box and two green dinosaur rockers have been removed from the playground. The consultant observed that these three items had been removed from he playground and were not accessible to the children.

Food Service

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

Met

Comment

Center menu meets USDA guidelines.

Comment

CACFP Meal Pattern Requirements effective October 1, 2017 will be implemented October 1, 2018: 3 Components for breakfast: Grains, Vegetables, Fruits or both, Milk

5 Components for lunch – Grains, Meat/Meat alternates, Fruits, Vegetable, and Milk OR Grains, Meat/Meat alternates, 2 different types of vegetables, and Milk

2 of 5 Components for snack

Provided Updated CACFP Infant Meal pattern and Child/Adult Meal pattern flyers.

The Crediting Handbook for the CACFP can be located on DECAL and USDA's website:

DECAL

http://decal.ga.gov/CACFP/Handbook.aspx

USDA

http://www.fns.usda.gov/cacfp/cacfp-handbooks

591-1-1-.18 Kitchen Operations

Met

Comment

Kitchen appears clean and well organized.

Health and Hygiene
Met
Met
Met
licies and Procedures

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

Not Met

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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 review of documents that the emergency response plan was incomplete.

Correction Deadline: 12/20/2021		

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 a review of records that the center did not provide documentation of completed drills for fire, tornado, and other emergency situations. The documentation was requested as part of the annual review and was requested on November 24, 2021, December 2, 2021, December 6, 2021, and December 9, 2021.

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 review of documents received that a fire drill and tornado drill log was not produced as requested on November 24, 2021, December 2, 2021, December 6, 2021 and December 9, 2021. Correction Deadline: 12/7/2021 591-1-1-.27 Posted Notices Met Comment Observed all required posted notices. 591-1-1-.29 Required Reporting Met Comment Discussed requirements for uploading documents and submitting annual reports as required. Safety 591-1-1-.05 Animals Met Comment Animals maintained clean and appropriately caged. 591-1-1-.11 Discipline(CR) Met Comment Age-appropriate discussion and/or redirection observed. 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

Comment

Discussed SIDS and infant sleeping position.

Correction Deadline: 12/7/2021

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.

Staff Records

Records Reviewed: 6

Records with Missing/Incomplete Components: 6

Staff # 1 Not Met

Date of Hire: 10/18/2021

"Missing/Incomplete Components"

.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

Staff # 2 Not Met

Date of Hire: 06/01/2021

"Missing/Incomplete Components"

.09-Criminal Records Check Dissatisfied

Staff # 3 Not Met

Date of Hire: 09/13/2021

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing,.31(2)(b)2.-Staff Qualifications-Education Missing,.14(2)-First Aid Missing,.14(2)-CPR missing,.33(5)-10 Hrs. Annual Training

Staff # 4 Not Met

Date of Hire: 06/01/2021

"Missing/Incomplete Components"

.24(1)-Evidence of Orientation Missing,.31(2)(b)2.-Staff Qualifications-Education Missing,.33(3)-Health & Safety Certificate,.14(2)-First Aid Missing,.14(2)-CPR missing,.33(5)-10 Hrs. Annual Training

Staff # 5 Not Met

"Missing/Incomplete Components"

.09-Criminal Records Check Missing

Staff # 6 Not Met

Date of Hire: 06/06/1992

"Missing/Incomplete Components"

.33(3)-Health & Safety Certificate, .14(2)-First Aid Missing, .14(2)-CPR missing

Staff Credentials Reviewed: 5

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

Met

Comment

Based upon the provider's statement and the CCLC Staff Form, two new staff have been hired since the consultant's last visit.

Correction Deadline: 6/7/2021

Corrected on 12/2/2021

.09(1)(a) - The previous citation was observed to be corrected. Four of four reported staff have a Satisfactory Comprehensive determination letters on file.

Correction Deadline: 6/7/2021

Corrected on 12/2/2021

.09(1)(c) - The previous citation was observed to be corrected. Four of four reported staff have a Satisfactory Comprehensive determination letters on file.

591-1-1-.14 First Aid & CPR

Not Met

Finding

591-1-1-1.14(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 review of documents produced that four of four staff had no proof of current CPR / First Aid on file.

Correction Deadline: 12/20/2021		

Recited on 12/2/2021

591-1-1-.24 Personnel Records

Technical Assistance

Technical Assistance

591-1-1-.24(1) - The center will 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.

Correction Deadline: 12/7/2021

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 review of all staff files that three of four staff have no proof of completion of center orientation prior to assignment to children or task as required.

Correction Deadline: 12/31/2021
Recited on 12/2/2021
Finding 591-1-133(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 a review of records that two of four staff members hired on June 1, 2021, and September 13, 2021 did not have proof of completion of Health and Safety Training as required.
Correction Deadline: 12/31/2021
Recited on 12/2/2021
Correction Deadline: 6/17/2021

Corrected on 12/2/2021

.33(4) - The previous citation was observed to be corrected. The center director / cook produced a training certificate for the required four clock hours of training in food nutrition planning, preparation, serving, proper dish washing and food storage as required.

Finding 91-1-133(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 a review of records that two of four staff members employed over 90 days had no proof of completion of annual training hours for the 2020 calendar year. Documentation of the training was requested on November 24, 2021, December 6, 2021, and December 9, 2021.
2021, December 2, 2021, December 6, 2021, and December 6, 2021.
Correction Deadline: 1/1/2022
591-1-131 Staff(CR) Not Met
Finding 591-1-131(2)(b)2. requires teachers and lead caregivers to meet minimum academic requirements and qualifying experience at the time of employment. It was determined based on review of all staff files that a lead teacher hired on June 1, 2021 did not have an educational credential as required and had not enrolled in a program to obtain a credential within six months.
Correction Deadline: 12/20/2021
Recited on 12/2/2021
Finding 591-1-131(2)(b)3.(ii)(I)-(VIII) requires the Center develop a written plan for newly hired teacher's who do not possess the educational credential or degree listed in 591-1-131(2)(b)2.(i) through (xii). It was determined based on review of all staff files that two lead teachers hired on September 13, 2021 and October 18, 2021 did not have a written plan to obtain educational credentials.

Correction Deadline: 12/20/2021

Recited on 12/2/2021

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

Adequate supervision observed on this date.