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: 5/24/2022 **VisitType:** Licensing Study **Arrival:** 11:30 AM **Departure:** 12:35 PM

CCLC-52861

Atlanta International Nursery Brookhaven

1850 Skyland Terrace NE Brookhaven, GA 30319 DeKalb County
(404) 855-5652 admin@atlantainternationalnursery.com

Regional Consultant

Roslyn Williams

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Mailing Address
3258 Allison Circle, NE
Decatur, GA 30034

Quality Rated: No

Compliance Zone Designation		
05/24/2022	Licensing Study	Good Standing
09/15/2021	Complaint Closure	Good Standing
08/31/2021	Complaint Investigation & 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
Building A	Room A -Infant	Infants	2	8	C	9	C	NA	NA	Nap
Building A	Room B One-Year-Old	One Year Olds	2	13	C	13	C	NA	NA	Nap
Building A	Room C-Infants	Infants	2	4	C	6	C	NA	NA	Nap
Building A	Room D-2nd Fl-Preschool	Three Year Olds	2	14	C	19	C	NA	NA	Transitioning
Building A	Room E-2 Year-Old Upstairs	Two Year Olds	2	10	C	10	C	NA	NA	Transitioning
Building A	Upper lever 3's	Three Year Olds	2	14	C	16	C	NA	NA	Lunch
		Total Capacity @35 sq. ft.: 64			Total Capacity @25 sq. ft.: 0			Building @35 capacity limited by Fire Marshall Limitations		
Total # Children this Date: 63		Total Capacity @35 sq. ft.: 64			Total Capacity @25 sq. ft.: 0					

Building	Playground	Playground Occupancy	Playground Compliance

Comments

Plan of Improvement: Developed This Date 05/24/2022

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 qualityrated@decal.ga.gov **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)

Philippa Knowles, Program Official	Date	Roslyn Williams, Consultant	Date

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Findings Report

Date: 5/24/2022 **VisitType:** Licensing Study **Arrival:** 11:30 AM **Departure:** 12:35 PM

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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(1) - Please ensure that lesson plans are current and available for review.

Correction Deadline: 5/24/2022

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) — **N/A**

Comment
Center does not provide swimming activities.

Children's Records

Records Reviewed: 3 **Records with Missing/Incomplete Components: 3**

Child # 1 Not Met

"Missing/Incomplete Components"

.08(1)-Doctor, Clinic, Phone Numbers,.08(1)-Emergency Contact information Missing

Child # 2 Not Met

"Missing/Incomplete Components"

.08(1)-Doctor, Clinic, Phone Numbers,.08(1)-Emergency Contact information Missing

Child # 3 Not Met

"Missing/Incomplete Components"

Records Reviewed: 3	Records with Missing/Incomplete Components: 3

.08(1)-Doctor, Clinic, Phone Numbers,.08(1)(a)-Work Address Missing,.08(1)(a)-Work Number Missing,.08(1)-Emergency Contact information Missing

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

Finding
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, mental retardation or developmental disabilities which limit the child's participation in the program. It was determined based on review of records that 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 were not documented in three of three records reviewed.

POI (Plan of Improvement)
Center staff will develop a plan that includes how to obtain all required information for currently enrolled children and how to ensure this is done for future enrollees as well. The plan will also include how and where to maintain files for the required amount of time. The plan will be implemented and followed.

Correction Deadline: 5/24/2022

Facility

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

Correction Deadline: 8/31/2021

Corrected on 5/24/2022
.19(1) - The previous citation was corrected. It was determined that the Center provided the required 35 square feet of usable per child.

591-1-1-.25 Physical Plant - Safe Environment(CR) **Not Met**

Comment
Please be mindful to keep items that pose a hazard inaccessible to children.

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 there was no warm running water available at the hand washing sink in room A.

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.

Correction Deadline: 5/24/2022

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

Technical Assistance
591-1-1-.26(6) - Routine equipment maintenance was discussed with the assistant director.

Correction Deadline: 6/3/2022

Food Service

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

Comment
Meals were provided by parents and were not not prepared on the premises.

591-1-1-.18 Kitchen Operations **Met**

Comment
The Center was not equipped with a kitchen for meal preparation.

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
Staff were observed to remind children to wash hands.

Finding
591-1-1-17(7) requires that children wash their hands with liquid soap and warm running water upon arrival for care, when moving from one child care group to another, upon re-entering the child care area after outside play, before and after eating meals and snacks, handling or touching food, playing in water; after toileting and diapering, playing in sand, touching animals or pets, and contact with bodily fluids and after contamination by any other means. It was determined based on observation that there was no warm running water available for children to wash their hands properly in room A.

POI (Plan of Improvement)
The Center will train Staff on required handwashing for children and Staff will ensure children's hands are washed when required. The Director will monitor for compliance.

Correction Deadline: 5/24/2022

Finding
591-1-1-.17(8) requires staff to wash their hands with liquid soap and warm running water upon arrival for the day, when moving from one child care group to another, upon re-entering the child care area after outside play, before and after diapering each child, dispensing medication, applying topical medications, handling and preparing food, eating, drinking, preparing bottles, feeding each child, assisting children with eating and drinking, after toileting or assisting children with toileting, using tobacco products, handling garbage and organic waste, touching animals or pets, handling bodily fluids and after contamination by any means. It was determined based on observation that there was no warm running water available for staff to wash their hands properly in room A.

POI (Plan of Improvement)
The Center will ensure liquid soap and warm running water are available for handwashing, train Staff on the handwashing requirements, review the requirements with Staff periodically, and monitor handwashing.

Correction Deadline: 5/24/2022

591-1-1-.20 Medications(CR) **N/A**

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)	N/A

Comment
Center does not provide routine transportation.

Sleeping & Resting Equipment

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

Comment
Pleasant naptime environment observed.

Staff Records

Records Reviewed: 17 **Records with Missing/Incomplete Components: 6**

Staff # 1 Met

Staff # 2 Met
Date of Hire: 03/29/2021

Staff # 3 Met
Date of Hire: 03/21/2022
Reminder - Health & Safety training is required within 90 calendar days of hired

Staff # 4 Met
Date of Hire: 07/02/2021

Staff # 5 Not Met
Date of Hire: 07/19/2019

"Missing/Incomplete Components"

.24(1)-Education Experience Missing

Staff # 6 Met

Staff # 7 Not Met

"Missing/Incomplete Components"

.14(2)-CPR missing,.14(2)-First Aid Missing,.33(5)-10 Hrs. Annual Training

Staff # 8 Not Met
Date of Hire: 01/04/2019

"Missing/Incomplete Components"

.24(1)-Education Experience Missing

Staff # 9 Not Met
Date of Hire: 02/19/2020

"Missing/Incomplete Components"

Records Reviewed: 17	Records with Missing/Incomplete Components: 6

.33(3)-Health & Safety Certificate

Staff # 10 — Met
Date of Hire: 01/21/2022

Staff # 11 — Met
Date of Hire: 01/31/2022

Staff # 12 — Not Met
Date of Hire: 03/24/2022

Reminder - Health & Safety training is required within 90 calendar days of hired

"Missing/Incomplete Components"

.09-Criminal Records Check Missing

Staff # 13 — Met

Staff # 14 — Met
Date of Hire: 05/23/2022

Reminder - Health & Safety training is required within 90 calendar days of hired

Staff # 15 — Not Met
Date of Hire: 03/07/2022

"Missing/Incomplete Components"

.09-Criminal Records Check Missing

Staff # 16 — Met
Date of Hire: 11/10/2021

Staff # 17 — Met
Date of Hire: 01/24/2022

Staff Credentials Reviewed: 2

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 records that Staff person #11 hired on March 24, 2022 was observed working in room B did not submit both a Records Check Application to the Department and Fingerprints to an authorized fingerprinting site as required by the Department. It was further determined that Staff person #13 who was hired on March 7, 2022 was observed working in room submit both a Records Check Application to the Department and Fingerprints to an authorized fingerprinting site as required by the Department. A one day letter was left.

POI (Plan of Improvement)
IMMEDIATE CORRECTION - The Center will to 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 to ensure the CRC rules are maintained.

Correction Deadline: 5/24/2022

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 records that staff person #11 hired on March 24, 2022 was observed working in room B without a valid and current satisfactory Comprehensive Records Check Determination on file. It was further determined that staff person #13 who was hired on March 7, 2022 was observed working in room A without a valid and current satisfactory Comprehensive Records Check Determination on file. A one day letter was left.

POI (Plan of Improvement)
IMMEDIATE CORRECTION - The Center will 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. 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 to ensure the CRC rules are maintained.

Correction Deadline: 5/24/2022

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 review of records that the Center Director did not have evidence of current training program in cardiopulmonary resuscitation (CPR) and a triennial training program in first aid.

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: 6/23/2022

591-1-1-.24 Personnel Records **Technical Assistance**

Technical Assistance
591-1-1-.24(1) - Please ensure that evidence of education experience is on file for Lead Teachers.

Correction Deadline: 5/29/2022

591-1-1-.33 Staff Training **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 review of records that staff person #9 did not have evidence of this training.

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: 6/23/2022

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 review of records that the Center did not have evidence of this training for staff members #5 and #7.

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: 6/23/2022

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) **Met**

Comment
Center observed to maintain appropriate staff:child ratios.

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

Comment
Staff observed to provide direct supervision and be attentive to children's needs.