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: 10/5/2023 **VisitType:** Licensing Study **Arrival:** 10:20 AM **Departure:** 3:30 PM

CCLC-10767

East Cobb United Methodist Church Preschool

2325 Roswell Road Marietta, GA 30062 Cobb County
(770) 971-3671 preschool@eastcobbumc.org

Regional Consultant

Neli Todorova

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Mailing Address
2325 Roswell Rd
Marietta, GA 30062

Quality Rated:

Compliance Zone Designation		
10/05/2023	Licensing Study	Good Standing
07/03/2023	Complaint Closure	Good Standing
06/20/2023	Complaint Investigation Follow Up	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	112	Three Year Olds	2	6	C	12	C	NA	NA	Transitioning,Outside
Main	A 113	One Year Olds and Two Year Olds	1	4	C	11	C	NA	NA	Circle Time
Main	B 115	Two Year Olds	1	6	C	14	C	NA	NA	Transitioning
Main	C 117	Two Year Olds	2	11	C	15	C	NA	NA	Outside
Main	D 119	Three Year Olds	2	14	C	14	C	20	C	Outside
Main	E 121	Three Year Olds and Four Year Olds	2	14	C	17	C	24	C	Outside
Main	F 120	One Year Olds	2	7	C	10	C	NA	NA	Lunch
Main	G 118	Infants	3	8	C	10	C	NA	NA	Nap,Free Play,Feeding
Main	H 116		0	0	C	10	C	14	C	
		Total Capacity @35 sq. ft.: 113			Total Capacity @25 sq. ft.: 130					
Total # Children this Date: 70		Total Capacity @35 sq. ft.: 113			Total Capacity @25 sq. ft.: 130					

Building	Playground	Playground Occupancy	Playground Compliance
Main	PLAYGROUND	49	C

Comments
The purpose of the visit is to follow up on previos visit and conduct a licensing Study.

Plan of Improvement: Developed This Date 10/05/2023

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)

QUALITY RATED CHILD CARE

CAPS

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!**

Vanessa Truesdale, Program Official Date

Neli Todorova, Regional Consultant 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-.12 Equipment & Toys(CR) **Met**

Comment
Equipment and furniture observed to be properly secured, as applicable.

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

Comment
Center does not provide swimming activities.

Children's Records

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

Child # 1 Not Met

"Missing/Incomplete Components"

.08(1)-Allergies and Disabilities

Child # 2 Not Met

"Missing/Incomplete Components"

.08(1)-Allergies and Disabilities

Child # 3 Not Met

"Missing/Incomplete Components"

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

Child # 4 Not Met

"Missing/Incomplete Components"

.08(1)-Allergies and Disabilities

Child # 5 Not Met

"Missing/Incomplete Components"

.08(1)-Doctor, Clinic, Phone Numbers,.08(1)-Allergies and Disabilities

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, intellectual disabilities or developmental disabilities which limit the child's participation in the program. It was determined based on review of records that three of five files reviewed did not have special needs and allergies listed; two of five files did not have a physician listed and one file did not have emergency contacts listed.

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: 10/5/2023

Facility

591-1-1-.06 Bathrooms **Not Met**

Finding
591-1-1-.06(4) requires a Center first licensed after March 1, 1991, and Centers that remodel or add to existing plumbing facilities, to have the bathroom area fully enclosed and ventilated to the outside of the building with either an open screened window or functioning exhaust fan and duct system and requires Centers without fully enclosed bathrooms to ensure there is adequate ventilation to control odors and adequate sanitation measures to prevent the spread of contagious diseases. It was determined based on observation that the exhausts in the bathroom in room 115 and the bathrooms in the hallway were not operating as they were not pulling the air in.

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: 11/4/2023

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**

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 accessible to the children:
* A bottle of lotion and a container with Clorox wipes on top of the children's cubbies in room 119.
* A bottle with dishwasher detergent and a bottle with disinfectant on a low shelf in room 115.
* Diaper cream and wipes in a child's bag on a low hanger in room 119.
* First Aid kit, bathroom wipes and diaper wipes marked Keep Out of Reach of Children stored in a child's cubby in room 121.

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: 10/5/2023

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

Comment
Playground observed to be clean and in good repair.

Food Service

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

Comment
Center menu meets USDA guidelines.

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

Comment
Kitchen appears clean and well organized.

Health and Hygiene

591-1-1-.10 Diapering Areas & Practices(CR) **Not Met**

Finding
591-1-1-.10(1) requires Centers first licensed after March 1, 1991, and Centers that are renovated after March 1, 1991, to provide ventilation in the diapering areas with functioning exhaust fans and a duct system or by the required amount of window space provided by operable windows when open. It was determined based on observation that the exhausts in diapering rooms 113, 115, 119, 118 and 116 were not working as they were not pulling the air in.

POI (Plan of Improvement)
The responsible person(s) at the center will ensure that the exhaust fans and duct systems are functioning or that the required amount of operable window space is provided in each diapering area.

Correction Deadline: 10/20/2023

Finding
591-1-1-.10(4) requires that if diapers are changed on a diaper changing surface, the surface shall be smooth, nonporous, and equipped with a guard or rails to prevent falls. Between each diaper change, the diaper changing surface shall be cleaned with a disinfectant and dried with a single-use disposable towel. It was determined based on observation that the diapering pad in room 113 had design on it and was not smooth, and the diapering surface in room 120 was not cleaned between diapering as staff diapered two consecutive children.

POI (Plan of Improvement)
The Center will ensure there is a smooth, nonporous changing surface that has a guard or rails for safety in each classroom that houses children wearing diapers. Center Staff will be trained and have adequate supplies to properly clean the diaper changing surface between each diaper change.

Correction Deadline: 10/5/2023

591-1-1-.17 Hygiene(CR) **Not Met**

Finding
591-1-1-.17(10) requires that if used potty chairs be emptied in a flush toilet after each use, cleaned with a disinfectant and stored in the bathroom. If a sink is used, the sink shall also be disinfected. It was determined based on observation that the potty chair in room 115
was not emptied and cleaned after each use, as there was urine observed in it.

POI (Plan of Improvement)
The Center will instruct staff to ensure the sanitary use of potty chairs and sinks.

Correction Deadline: 10/5/2023

Technical Assistance
591-1-1-.17(7) - Please ensure that children's hands are washed after diapering.

Correction Deadline: 10/5/2023

Technical Assistance
591-1-1-.17(8) - Please ensure that staff washes hands after each diapering.

Correction Deadline: 10/5/2023

591-1-1-.20 Medications(CR) **Not Met**

Comment
The Provider currently does not dispense/administer medication.

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 there was a tube with Hydrocortisone cream in a child's bad that was stored accessible to the children. There was no incident or injury and the medication was not handled or injested by a child.

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.

Correction Deadline: 10/5/2023

Organization

591-1-1-.16 Governing Body & License **Not Met**

Finding
591-1-1-.16(f) requires the Center to submit an application for an amended License at least 30 days prior to a change if there is a change in the name of the program or Center, changes in the ages of the children to be served, an increase in the regular hours of operation such that the Center would be providing evening or night-time care in addition to day-time care, changes in the services provided, or additions to or changes in the use of the building by the licensed Center. If an emergency situation arises which makes it impossible to give thirty (30) days' notice, the management of the Center shall notify the Department by telephone and shall submit an application for an amended License as soon as management becomes aware of the change that will be necessitated by the emergency situation. In no case, however, shall a new owner operate the Center without first securing a new License or Permit from the Department. It was determined based on observation that the program did not submit an application for an Amendment to add the second Playground, combine the two Infant rooms and add Chapel as a special use space. Technical Assistance was offered at previous visit\.

POI (Plan of Improvement)
An application for amendment and all necessary documentation will be submitted.

Correction Deadline: 10/12/2023

Policies and Procedures

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

Comment
Program observed complete emergency drills

Safety

591-1-1-.05 Animals **Met**

Comment
Center does not keep animals on premises.

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

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

591-1-1-.13 Field Trips(CR) **Met**

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

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) **Not Met**

Technical Assistance
591-1-1-.30(1)(a)2 - Please ensure that the crib mats with tears that were not used are removed from the room.

Correction Deadline: 10/5/2023

Technical Assistance
591-1-1-.30(1)(b)1 - Please ensure that the mats used for naps are at least teo inches thick and have no tears.

Correction Deadline: 10/5/2023

Technical Assistance
591-1-1-.30(1)(b)3 - Please ensure that the sheets for the mats are not touching when stored.

Correction Deadline: 10/5/2023

Finding

591-1-1-.30(2) requires the Center to provide a safe sleep environment in accordance with American Academy of Pediatrics (AAP), Consumer Product Safety Commission (CPSC) and American Society for Testing and Materials (ASTM) recommendations as listed in these rules for all infants. Center Staff shall place an infant to sleep on the infant's back in a crib unless the Center has been provided a physician's written statement authorizing another sleep position for that particular infant that includes how the infant shall be placed to sleep and a time frame that the instructions are to be followed. When an infant can easily turn over from back to front and back again, Staff shall continue to put the infant to sleep initially on the infant's back but allow the infant to roll over into his or her preferred position and not re-position the infant. Sleepers, sleep sacks and wearable blankets that fit according to the commercial manufacturer's guidelines and will not slide up around the infant's face may be used when necessary for the comfort of the sleeping infant. Swaddling shall not be used unless the Center has been provided a physician's written statement authorizing its use for a particular infant that includes instructions and a time frame for swaddling the infant. Center Staff shall not place objects or allow objects to be placed in or on the crib with an infant such as but not limited to toys, pillows, quilts, comforters, bumper pads, sheepskins, stuffed toys, or other soft items and shall not attach objects or allow objects to be attached to a crib with a sleeping infant, such as, but not limited to, crib gyms, toys, mirrors and mobiles. It was determined based on observation that two Infants were swaddled and asleep and there was no written physician statement with instructions and time frame to use. There was no injury observed.

POI (Plan of Improvement)
The center will obtain the required physician statements. The Center will take all steps necessary to provide a safe sleep environment for infants as listed in these rules; will train Staff to follow these rules; and will monitor for compliance.

Correction Deadline: 10/5/2023

Staff Records

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

Comment
Criminal record checks were observed to be complete.

Comment
Director provided five file(s) for employees hired since last visit.

Correction Deadline: 6/20/2023

Corrected on 10/5/2023
.09(1)(a) - Previous citation was corrected.

Correction Deadline: 6/20/2023

Corrected on 10/5/2023
.09(1)(c) - Previous citation corrected as satisfactory background checks were observed for all staff.

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 Director and six staff did not have evidence of current CPR and First Aid training on file.

POI (Plan of Improvement)
The center is scheduled to have the training next month. 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: 11/4/2023

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 review of records that there was no evidence of Initial Staff Orientation for seven staff.

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: 10/5/2023

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 six staff did not have evidence of the Health and Safety Orientation training within the 90 days of hire.

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: 11/4/2023

Comment
591-1-1-.33(4) - Please ensure that the cook and the Director complete four hours of Nutrition training within their first 12 months of employment.

Correction Deadline: 11/4/2023

Technical Assistance
591-1-1-.33(5) - Please ensure that annual training is completed for all staff after the first year of hire.

Correction Deadline: 11/4/2023

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

Comment
Discussed that all lead staff must enroll in an approved education program within 6 months of hire and complete degree within 18 months.

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) **Technical Assistance**

Technical Assistance
591-1-1-.32(7) - Please ensure that there is watchful oversight during use of the bathroom in the hallway.

Correction Deadline: 10/5/2023