



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: 9/11/2023 **VisitType:** Complaint Investigation & Monitoring Visit **Arrival:** 8:40 AM **Departure:** 12:30 PM

CCLC-2125

Little Red School House

201 Third Avenue St. Simons, GA 31522 Glynn County
 (912) 638-8956 megbhaisten@gmail.com

Regional Consultant

Jerica Davis

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 jerica.davis@decal.ga.gov

Mailing Address
 Same

Quality Rated: ★ ★

<u>Compliance Zone Designation</u>			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. 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.
09/11/2023	Complaint Investigation & Monitoring Visit	Good Standing	
05/10/2023	Monitoring Visit	Good Standing	
11/01/2022	Licensing Study	Good Standing	

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	Room B		0	0	C	6	C	NA	NA	
Main	Room A-Entry	One Year Olds and Two Year Olds and Three Year Olds and Four Year Olds	1	9	NC	25	C	NA	NA	Centers, Circle Time
Total Capacity @35 sq. ft.: 31			Total Capacity @25 sq. ft.: 0							
Total # Children this Date: 9			Total Capacity @35 sq. ft.: 31							
			Total Capacity @25 sq. ft.: 0							

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground	47	C

Comments

The purpose of today's visit is a Monitoring Visit.

Plan of Improvement: Developed This Date 09/11/2023

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

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)



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@decal.ga.gov for more information. Free technical assistance is available!

Amy Habersham, Program Official

Date

Jerica Davis, Regional Consultant

Date



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(Findings Report)

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The following information is associated with a Monitoring Visit:

Activities and Equipment

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

Comment

A variety of equipment and toys were observed throughout the center.

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

Comment

Center does not provide swimming activities.

Children's Records

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

Comment

Records were observed to be complete and well organized.

Facility

591-1-1-.06 Bathrooms Met

Comment

Bathrooms observed to be clean and well maintained.

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)**Met****Comment**

No hazards observed accessible to children on this date.

591-1-1-.26 Playgrounds(CR)**Not Met****Finding**

591-1-1-.26(6) requires that playground equipment provide an opportunity for the children to engage in a variety of experiences and shall be age-appropriate. For example, toddlers shall not be permitted to swing in swings designed for School-age Children. The outdoor equipment shall be free of lead-based paint, sharp corners and shall be regularly maintained in such a way as to be free of rust and splinters that could pose significant safety hazard to the children. All equipment shall be arranged so as not to obstruct supervision of children. It was determined based on observation that the wooden boat in the back left corner of the playground had three boards that were rotten and broken and had exposed screws that posed a potential hazard.

POI (Plan of Improvement)

Staff will check the equipment daily to ensure that the equipment is free of hazards, rust and splinters.

Correction Deadline: 9/25/2023

Recited on 9/11/2023

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**

Proper hand washing observed throughout the center.

591-1-1-.20 Medications(CR)**Met****Comment**

The Provider currently does not dispense/administer medication.

Safety**591-1-1-.11 Discipline(CR)****Met****Comment**

Staff were observed to maintain a positive learning environment on this date.

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**

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

591-1-1-.09 Criminal Records and Comprehensive Background Checks(CR)**Not Met****Finding**

591-1-1-.09(1.) (b) requires the Center to ensure that every Director 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 Director 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 a review of records that the director, staff member # 3, was present in classroom A with nine children and did not have a valid and current satisfactory Comprehensive Records Check Determination on file prior to being present at the Center as required.

POI (Plan of Improvement)

IMMEDIATE CORRECTION - The Center will complete the provided affidavit form to ensure that the Director 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 Director 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 complete all steps to ensure the CRC rules are maintained.

Correction Deadline: 9/11/2023**Finding**

591-1-1-.09(1)(l)3. requires the Center to immediately require a new Comprehensive Records Check Determination for a Director, Employee or Provisional Employee at least once every five years. It was determined based on a review of records that staff member # 3 did not complete a new Comprehensive Records Check Determination at least once every five years as required.

POI (Plan of Improvement)

IMMEDIATE CORRECTION - The Center will complete the provided affidavit form to ensure that each Director, Employee and Provisional Employee has a Comprehensive Records Check Determination on file that has been issued within the past five years. 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 complete all steps to ensure CRC rules are maintained.

Correction Deadline: 9/11/2023

591-1-1-.14 First Aid & CPR**Not Met****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 based on a review of records that one of five total staff had evidence of complete CPR and First Aid training on file when 50 percent of staff is required.

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: 10/11/2023

591-1-1-.24 Personnel Records**Not Met**

Finding

591-1-1-.24(1) requires the center to 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; It was determined based on a review of records that staff member # 1, staff member # 4, and staff member # 5 did not a evidence of required orientation and 10 year work history on file as required.

POI (Plan of Improvement)

The Center will secure required information for all Personnel. The Center will ensure that complete information is in the personnel file for all Directors, Employees, Provisional Employees, Personnel, Staff, Students-in-Training, Volunteers, Clerical, Housekeeping, Maintenance and other Support Staff.

Correction Deadline: 9/25/2023

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 # 4 hired in October of 2022 did not complete health and safety orientation training within the first 90 days of employment as required.

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: 9/25/2023

Recited on 9/11/2023

Correction Deadline: 1/1/2023

Corrected on 9/11/2023

.33(5) - This citation was observed to be corrected on this date.

591-1-1-.31 Staff(CR)**Met****Comment**

Staff observed to be compliant with applicable laws and regulations.

Staffing and Supervision

591-1-1-.32 Staff:Child Ratios and Group Size(CR)**Not Met****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 one staff member was present in classroom B with 3 one-year-old children, 2 two-year-old children, 3 three-year-old children, and 1 four-year-old child for a ratio of 1:9 when two staff member's were required for a ratio of 2:9. The one-year-old age group made up more than twenty percent of the children so a ratio of 1:8 was required.

POI (Plan of Improvement)

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

Correction Deadline: 9/11/2023**Technical Assistance**

Please ensure that children under three years old be housed in separate physical areas from older children and cannot be mixed with older children except at specified times and circumstances. Please ensure that children ages two and younger are only with children three and older during the first and last hour of the day.

Correction Deadline: 9/11/2023

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

Adequate supervision observed on this date.