

### 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: 7/14/2022 VisitType: EX-Monitoring Arrival: 12:30PM Departure: 1:50PM

EX-44238 EXMT-7687 EX-1 - Government DeKalb County Recreation, Parks and Cultural Affairs Department - Midway Recreation Center

3181 Midway Road, Decatur GA 30032 DeKalb

County

(404) 286-3361 bareese@dekalbcountyga.gov

**Mailing Address** 

**Regional Consultant** 

Melissa McFarlin

Phone: (770) 359-5224 Fax: (770) 302-9130

melissa.mcfarlin@decal.ga.gov

Joint with:

Compliance Zone Designation			Prevention Action Category IntermediateAction Category		<u>Dismissal Action</u> Category
7/14/2022	EX-Monitoring	Intermediate	Prevention Level 1 (P1)	Intermediate Level 1 (I1)	Dismissal (D)
			Technical Assistance	Corrective Action Plan	Dismissal
				Office Conference	Disqualification
			Prevention Level 2 (P2)	Intermediate Level 2 (I2)	
			Citation	Fine (Level1 or 2)	
			Plan of Improvement		
			Prevention Level 3 (P3)	Intermediate Level 3 (I3)	

### Staff: Child Ratios

Room Description	Age Groups	Staff Count	Children Count	State Ratio Met	Notes
Gym		0	0	Y	
Multi Purpose		0	0	Y	
Room 1	, Sixes	1	15		The remainder of the children enrolled in the program were on a field trip.

Group Sizes Met? Y

Total # Non-Care Staff Present: 0

#Staff Count: 1

#Children Count: 15

#### Comments:

On July 14, 2022, an on-site visit was conducted at the facility for the purpose of a CAPS monitoring visit and an administrative review was completed July 21, 2022, to review required documents.

Corrective Action Plan: Developed This Date



Please refer the website, <a href="http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx">http://www.decal.ga.gov/CCS/RulesAndRegulations.aspx</a>, 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

By signing this report I acknowledge that the report was discussed with me and if there are any missing requirements I am responsible for submitting them as outlined to Maximus or the CAPS program.

You have the right to refute any of the citations noted in this report with which you disagree. To refute a citation(s), e-mail the following information to CCSRefutations@decal.ga.gov.

- 1. Facility name, program number and visit date
- 2. Your name, title/relationship to the facility, e-mail address & up to two phone number(s) where you can be reached
- 3. Specific standard(s) that you are refuting, along with your concerns or questions regarding the citation
- 4. Refutations must be submitted to Child Care Services (CCS) within 10 business days of the completion date of the visit to the facility.
- 5. Your refutation will be forwarded to the CCS Exemptions Unit manager, who will follow up with you about your concerns. If you have any questions about this process, contact our office at 770-293-5977.

Any violation which subjects a child to injury or life threatening situation or continued non-compliance may jeopardize participation in the CAPS program for eligible license-exempt program (government-owned facilities and day camps).

Director/Person-in-charge Signature	_
Printed Name	Date
Specialist Signature	Date



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# (Summary Report)

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Joint with:

### The following information is associated with a Exemption Monitoring:

# **Activities and Equipment**

### **EX-HS-.F Equipment & Toys (CS)**

Met

#### Comment

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

# EX-HS-.Q Swimming Pools & Water-related Activities (CS)

Met

#### Comment

The program utilizes the DeKalb County Aquatic Area-Midway pool. The pool has adequate fencing and certified staff. The consultant discussed supervision with the program, the staff members associated with the exemption program must be present at all times during all water activities.

# Children's Records

EX-HS-.C Not Met

### **Finding**

EX-HS-.C(3) requires Program Staff to maintain a file for each child that includes documentation of incidents requiring professional medical attention, other than simple first aid performed by Program Staff, to include: child's name, type of illness or injury, date of illness or injury, how injury or illness occurred, Staff present, method of notifying Parent(s) and services provided to the child. It was determined based on the consultant's review of submitted documentation that the program did not provide any evidence of immunization, CAPS certificates or records for each child on file. The program was unable to produce the records and make them available for review to the department.

### POI (Plan of Improvement)

The Program will maintain complete and updated records of immunization, incident reports, child records and all other required information on file while children are in the program and one year after children have exited the program. This information will be made available to the department for review when requested.

Correction Deadline: 7/14/2022

Exemptions

### **EX-HS-.X Exemption Requirements (NCP)**

**Not Met** 

### **Finding**

EX-HS-.X(4) requires the program to comply with local, regional, and state health department, fire marshal, fire prevention, and building/zoning guidelines. It was determined based on the consultant's review of documentation that compliance with the fire safety agencies could not be ascertained as a recent Fire Marshal inspection report (dated within 12 months) was not submitted for review to the department.

### POI (Plan of Improvement)

The Program will have a Fire Inspection conducted and maintain a recent Fire Marshal inspection report (dated within 12 months) on file for review.

Correction Deadline: 7/14/2022

Facility

EX-HS-.B Technical Assistance

### **Technical Assistance**

EX-HS-.B(4) - Staff will ensure the bathrooms are equipped with soap, toilet tissue and single-use towels or cloth towels used only once between launderings.

#### **Technical Assistance**

EX-HS-.B(5) - Program Staff will ensure bathrooms are cleaned daily with a disinfectant to prevent the spread of contagious diseases.

### **EX-HS-.L Physical Plant (NCP)**

**Technical Assistance** 

#### **Technical Assistance**

EX-HS-.L(3) - Staff will ensure that items that pose a hazard are inaccessible to children, including but not limited to all cleaning agents. Cleaning agents should be immediately locked and stored in a secure area made inaccessible to children after cleaning.

### **EX-HS-.M Playgrounds (CS)**

**Technical Assistance** 

#### Comment

The program utilizes the DeKalb County Midway public park/ playground, the program will ensure the playground is checked prior to play and if needed discuss the maintenance of resilient surface with DeKalb county. The program staff will ensure to communicate if the resilient surfacing needs to be fluffed and redistributed.

#### **Technical Assistance**

EX-HS-.M(3) - The program utilizes the DeKalb County Midway public park/ playground, the program will ensure the playground is checked and cleaned prior to play and communicate to DeKalb county if the personnel responsible for cleaning the park does not ensure the playground is kept clean, free from litter, free of hazards and trash cans emptied frequently.

Health and Hygiene

# EX-HS-.U Diapering Areas & Practices (CS)

N/A

# Comment

No diapered children are enrolled in the program.

### **EX-HS-.H Hygiene (NCP)**

**Not Evaluated** 

#### Comment

Hand washing was not observed during the visit but proper hand washing rules were discussed.

### **EX-HS-.I Medications (CS)**

N/A

#### Comment

Medication is not dispensed to the children enrolled in the program.

**Policies and Procedures** 

**Not Met** 

#### Finding

EX-HS-.J(1)(a-i) requires the Program to establish and implement written policies and procedures that describe the Program's operations as follows: (a) the exclusion of children with contagious illness; (b) notification of parents in the event their child becomes ill while at the facility; (c) the notification of all parents of enrolled children when a reportable contagious illness is present in the facility; (d) the prevention of and response to food and allergic reactions; (e) emergency preparedness and response. A written plan for handling emergencies, including but not limited to severe weather, loss of electrical power or water and death, serious injury or loss of a child, a threatening event, or natural disaster which may occur at the program. The program will have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, and continuity of operations. The plan must apply to all children in care and will include specific accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions. Such plan shall include assurance that no Personnel will impede in any way the delivery of emergency care or services to a child by licensed or certified emergency health care professionals; (f) the handling and appropriate disposal of bodily fluids and storage of hazardous materials (soiled clothing and bedding); (g) recognition and reporting of child abuse and neglect; (h) fire drills will be conducted monthly and tornado and other emergency situation drills will be conducted every six months. The Program shall maintain documentation of the dates and times of these drills for two years; (i) provide to Parents a copy of the Program's written policies and procedures. It was determined based on the consultant's review of records that evidence of written policies and procedures that describe the Program's operations and emergency preparedness including fire and tornado drills were not available or confirmed on this date.

# POI (Plan of Improvement)

The Program will maintain evidence of written policies and procedures that describe the Program's operations and emergency preparedness including fire and tornado drills and make the information available for review by the department.

Correction Deadline: 7/19/2022

### **EX-HS-.T Required Reporting (NCP)**

N/A

#### Comment

There were no incidents or injuries that required reporting.

**Safety** 

EX-HS-.S Not Met

### **Finding**

EX-HS-.S(1) requires Program Staff to obtain written permission from parents in advance of the child's participation in any field trip and such permission must be signed and dated by a parent. It was determined based on the consultant's review of documentation that written permission from Parents could not be ascertained as written permission from Parents were not submitted for review to the department.

### POI (Plan of Improvement)

The Program will ensure to obtain written permission from parents in advance of the child's participation in any field trip, and all other required information on file while children are in the program and one year after children have exited the program. This information will be made available to the department for review when requested.

Correction Deadline: 7/14/2022

### EX-HS-.E Discipline (CS)

Met

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#### Comment

Staff were observed to maintain an age appropriate learning environment on this date.

### **EX-HS-.R Transportation (CS)**

Not Met

#### Finding

EX-HS-.R(1)(a) requires an annual safety check for each vehicle. The annual safety check, completed by a trained individual, should include a check of the: tires, headlights, horn, taillights, turn signals, brake lights, brakes, suspension, exhaust system, steering, windows, windshields and windshield wipers. A copy of the annual safety check will be kept in the Program or on the vehicle and should include evidence of any repairs and/or replacements that were identified as needed on the inspection report. It was determined based on the consultant's review of documentation that the annual safety check could not be ascertained as the annual safety check verification was not submitted for review to our department. The vehicle used for transportation was not evaluated, as the vehicle was used for a field trip and not at the facility on this date.

### **POI** (Plan of Improvement)

The Program will maintain evidence of the annual safety check and make the information available for review by the department.

### Correction Deadline: 7/19/2022

### **Finding**

EX-HS-.R(7)(c)2. requires that the driver or other designated person shall immediately document in writing, with a check or other mark/symbol to account for each child listed on the passenger transportation checklist each time a child enters and exits the vehicle. The driver or other designated staff person shall document in writing with a different mark/symbol to account for each child listed on the passenger transportation checklist who was not present on the vehicle for any reason. An explanation shall be documented in writing whenever a child is transported to a field trip site but is not present on the return trip to the Program. It was determined based on the consultant's review of documentation that the passenger transportation checklist could not be ascertained as the passenger transportation checklists were not submitted for review to our department.

### **POI** (Plan of Improvement)

The Program will will maintain complete and updated records of passenger transportation checklists and all other required information on file while children are in the program and one year after children have exited the program. This information will be made available to the department for review when requested.

Correction Deadline: 7/15/2022

# **Sleeping & Resting Equipment**

EX-HS-.V Safe Sleeping and Resting Requirements (CS)

N/A

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### Comment

Staff # 1

Staff # 2

Staff #3

No infants are enrolled in the program.

# **Staff Records**

### **Records Reviewed: 14**

### Records with Missing/Incomplete Components: 14

"Missing/Incomplete Components"

Not Met

EX-HS-.D-Criminal Records Check Missing

"Missing/Incomplete Components"

Not Met

EX-HS-.D-Criminal Records Check Missing

"Missing/Incomplete Components"

Not Met

EX-HS-.D-Criminal Records Check Missing

Staff # 4 Not Met

Staff # 13 Not Met

"Missing/Incomplete Components"

EX-HS-.D-Criminal Records Check Missing

Staff # 14 Not Met

"Missing/Incomplete Components"

EX-HS-.D-Criminal Records Check Missing

EX-HS-.K Not Met

v2.0

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#### **Finding**

EX-HS-.K(1) requires the Program 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 the consultant's review of submitted documentation that the program did not provide any evidence that the program keeps staff records on file. The program was unable to produce fourteen (14) of fourteen (14) staff records and make them available for review to the department.

### POI (Plan of Improvement)

The Program will maintain complete and updated staff records on file, this information will be made available to the department for review when requested.

Correction Deadline: 7/19/2022

### EX-HS-.D Criminal Records and Comprehensive Background Checks (CS)

**Not Met** 

#### **Finding**

EX-HS-.D(1) requires every staff member with direct care responsibilities must have a Satisfactory Criminal Records Check Determination before the individual is present at the program while any child is present for care. It was determined based on the consultant's review of Criminal Records Checks that fourteen (14) of fourteen (14) staff members did not have a Satisfactory Criminal Records Check Determination before the staff members were present at the program while children were present for care which is required. Individuals not associated with the program and without a Satisfactory Criminal Records Check Determination had access to children.

### POI (Plan of Improvement)

The Program will will ensure Satisfactory Criminal Records Check Determination before the staff member is present at the program while any child is present for care. The program will also ensure Individuals not associated with the program and without a Satisfactory Criminal Records Check Determination will not have access to children.

Correction Deadline: 7/14/2022

### **EX-HS-.W First Aid & CPR (NCP)**

Not Met

# Finding

EX-HS-.W(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 the consultant's review of submitted documentation that the program did not provide any evidence of CPR and first aid for fourteen (14) of fourteen (14) staff members. The program was unable to produce the records and make them available for review to the department.

### POI (Plan of Improvement)

The Program will will maintain complete and updated staff records including CPR and first aid while staff are employees at the program and one year after the staff members have exited the program. This information will be made available to our department for review when requested.

Correction Deadline: 8/13/2022

### **EX-HS-.P Staff Training (NCP)**

Not Met

#### **Finding**

EX-HS-.P(3) requires each staff member with direct care responsibilities to complete health and safety training at the time of employment that will count toward required annual training: Staff employed prior to September 30, 2016 will complete the training by December 29, 2016 and Staff employed after September 30, 2016 will complete the health and safety training within the first 90 days of employment. It was determined based on the consultant's review of submitted documentation that the program did not provide any evidence that the program maintains staff training on file. The program was unable to produce fourteen (14) of fourteen (14) staff records and make them available for review to the department.

### POI (Plan of Improvement)

The Program will will maintain complete and updated staff records while staff are employees at the program and one year after the staff members have exited the program. This information will be made available to the department for review when requested.

Correction Deadline: 8/13/2022

**Staffing and Supervision** 

EX-HS-.O Staff: Child Ratios and Supervision (CS)

Met

### Comment

Adequate supervision observed on this date.