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: 2/6/2024 **VisitType:** Licensing Study **Arrival:** 10:00 AM **Departure:** 12:15 PM

CCLC-57506
Youth United Learning Center

699 Highway 80 West Eden, GA 31307 Effingham County
(912) 748-0700 youthunitedlearningcenter@gmail.com

Exemption Unit Coordinator
Sarah Benton
Phone: (770) 357-5103
Fax: (770) 357-5105
sarah.benton@decal.ga.gov

Mailing Address
P.O. Box 632
Eden, GA 31307

Quality Rated: No

Compliance Zone Designation		
02/06/2024	Licensing Study	Good Standing
08/17/2023	Monitoring Visit	Good Standing
04/17/2023	Monitoring Visit	Good Standing

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.

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	front left	Three Year Olds	2	14	C	16	C	22	C	Circle Time,Transitioning
Main	left back	GA PreK	2	11	C	20	C	NA	NA	Circle Time
Main	Left Middle	Two Year Olds	1	7	C	11	C	NA	NA	Centers
Main	Right Back	One Year Olds	2	6	C	10	C	NA	NA	Centers
Main	Right Front	Infants	2	6	C	9	C	NA	NA	Floor Play,Diapering, Nap
		Total Capacity @35 sq. ft.: 66			Total Capacity @25 sq. ft.: 72					
Total # Children this Date: 44		Total Capacity @35 sq. ft.: 66			Total Capacity @25 sq. ft.: 72					

Building	Playground	Playground Occupancy	Playground Compliance
Main	PG, Infant/toddlers	44	C
Main	PG, Preschool	38	C

Comments
The purpose of the visit was to complete a licensing visit with the program.

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)

QUALITY™ RATED CHILD CARE

CAPS CHILDCARE AND PARENT SERVICES

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

Brittany Jones, Program Official	Date	Sarah Benton, Exemption Unit Coordinator	Date

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(Findings Report)

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The following information is associated with a Licensing Study:

Activities and Equipment

591-1-1-.03 Activities **Technical Assistance**

Technical Assistance
591-1-1-.03(2) - Discussed ensuring current and updated lesson plans are posted for review.

Correction Deadline: 2/6/2024

591-1-1-.12 Equipment & Toys(CR) **Technical Assistance**

Technical Assistance
591-1-1-.12 - Discussed the chairs not being accessible during free play.

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

Technical Assistance
591-1-1-.12(2) - Discussed the placement of the bottle warmer in the infant classroom.

Correction Deadline: 2/6/2024

591-1-1-.35 Swimming Pools & Water-related Activities(CR) **N/A**

Comment
Center does not provide swimming activities.

Children's Records

Records Reviewed: 5 **Records with Missing/Incomplete Components: 2**

Child # 2 Not Met

"Missing/Incomplete Components"

.08(2)-Immunization

Records Reviewed: 5 **Records with Missing/Incomplete Components: 2**

Child # 5 Not Met

"Missing/Incomplete Components"

.08(2)-Immunization

591-1-1-.08 Children's Records **Not Met**

Finding
591-1-1-.08(2) requires Center Staff to maintain a file for each child that includes evidence of age-appropriate immunizations or a signed affidavit against such immunizations for each child enrolled in the center on a form approved by the Department, and to allow no child to continue enrollment in the Center for more than thirty (30) days without such evidence. It was determined based on a file review that two (2) of five (5) children's files reviewed did not have immunizations on file.

POI (Plan of Improvement)
Center staff will have and use a plan to track immunization forms for all enrolled children and to ensure the form or affidavit are obtained from the parent or guardian within 30 days of enrollment. Parents will be informed their child cannot remain enrolled in the center without this documentation.

Correction Deadline: 2/16/2024

Facility

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) **Not Met**

Comment
Center appears clean and well maintained.

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 following hazards were observed accessible to children.

In the three-year-old room, hand sanitizer and adult scissors were observed on the cubbies within reach of children in care.
In the Pre-K room, two staff bags, hand sanitizer and a container of cleaners were observed on the top of the cubbies within reach of children in care.

POI (Plan of Improvement)
The Center will identify all hazardous items and keep them in a locked area inaccessible to children. The Center will inform all Staff about hazardous items and the safe storage of those items.

Correction Deadline: 2/6/2024

Technical Assistance
591-1-1-.25(8) - Discussed access to the cords in several classrooms. Ensure they are not within reach of children in care.

Correction Deadline: 2/6/2024

591-1-1-.26 Playgrounds(CR) **Technical Assistance**

Technical Assistance
591-1-1-.26(4) - Monitor an area of the toddler playground fence along the back that was no longer secure to the ground and could be pushed up.

Correction Deadline: 2/6/2024

Food Service

591-1-1-.15 Food Service & Nutrition — **Technical Assistance**

Technical Assistance
591-1-1-.15(2) - Discussed infant feeding plans and ensuring they are updated regularly.

Correction Deadline: 2/6/2024

Health and Hygiene

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

Comment
Proper diapering procedures observed.

591-1-1-.17 Hygiene(CR) — **Met**

Comment
Discussed proper handwashing.

591-1-1-.20 Medications(CR) — **Technical Assistance**

Technical Assistance
591-1-1-.20 - Program does not dispense medication routinely. Discussed creating an allergy action plan for children who have medication for emergency use only.

Policies and Procedures

591-1-1-.21 Operational Policies & Procedures — **Not Met**

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 observation and discussion that the program has not conducted monthly fire drills or other emergency drills since opening.

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: 2/11/2024

Safety

591-1-1-.05 Animals — **N/A**

Comment
Center does not keep animals on premises.

591-1-1-.11 Discipline(CR) — **Met**

Comment
Age-appropriate discussion and/or redirection observed.

591-1-1-.13 Field Trips(CR) — **N/A**

Comment
Center does not participate in field trips at this time.

591-1-1-.36 Transportation(CR) **N/A**

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. No SIDS hazards observed on this date.

Staff Records

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

Comment
Criminal record checks were observed to be complete.

591-1-1-.09 Criminal Records Check(CR) **Met**

Comment
Criminal records checks were observed to be complete.

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 files that at least fifty percent of the staff employed did not have evidence of CPR and First aid when there was only one of ten observed.

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: 3/7/2024

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 review of files that one staff member did not have a file at the center 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: 2/13/2024

Recited on 2/6/2024

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 a review of files that only one of ten staff had evidence that orientation had been completed.

POI (Plan of Improvement)
The Center will develop and provide orientation for all new Staff prior to their staff's assignment to children or task.

Correction Deadline: 2/6/2024

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 four (4) of five (5) staff files reviewed did not have evidence of heatlh and safety training within the first 90 days of employment.

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: 3/7/2024

591-1-1-.31 Staff(CR) **Not Met**

Comment
Staff observed to be compliant with applicable laws and regulations.

Finding
591-1-1-.31(2)(c) requires the Center to maintain a copy and/or written verification of the credential or degree awarded to the lead teacher that is required by these rules in the lead teacher's file, to make the document available for inspection and to provide the document to Department staff upon request. It was determined based on a review of staff files that there was no evidence that four (4) lead staff had evidence of a credential or degree.

POI (Plan of Improvement)
The Center will review lead teacher records to ensure the required documentation is on file and will obtain and file it if not found.

Correction Deadline: 2/6/2024

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.