S T A	om 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					Cov	er Sh	eet				
Date: 5	5/10/2022	VisitTy	/pe: Licensing	g Study		Arri	val: 2	2:40 PM	I	Departu	re: 4:0	00 PM
CCLC-5	51060				Regional Consultant							
Tiny Tr	easures Le	arning A	Academy		Haley Carwile							
			oro, GA 30458 jes@yahoo.co	Bulloch County Phone: (229) 317-9868 Pm Fax: (229) 317-9865 haley.carwile@decal.ga.gov					gov			
Mailing A Same	ddress											
Quality Ra	ited: ★ 🕚	*										
<u>Co</u>									onth monitoring			
05/10/2022	Licensing	Study	Good Standing			and deficie		ann ann 5a	lety fules	. The unree	e complial	nce zones are good
11/30/2021	Monitoring	l Visit	Good Standing	Good Star	nding -	Program is the rules.	demons	strating an	acceptab	le level of	performar	nce in meeting
06/30/2021	Licensing	Study	Good Standing	Support - Program performance is demonstrating a need for improvement in meeting				ement in meeting				
			I	Deficient	-	rules. Program is the rules.	not der	monstrating	g an acce	ptable lev	el of perfo	rmance in meeting
Ratios/Li	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		One Year Olds		1	6	С	6	С	NA	NA	Transitioning,Na p
Main	D		Infanta and One)	(aar Olda	4	7	<u> </u>	10	C	NIA	NIA	Floor

										μ
Main	В	Infants and One Year Olds	1	7	С	12	С	NA	NA	Floor Play,Feeding
Main	С	Three Year Olds and Four Year Olds and Five Year Olds and Six Year Olds and Over	2	22	С	22	С	NA	NA	Snack,Transitioni ng
Main	D	Two Year Olds	1	6	С	9	С	NA	NA	Nap,Free Play
		Total Capacity @35 sq. ft.: 49			Total Capacity @25 sq. ft.: 0					
Total # Children this Date: 41		Total Capacity @35 sq. ft.: 49)		Total Capacity @25 sq. ft.: 0					

Playground Compliance Playground Building Playground Occupancy Main Α 66 С В 95 Main С

Comments Site visit May 10, 2022 AR docs due May 17, 2022 AR docs received May 27, 2022 AR docs reviewed May 31, 2022 Visit emailed to center June 6, 2022

Plan of Improvement: Developed This Date 05/10/2022

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 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 a1 855-800-7747 or <u>qualityrated@decal.ga.gov</u> for more information. Free techincal 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 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)

Tyronnda Studstill, Program Official

Date

ST4	OF CEORE		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							
db.	1776			Findings	Report					
Date:	5/10/2022	VisitType:	Licensing Study	Arrival	: 2:40 PM	Departure:	4:00 PM			
Tiny T 404 Ne	-51060 Treasures Lea orth Avenue S 243-9195 amr	Statesboro, G	GA 30458 Bulloch Co	punty	ł	Regional Consultar Haley Carwile Phone: (229) 317-98 Fax: (229) 317-9865	368			
Mailing Same	Address				ł	naley.carwile@deca	l.ga.gov			
The fol	llowing infor	mation is as	ssociated with a Lice	ensing Study:	Activ	vities and Equ	ipment			
						-	-			
591-1- 1	I12 Equipm	ent & Toys(CR)				Met			
Comm Discuss		bys to suppor	rt the procedures of d	laily disinfecting.						
591-1- 1	I35 Swimmi	ing Pools &	Water-related Activ	ities(CR)			N/A			
Comm Center	ent does not prov	vide swimmir	ng activities.							
							Facility			
591-1- 1	I06 Bathroo	oms					Not Met			
plumbir either a enclose to preve	I06(4) requir ng facilities, to an open scree ed bathrooms	have the band ned window to ensure th d of contagio	first licensed after Ma athroom area fully end or functioning exhaus ere is adequate venti bus diseases. It was d required.	closed and ventil st fan and duct s lation to control o	ated to the ystem and odors and a	outside of the build requires Centers wi adequate sanitation	ing with thout fully measures			

POI (Plan of Improvement)

The Center will fully enclose and ventilate bathroom areas, as required, and will provide adequate ventilation and sanitation in bathrooms that are not fully enclosed.

Correction Deadline: 6/9/2022

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

Comment

Licensed capacity observed to be routinely met by center.

Met

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

Comment

Comment

Staff were observed to remind children to wash hands.

591-1-1-.10 Diapering Areas & Practices(CR)

Proper diapering procedures observed.

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

Comment

The Provider currently does not dispense/administer medication.

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

Finding

591-1-1-.25(11) requires that floor coverings be tight, smooth, free of odors and washable or cleanable. It was determined based on observation that in Room C the flooring on the left by the closet door was not smooth and peeling up. In addition, in the same room, the flooring in the middle of the room was not smooth and peeling up as well.

POI (Plan of Improvement)

Floors will be maintained to be safe and sanitary.

Correction Deadline: 6/9/2022

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

Comment

Playground observed to be clean and in good repair.

591-1-1-15 Food Service & Nutrition

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 observation that the menu for April 2022 was posted it all rooms, and not May 2022 as required.

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: 5/10/2022

Not Evaluated

Health and Hygiene

Policies and Procedures

Not Met

Food Service

Met

Not Met

Met

Met

591-1-1-.27 Posted Notices

Finding

591-1-1-.27 requires each Center to post in a designated area for public viewing near the front entrance the following: the Center's current License or Permit; a copy of these rules; a copy of the current communicable disease chart; a statement allowing Parent(s) access to all child care areas upon notifying any staff member of his or her presence; names of persons responsible for the administration of the Center in the administrator's absence; the dated current week's menu for meals and snacks; emergency plans for severe weather, fire, and other emergency situations; a statement requiring visitors to check in with Staff when entering the Center; no smoking signs; and a notice provided by the Department which advises Parents of their right to review a copy of the Center's most recent licensure evaluation report upon request to the Center Director. The Center shall provide any Parent with a copy of this evaluation report upon request. It was determined based on observation that their 2022 license was not posted as required.

POI (Plan of Improvement)

The Center will post the notices as required and ensure they remain posted.

Correction Deadline: 5/10/2022

	Safety
591-1-105 Animals	Not Evaluated
Comment	
Center does not keep animals on premises.	
591-1-111 Discipline(CR)	Met
Comment	
Age-appropriate discussion and/or redirection observed.	
591-1-113 Field Trips(CR)	Not Evaluated
Comment	
Center does not participate in field trips at this time.	
591-1-136 Transportation(CR)	N/A
Commont	

Comment

Center does not provide routine transportation.

Sleeping & Resting Equipment

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

Finding

591-1-1-.30(1)(a)3 requires that each crib shall have only an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant. It was determined based on observation that in Room B that five infants were laying in cribs without sheets as required. Children were laying on a vinyl mattress.

POI (Plan of Improvement)

The center will ensure that each crib has an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant.

Correction Deadline: 5/10/2022

Finding

591-1-1-.30(1)(b)3 requires that sheets or similar coverings for cots or mats shall either be marked for individual use or laundered daily. If marked for individual use, they must be laundered weekly or more frequently if needed. It was determined based on observation that in Room D one child was sleeping on a mat without a sheet or similar cover as required. In addition, in Room A a child was sleeping on a mat without a sheet or similar covering as required.

Not Met

POI (Plan of Improvement) The Center will ensure that sheets are marked for individual use or washed daily and that marked sheets are washed at least weekly.

Correction Deadline: 5/10/2022

	Staff Records
Records Reviewed: 10 Reco	ords with Missing/Incomplete Components: 10
Staff # 1 <u>"Missing/Incomplete Components"</u> .14(2)-CPR missing,.14(2)-First Aid Missing,.33(5)-10	Not Met 0 Hrs. Annual Training
Staff # 2 <u>"Missing/Incomplete Components"</u> .09-Criminal Records Check Missing	Not Met
Staff # 3 Date of Hire: 04/11/2022 <u>"Missing/Incomplete Components"</u> .14(2)-First Aid Missing,.14(2)-CPR missing	Not Met
Staff # 4 Date of Hire: 04/04/2022 <u>"Missing/Incomplete Components"</u> .14(2)-CPR missing,.14(2)-First Aid Missing	Not Met
Staff # 5 <u>"Missing/Incomplete Components"</u> .09-Criminal Records Check Missing	Not Met
Staff # 6 <u>"Missing/Incomplete Components"</u> .09-Criminal Records Check Missing	Not Met
Staff # 7 <u>"Missing/Incomplete Components"</u> .14(2)-CPR missing,.14(2)-First Aid Missing,.33(5)-10	Not Met 0 Hrs. Annual Training
Staff # 8 <u>"Missing/Incomplete Components"</u> .14(2)-CPR missing,.14(2)-First Aid Missing,.33(5)-10	Not Met 0 Hrs. Annual Training
Staff # 9 <u>"Missing/Incomplete Components"</u> .09-Criminal Records Check Missing	Not Met
Staff # 10	Not Met

Date of Hire: 04/04/2022

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing

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 review of files and staff statements, that staff members, #2, #5, #6 and #9, had not submitted a records Check Application to the Department and Fingerprints to an authorized fingerprinting site as required.

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: 5/10/2022

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 review of files and staff statements, that staff members, #2, #5, #6, and #9, were present without a satisfactory criminal record check letter on file as required.

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: 5/10/2022

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

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 that the director's CPR/First Aid expired in February 2021 and fifty percent of staff were not CPR/First Aid certified as required.

Not Met

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: 6/9/2022

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 review of files that no staff were current in their CPR/First Aid training as required.

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: 6/9/2022

591-1-1-.33 Staff Training

Not Met

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 review of files that none of the staff members hired before 2022 had completed annual training for 2021 as required.

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: 6/9/2022

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

Comment

Staff observed to be compliant with applicable laws and regulations.

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

Finding

591-1-1-.32(2) requires the Center maintain Staff:child ratios in mixed-age groups based on the age of the youngest group of children that includes more than twenty percent of the total number of children in the mixed-age group. It was determined based on observation that in Room B there were four infants and three one-year-olds with one staff, when two staff members were required per mixed ratio.

POI (Plan of Improvement)

The Center will provide adequate staff when there is a mixed-age group.

Met

Not Met

Staffing and Supervision

Correction Deadline: 5/10/2022

Correction Deadline: 11/30/2021

Corrected on 5/10/2022

.32(4) - Observed corrected.

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

Comment

Adequate supervision observed on this date.

Met