

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: 10/13/2022 VisitType: Licensing Study

Arrival: 11:10 AM

Departure: 6:00 PM

CCLC-49426

Tuckston UMC Pre-School

4175 Lexington Road Athens, GA 30605 Clarke County (706) 255-6577 tuckstonpreschool@gmail.com

Regional Consultant Dianne Clarke

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Mailing Address

Same



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			
10/13/2022	Complaint Investigation &	Good Standing	standing, support, and deficient.			
	Licensing Study			- Program is demonstrating an acceptable level of performance in meeting		
02/24/2022	Monitoring Visit	Good Standing	Support	the rules. Program performance is demonstrating a need for improvement in meeting 		
09/09/2021	Licensing Study	Good Standing	Deficient	rules. 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	C/5R- 4 year olds and up	Four Year Olds and Five Year Olds	1	6	С	11	С	NA	NA	Centers
Main	D4R- 3's	Three Year Olds	1	7	С	10	С	NA	NA	Centers
Main	E/3R- 2's and 1's	Two Year Olds and Three Year Olds	1	7	С	11	С	NA	NA	Centers
Main	Infant First Right	Infants	1	3	С	6	С	NA	NA	Feeding,Free Play,Floor Play
Main	Room 105	Three Year Olds	1	5	С	11	С	NA	NA	Transitioning
Main	Room 106	One Year Olds	2	5	С	10	С	NA	NA	Nap
Main	Room 110	Two Year Olds	1	8	С	10	С	NA	NA	Circle Time,Story
		Total Capacity @35 sq. ft.: 6	9		Total C ft.: 0	apacity @	25 sq.			
Total # Cl	hildren this Date: 41	Total Capacity @35 sq. ft.: 6	9		Total C ft.: 0	apacity @	25 sq.			

Building	Building Playground		Playground Compliance	
Main	Playground A- All ages	63	С	

Comments

Reminders: Refer to the published communicable disease chart for guidance regarding communicable diseases. In most scenarios, only outbreaks/clusters should be reported to the local health districts.

Please be sure to contact the Clarke County Department of Health, if there are outbreaks/clusters of positive COVID-19 cases immediately, and get their guidance. Please be sure to also complete a Required Report in DECAL KOALA for all individual cases of communicable diseases within 24 hours. Be sure to select "Notifiable Communicable Diseases" to report closures for COVID cases.

Please be sure to enter all temporary closures in DECAL KOALA under the Required Report tab whenever your facility is closed temporarily for one day or more.

Incident Reports are to be submitted via DECAL KOALA with all signed staff statements for staff and the director.

All amendments are required to be electronically entered in DECAL KOALA effective August 2, 2021.

Please be sure to hide staff who are no longer employed in your DECAL KOALA account. Please reach out for help with this, if needed.

Provided updated orientation checklist.

Plan of Improvement: Developed This Date 10/13/2022

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, <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





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 <u>www.decalkoala.com</u> 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)

Constance Bowen, Program Official

Date

Dianne Clarke, Consultant

Date

2 Martin L	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: 10/13/2022 VisitType: Licensing Study	Arrival: 11:10 AM Departure: 6:00 PM				
CCLC-49426 Tuckston UMC Pre-School 4175 Lexington Road Athens, GA 30605 Clarke Cou (706) 255-6577 tuckstonpreschool@gmail.com Mailing Address Same	Regional Consultant Dianne Clarke Phone: (770) 357-4923 Fax: (770) 357-4922 dianne.clarke@decal.ga.gov				
The following information is associated with a Lice	ensing Study Visit: Activities and Equipment				
591-1-112 Equipment & Toys(CR) Comment A variety of equipment and toys were observed throug 591-1-135 Swimming Pools & Water-related Activ Comment					
Center does not provide swimming activities.	Children's Records				
Records Reviewed: 6	Records with Missing/Incomplete Components: 2				
Child # 1	Met				
Child # 2	Met				
Child # 3 <u>"Missing/Incomplete Components"</u> .08(1)-Emergency Contact information Missing	Not Met				
Child # 4	Met				
Child # 5 <u>"Missing/Incomplete Components"</u> .08(1)-Doctor, Clinic, Phone Numbers	Not Met				
Child # 6	Met				

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

Technical Assistance

Comment

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, intellectual disabilities or developmental disabilities which limit the child's participation in the program. It was determined based on a review of records that child #3 was missing their emergency contact address and child #5 was missing their physician's information.

Technical Assistance

591-1-1-.08(6) - Please ensure that parent complete attendance each day.

Correction Deadline: 10/13/2022

Facility

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)

Technical Assistance

591-1-1-.25(13) - Please ensure that plastic bags, and wipes packaging are not accessible to the children at all times. Any item that states "keep out of reach."

Correction Deadline: 10/13/2022

Finding

591-1-1-.25(3) requires the Center and surrounding premises to be kept clean, free of debris and in good repair. Hygienic measures such as, but not limited to, screened windows and proper waste disposal procedures shall be utilized to minimize the presence of rodents, flies, roaches and other vermin at the Center. It was determined based on observation that the following items were in need of repair:

-Back Bathroom: There was a hole under the first urinal in the boys bathroom.

-E/3R: There was a yellow wall chipping in the pretend play area.

-Room 110: The wall in the classroom near the pretend play kitchen play set was observed to be peeling.

POI (Plan of Improvement)

The Center will have the Center and surrounding areas cleaned, make repairs where needed, and remove all debris is removed. The Center will implement a plan to keep areas clean and in good repair that includes regular monitoring. Discussed covering the wall with furniture until it can be repaired.

Correction Deadline: 10/13/2022

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

Comment

Discussed maintenance of resilient surface. Please fluff and redistribute.

Health and Hygiene

591-1-1.10 Diapering Areas & Practices(CR)

Comment

Staff state proper knowledge of diapering procedures.

Met

Met

Not Met

Met

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

Comment

Staff were observed to remind children to wash hands.

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

Correction Deadline: 2/24/2022

Corrected on 10/13/2022

.20(3) - The previous citation was observed to be corrected in that the medication was dispensed at the times directed. Please ensure that the medication forms are completed at all times.

Finding

591-1-1-.20(4) requires the Center to keep medication in a cabinet or container that is locked or otherwise not accessible to the children and to be stored separate from cleaning chemicals, supplies or poisons. Medications requiring refrigeration shall be placed in a leak-proof container in a refrigerator that is not accessible to the children. It was determined based on observation that an inhaler was found in one of the children's bags in the hallway from the D4R classroom.

POI (Plan of Improvement)

The Center will train Staff on the safe and proper storage of medication and monitor to ensure that the rule is met. Inhaler was removed during the visit.

Correction Deadline: 10/13/2022

Policies and Procedures

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

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 review of emergency plans were not recorded.

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: 10/18/2022

	Safety
591-1-111 Discipline(CR)	Met

Comment

Age-appropriate discussion and/or redirection observed.

591-1-1-.36 Transportation(CR)

Comment

Center does not provide routine transportation.

Sleeping & Resting Equipment

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

Comment

Pleasant naptime environment observed.

Not Met

Met

Met

Staff Records

Not Met

Staff # 1 Date of Hire: 02/24/2022		Not Met
<u>"Missing/Incomplete Components"</u> .33(3)-Health & Safety Certificate		
Staff # 2 Date of Hire: 10/17/2019		Met
Staff # 3 Date of Hire: 11/01/2021		Not Met
<u>"Missing/Incomplete Components"</u> .14(2)-CPR missing,.14(2)-First Aid Missing		
Staff # 4 Date of Hire: 08/01/1999		Met
Staff # 5 Date of Hire: 10/08/2019		Met
Staff # 6 Date of Hire: 09/25/2019		Met
Staff # 7 Date of Hire: 02/11/2021		Met
Staff # 8 Date of Hire: 06/07/2021		Not Met
<u>"Missing/Incomplete Components"</u> .33(3)-Health & Safety Certificate,.14(2)-First	Aid Missing, 14(2)-CPR missing	
Staff # 9 Date of Hire: 10/01/2017		Met
Staff # 10		Met
Staff # 11 Date of Hire: 11/10/2025	<u>Reminder - Health & Safety training is</u> <u>calendar days of hired</u>	Met required within 90
Staff # 12 Date of Hire: 07/12/2022		Not Met
<u>"Missing/Incomplete Components"</u> .33(3)-Health & Safety Certificate,.14(2)-First	Aid Missing, 14(2)-CPR missing	
Staff # 13		Met

Records Reviewed: 31

Records Reviewed. 51	Records with Missing/incomplete Components.	. (
Date of Hire: 10/08/2019		
Staff # 14	Not Met	
Date of Hire: 01/07/2020		
"Missing/Incomplete Components"		
.31(2)(b)2Staff Qualifications-Education Miss	ing	
Staff # 15	Met	
Date of Hire: 12/19/2019		
Staff # 16	Met	
Date of Hire: 02/24/2021		
Staff # 17	Met	
Date of Hire: 10/25/2021		
Staff # 18	Met	
Date of Hire: 08/03/2022		
Staff # 19	Met	
Date of Hire: 01/25/2021		
Staff # 20	Met	
Date of Hire: 08/10/2021		
Staff # 21	Met	
Date of Hire: 11/06/2018		
Staff # 22	Met	
Staff # 23	Not Met	
Date of Hire: 02/23/2021		
"Missing/Incomplete Components"		
.14(2)-CPR missing, 14(2)-First Aid Missing		
Staff # 24	Met	
Date of Hire: 05/11/2021		
Staff # 25	Met	
Date of Hire: 09/04/2019		
Staff # 26	Met	
Date of Hire: 07/01/2018		
Staff # 27	Met	

Date of Hire: 10/14/2019

Staff # 28 Date of Hire: 06/06/2021	Met
Staff # 29	Met
Staff # 30 Date of Hire: 06/17/2021	Met
Staff # 31 Date of Hire: 09/01/1990	Met

Staff Credentials Reviewed: 9

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

Comment

Criminal record checks were observed to be complete.

-Please ensure that applicants/staff are listing exact dates (including month/day/year) on 10-year work history form in order to determine any breaks in service from the childcare industry.

-Please ensure that all staff, volunteers, independent contractors, substitutes etc...has their records check electronically ported to the center's list in KOALA prior to being present at the facility.

-Please ensure that records checks are redone if there is a six-month break in service.

-Please also ensure that satisfactory records checks are updated before the expiration date.

-Ensure that all therapists and other independent contractors have an updated records check on file, before being present at the center.

-Please ensure that staff with a national background check is always present with a staff who has a comprehensive background check. Staff should never be by themselves.

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

Not Met

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 a review of records that staff #3, #8, #12, and #23 did not have evidence of CPR and First Aid.

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: 11/13/2022

Recited on 10/13/2022

591-1-1-.33 Staff Training

Not Met

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 a review of records that staff member #1, #8, #12, and #23 did not have evidence of the required health and safety orientation training on file.

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: 10/13/2022

Recited on 10/13/2022

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

Finding

591-1-1-.31(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 a review of records that staff #14 did not have current evidence of education credentials.

POI (Plan of Improvement)

A teacher/lead caregiver will be hired that meets the minimum academic requirements and qualifying work experience.

Correction Deadline: 1/13/2023

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. Discussed revision to the supervision rule which states: Staff shall be attentive and participating with all children during mealtimes and shall be seated within an arm's length away from children thirty-six (36) months of age and younger.

Met

Met