



**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:** 9/1/2022    **VisitType:** Incident Investigation/Licensing Study    **Arrival:** 12:40 PM    **Departure:** 5:40 PM

**CCLC-262**

**West Chatham YMCA Child Learning Center**

167 Isaac G Laroche Drive Pooler, GA 31322 Chatham County  
 (912) 748-1408 Sara.kennedy@ymcaofcoastalga.org

**SysAdmin**

Chrissy Miller  
 Phone: (770) 408-5457  
 Fax: (770) 408-5461  
 chrissy.miller@decal.ga.gov

**Mailing Address**  
 Same

**Quality Rated:** ★ ★

<u>Compliance Zone Designation</u>		
09/01/2022	Incident Investigation/Licensing Study	Good Standing
09/01/2022	Incident Investigation Closure	Good Standing
06/09/2022	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
A/S building	adult gym		0	0	C	108	C	NA	NA	
A/S building	conference room		0	0	C	13	C	NA	NA	
A/S building	Gym		0	0	C	163	C	NA	NA	
A/S building	kid fit gym		0	0	C	28	C	NA	NA	
Total Capacity @35 sq. ft.: 175						Total Capacity @25 sq. ft.: 0		Building @35 capacity limited by Insufficient Toilets/Sinks		
Child Learning Center	1st left	Infants and One Year Olds	2	5	C	13	C	NA	NA	Floor Play,Nap
Child Learning Center	1st right		0	0	C	10	C	NA	NA	
Child Learning Center	2nd left(PK)	One Year Olds and Two Year Olds and Three Year Olds	3	13	C	19	C	NA	NA	Nap
Child Learning Center	2nd right	Infants	2	3	C	14	C	NA	NA	Nap
Child Learning Center	3rd left	One Year Olds and Two Year Olds	2	9	C	17	C	NA	NA	Nap

Child Learning Center	3rd right	One Year Olds	3	9	C	15	C	NA	NA	Nap
Child Learning Center	4th left	GA PreK	3	12	C	30	C	NA	NA	Nap
Child Learning Center	4th right(PK)	Two Year Olds and Three Year Olds	2	19	C	22	C	NA	NA	Nap
Total Capacity @35 sq. ft.: 138					Total Capacity @25 sq. ft.: 0		Building @35 capacity limited by Insufficient Toilets/Sinks			
Total # Children this Date: 70			Total Capacity @35 sq. ft.: 313		Total Capacity @25 sq. ft.: 0					

Building	Playground	Playground Occupancy	Playground Compliance
Child Learning Center	back left, twos	46	C
Child Learning Center	front left, toddlers	35	C
Child Learning Center	preschool/AS PG	74	C


**Comments**

This is the first regulatory visit of the fiscal year.

Per the Director, the center does not currently dispense medication, provide field trips, or swimming activities.

Plan of Improvement: Developed This Date 09/01/2022

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.dec.al.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](http://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)



**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 [qualityrated@dec.al.ga.gov](mailto:qualityrated@dec.al.ga.gov) for more information. Free technical assistance is available!**

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Sara Kennedy, Program Official

Date

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Chrissy Miller, Consultant

Date



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**(Findings Report)**

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The following information is associated with a Licensing Study Visit:

**Activities and Equipment**

**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**

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

**Technical Assistance**

**Technical Assistance**

591-1-1-.08(1) - Please ensure that the parents/guardians listed on the enrollment form have their work information (business phone number and business address) listed on the form.

**Correction Deadline: 9/1/2022**

**Facility**

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

**Met**

**Comment**

Licensed capacity observed to be routinely met by center.

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

591-1-1-.25(12) requires heating and cooling equipment to be protected to prevent children from touching it. Fans, space heaters, etc. shall be positioned or installed so as to be inaccessible to the children. It was determined based on the consultant's observation that the fans/cooling equipment was accessible to the children in the 3rd, left classroom and the 4th, left classroom, during naptime.

**POI (Plan of Improvement)**

The Center will re-position or re-install equipment, as needed, and will make all such equipment inaccessible to children.

**Correction Deadline: 9/23/2022**

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**591-1-1-.26 Playgrounds(CR)****Not Met****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 resiliency. It was determined based on the consultant's observation that the preschool/AS playground was measuring more than zero inches but less than six inches of mulch under the sliding and climbing equipment where at least six inches of resilient surfacing is 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 resiliency.

**Correction Deadline: 10/3/2022**

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**Food Service**

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

Please ensure that bottles are covered and fully labeled with child's full name.

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**591-1-1-.18 Kitchen Operations****Technical Assistance****Technical Assistance**

591-1-1-.18(8) - Please ensure that containers for food storage other than the original container or package in which the food was obtained are labeled as to contents.

**Correction Deadline: 9/1/2022**

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**Health and Hygiene**

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

Staff state proper knowledge of diapering procedures.

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**591-1-1-.17 Hygiene(CR)****Met****Comment**

The staff stated proper knowledge of hand washing procedures during the visit The consultant also observed hand washing supplies at the sinks.

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

The Provider currently does not dispense/administer medication.

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**Policies and Procedures**

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**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 the consultant's review of records that the center did not have evidence of completing tornado and lockdown drills every six months, as required.

**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: 9/30/2022****Finding**

591-1-1-.21(1)(p) requires the Center to have 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 Center; to 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 include specific accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions and shall include assurance that no Center Personnel will impede in any way the delivery of emergency care or services to a child by licensed or certified emergency health care professionals. It was determined based on the consultant's review of records that the center did not have evidence of written emergency plans, as requested.

**POI (Plan of Improvement)**

The Center will write or revise an emergency plan that includes all of the required items.

**Correction Deadline: 9/30/2022**

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**591-1-1-.27 Posted Notices****Met****Comment**

Please make sure that all required signs are posted and up to date.

<b>Safety</b>
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**591-1-1-.11 Discipline(CR)****Met****Comment**

Age-appropriate discussion and/or redirection observed.

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**591-1-1-.36 Transportation(CR)****Not Met****Comment**

Observed the transportation log and transportation procedures for the PM route from West Chatham Elementary to the center on September 1, 2022.

**Finding**

591-1-1-.36(3)(a-b) requires any Center that provides any type of transportation to obtain two (2) hours of state-approved or state-accepted transportation training, biannually, for the Director and for each person responsible for or who participates in the transportation of children. The training shall include, but is not limited to, a review of the transportation rules, a review of approved transportation forms and procedures, and instruction on the usage and completion of the forms and procedures. This training may be counted as part of the annual training requirements for Staff. It was determined based on the consultant's observation that the staff member #8, staff member #18, and staff member #35 who participated in routine transportation on September 1, 2022 did not have evidence of transportation training, as required.

**POI (Plan of Improvement)**

The Center will ensure that the Director, Center Staff, and any person responsible for the transportation of children has completed the required transportation training.

**Correction Deadline: 9/30/2022**

**Finding**

591-1-1-.36(7)(d)2. requires that the second designated Staff person conduct a check of the vehicle immediately upon the completion of the first check of the vehicle. The responsible person shall physically walk through the entire vehicle; visually inspect all seat surfaces, under all seats and in all compartments or recesses in the vehicle's interior; and sign the passenger transportation checklist(s), indicating all of the children have exited the vehicle. There shall be continuous watchful oversight of the vehicle between the first check and second check. It was determined based on the consultant's observation of routine transportation that a second check of the vehicle was not completed by a staff member immediately upon the first check of the vehicle on September 1, 2022. Additionally, the second check was signed but was not observed to be conducted by the staff member.

**POI (Plan of Improvement)**

The Center will train Staff who are or may be involved in transporting children in how to thoroughly inspect a vehicle and properly complete transportation documentation. The Center will review and monitor.

**Correction Deadline: 9/1/2022**

**Sleeping & Resting Equipment**

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

**Not Met**

**Comment**

Cleaning and disinfecting of mats was discussed with the staff on this date.

**Finding**

591-1-1-.30(1)(a)3 requires that each crib shall have only an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant. It was determined based on the consultant's observation that two out of five crib sheets in the 1st, left classroom had small holes in the crib sheets.

**POI (Plan of Improvement)**

The center will ensure that each crib has an individual, tight-fitting sheet which is changed daily or more often as needed and prior to a change of occupant.

**Correction Deadline: 9/1/2022**

**Staff Records**

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

**Technical Assistance**

**Technical Assistance**

591-1-1-.09(1)(j) - Discussed that staff, to include, Directors, Employees and Provisional Employees, excluding Students-in-Training, must be ported electronically under the current department issued CCLC number. A Center may accept a satisfactory Fingerprint Records Check Determination letter or a satisfactory Comprehensive Records Check Determination letter issued by the Department if the Records Check Clearance Date is within the preceding 12 months from the hire date, the individual has not had a lapse of employment from the child care industry that lasted for 180 days (6 months) or longer, and the Center does not know or reasonably should not know that the individual's satisfactory status has changed.

**Correction Deadline: 9/1/2022**

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

**Not Met**

**Comment**

Evidence observed of 50% of center staff certified in First Aid and CPR.

**Finding**

591-1-1-.14(1)(a) requires, in a Center that provides transportation, that either the driver or another Staff person present on the vehicle have current evidence of successful completion of a biennial training program in cardiopulmonary resuscitation (CPR) and a triennial training program in first aid offered by certified or licensed health care professionals or trainers and which dealt with the provision of emergency care to infants and children. It was determined based on the consultant's review of records that the staff member #18 and staff member #35 did not have evidence of completing CPR and first aid before participating in transportation on September 1, 2022.

**POI (Plan of Improvement)**

The Center will verify proof of CPR/1st aid training and schedule Staff so that there is always a staff person on the vehicle with this training.

**Correction Deadline: 9/1/2022**

**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 the consultant's review of records that the center was missing evidence of the 10 year work history for staff member #12. Additionally, the center was missing evidence of a personnel file for staff member #18, staff member 24, and staff member #35.

**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: 9/23/2022**

**591-1-1-.33 Staff Training****Not Met****Comment**

Documentation observed of annual required staff training for January 2021 to December 2021 during the last regulatory visit on June 9, 2022.

**Comment**

Please ensure completed orientation checklists are documented and signed.

**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 the consultant's review of records that staff member #34 was missing evidence of completing health and safety training within 90 days of their hire date.



**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: 10/1/2022**

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

**Not Met**

**Finding**

591-1-1-.31(2)(b)2. requires teachers and lead caregivers to meet minimum academic requirements and qualifying experience at the time of employment. It was determined based on the consultant's review of records that staff member #3 and staff member #26 did not meet the minimum academic requirements for the Lead Teacher position.

**POI (Plan of Improvement)**

A teacher/lead caregiver will be hired that meets the minimum academic requirements and qualifying work experience.

**Correction Deadline: 9/1/2022**

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**Staffing and Supervision**

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**591-1-1-.32 Staff:Child Ratios and Group Size(CR)**

**Met**

**Comment**

Center observed to maintain appropriate staff:child ratios.

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

**Met**

**Comment**

Adequate supervision observed on this date.