

### 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:** 2/7/2023 Arrival: 8:30 AM Departure: 10:15 AM VisitType: Licensing Study

## CCLC-49963 **Brinkley's Day Care Center**

111 Zebulon Street Barnesville, GA 30204 Lamar County

(770) 358-4000 joannejones53@att.net

### Regional Consultant

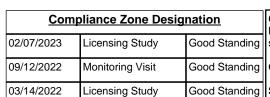
Brandi Mangino

Phone: (478) 314-9726 Fax: (478) 599-0169

brandi.mangino@decal.ga.gov

#### **Mailing Address** Same





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	B-2R/ 1's &2's	Two Year Olds	1	7	С	15	С	NA	NA	Centers
Main	C-1L/3 and up	Three Year Olds and Four Year Olds	2	16	С	22	С	30	С	Transitioning,Ce nters,Breakfast
		Total Capacity @35 sq. ft.: 37			Total Capacity @25 sq. ft.: 0			`		
Total # Cl	hildren this Date: 23	Total Capacity @35 sq. ft.: 3	7		Total C	apacity @	25 sq.			

ft.: 0

Building	Playground	Playground Occupancy	Playground Compliance
Main	Playground A- 6wk-2 year	10	С
Main	Playground B- 3 and up	74	С

#### Comments

Plan of improvement developed this date.

Plan of Improvement: Developed This Date 02/07/2023

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, <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

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 <u>www.decalkoala.com</u> 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 <a href="mailto:qualityrated@decal.ga.gov">qualityrated@decal.ga.gov</a> for more information. Free techincal assistance is available!

loAnne Jones, Program Official	Date	Brandi Mangino, Consultant	Date



### Bright from the Start Georgia Department of Early Care and Learning 2 Martin Luther King Jr. Drive SE, 670 East Tower Atlanta, GA 30334

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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 **Not Met** 

### **Finding**

591-1-1-.03(2) requires the Center to keep current lesson plans on site that reflect appropriate instruction practices and activities to support children's development The Center shall have sufficient and varied play and learning equipment and materials to support the above program of activities in all developmental areas. It was determined based on observation that Room B did not have current lesson plans as the posted ones were from January. When staff were asked a un dated lesson plan was provided.

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

The Center will keep current lesson plans on site that include appropriate instruction practices and activities and will have sufficient and varied play and learning equipment and materials to support the activities.

Correction Deadline: 2/7/2023

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

Met

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

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

Not Evaluated

#### Comment

Center does not provide swimming activities.

**Children's Records** 

**Records Reviewed: 5** 

Records with Missing/Incomplete Components: 2

Not Met

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Child #3

"Missing/Incomplete Components"

.08(3)-Address of Release Person Missing

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**Records Reviewed: 5** 

Records with Missing/Incomplete Components: 2

Child # 5 Not Met

"Missing/Incomplete Components"

.08(3)-Address of Release Person Missing

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

**Technical Assistance** 

#### **Technical Assistance**

Please ensure that full address' are listed for release person(s).

Correction Deadline: 2/7/2023

**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

#### **Technical Assistance**

Consultant discussed the metal piece at the bottom of the door (oustide part) was coming off and needed repair.

#### Correction Deadline: 3/9/2023

### 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 the following items were accessible to children in care:

#### Room B:

in unlocked diapering station: baby lotion and baby wipes cubbies: baby wipes that posed a suffocation hazard

#### Room C:

a door was unlocked that lead to the laundry room: bleach, laundry detergent, mop, broom

### 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: 2/7/2023

### 591-1-1-.26 Playgrounds(CR)

**Not Met** 

Correction Deadline: 9/22/2022

Corrected on 2/7/2023 .26(6) - Citation corrected. Correction Deadline: 9/19/2022

Corrected on 2/7/2023 .26(7) - Citation corrected.

### **Finding**

591-1-1-.26(8) requires climbing and swinging equipment to have a resilient surface beneath the equipment and the fall zone from such equipment must be adequately maintained by the Center to assure continuing resilience. It was determined based on observation that the resilient surfacing under the wooden climbers and yellow climber inadequate in that approximately four inches was present when six was required.

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

The Center will add additional resilient surfacing to the fall zones where needed and check daily, adding resilient surfacing as needed to maintain adequate resilience.

Correction Deadline: 2/21/2023

#### Recited on 2/7/2023

### **Finding**

591-1-1-.26(9) requires the playground to be kept clean, free from litter and free of hazards, such as but not limited to rocks, exposed tree roots and exposed sharp edges of concrete. It was determined based on observation that the concrete around the ball goal was not flush and a black tarp around the drain was exposed both of which posed a tripping hazard. It was further determined that the yellow sides had black reside on them and were in need of being cleaned.

### POI (Plan of Improvement)

The Center will remove any litter and fix or remove hazards from the playground and will routinely monitor the playground and remove litter and hazards.

Correction Deadline: 2/7/2023

Food Service

### 591-1-1-.18 Kitchen Operations

**Not Met** 

### **Finding**

591-1-1-.18(8) requires that containers of food be stored above the floor on clean surfaces protected from splash and other contamination. Containers for food storage other than the original container or package in which the food was obtained shall be impervious and non-absorbent, have tight-fitting lids or covers and labeled as to contents. It was determined based on a review of records that food items were in plastic bags in the freezer and not the original container and not labeled as to their contents.

### POI (Plan of Improvement)

The Center will designate an appropriate area for the storage of containers of food, will make available containers, lids, and covers, and will train Staff on proper storage and labeling.

Correction Deadline: 2/7/2023

**Health and Hygiene** 

#### 591-1-1-.10 Diapering Areas & Practices(CR)

Met

#### Comment

Hand washing requirements for diapering were discussed with the director on this date.

#### 591-1-1-.17 Hygiene(CR)

**Not Met** 

#### **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 a staff member in Room B did not wash hands prior to diapering and only placed on gloves.

### 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: 2/7/2023

### 591-1-1-.20 Medications(CR)

Met

#### Comment

Per the center director no medication has been diapensed since the last regulatory visit.

### **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 a review of records that a tornado drill or lockdown drill was not conducted for 2022 year and 2023 year thus far.

### **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: 2/12/2023

#### **591-1-1-.27 Posted Notices**

**Technical Assistance** 

#### **Technical Assistance**

Please ensure that director designee is posted within viewing.

Correction Deadline: 2/7/2023

### 591-1-1-.29 Required Reporting

**Not Met** 

#### **Finding**

591-1-1-.29(2) requires the Director or designated person-in-charge to report or cause to be reported any cases or suspected cases of notifiable communicable diseases (COVID-19, Tuberculosis, Measles, etc.) or any viruses or illnesses identified during a public health emergency, immediately to the Department and to the local County Health Department as required by the rules of the Georgia Department of Public Health, Rule 511-2-1, Notification of Disease. It was determined that on Januarry 23, 2023 consultant made an attempted visit to the center to find the center closed. The center director was outside and stated that the center was closed due to staffing and noted COVID related. No required report was made in decal koala.

#### POI (Plan of Improvement)

The Center will develop a procedure so everyone knows how and when to report cases of suspected notifiable communicable diseases to the County Health Department and will follow-up to make sure they are reported as required.

Correction Deadline: 2/7/2023

Safety

### 591-1-1-.11 Discipline(CR)

Met

#### Comment

Age-appropriate discussion and/or redirection observed.

### 591-1-1-.36 Transportation(CR)

**Not Evaluated** 

#### Comment

Center does not provide routine transportation.

**Sleeping & Resting Equipment** 

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### 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)

Met

#### Comment

Consultant requested to view all Criminal Record checks for employees hired after last visit. Director stated that there have been no new hires since last visit

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591-1-1-.14 First Aid & CPR

Met

#### Comment

Please replace/add missing/expired item(s) in first aid kit(s).

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

Correction Deadline: 9/12/2022

Corrected on 2/7/2023 .32(7) - Citation corrected.